



NCD Manual Changes

Date	Reason	Release	Change	Edit
The following section represents NCD Manual updates for April 2017				
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Urine Culture, Bacterial (190.12) NCD. *Transmittal #3691	*2017200		*190.12 Urine Culture, Bacterial
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Human Immunodeficiency Virus (HIV) Testing (Diagnosis) (190.14) NCD. *Transmittal #3691	*2017200		*190.14 Human Immunodeficiency Virus (HIV) Testing (Diagnosis)
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes that Do Not Support Medical Necessity for the Blood Counts (190.15) NCD. *Transmittal #3691	*2017200		*190.15 Blood Counts



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

*04/01/17	*Per CR 9934 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Partial Thromboplastin Time (PTT) (190.16) NCD. *Transmittal #3691	*2017200		*190.16 Partial Thromboplastin Time (PTT)
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Partial Thromboplastin Time (PTT) (190.16) NCD. *Transmittal #3691	*2017200		*190.16 Partial Thromboplastin Time (PTT)
*04/01/17	*Per CR 9934 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Prothrombin Time (PT) (190.17) NCD. *Transmittal #3691	*2017200		*190.17 Prothrombin Time (PT)
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Prothrombin Time (PT) (190.17) NCD. *Transmittal #3691	*2017200		*190.17 Prothrombin Time (PT)



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

*04/01/17	*Per CR 9934 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Serum Iron Studies (190.18) NCD. *Transmittal #3691	*2017200		*190.18 Serum Iron Studies
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Serum Iron Studies (190.18) NCD. *Transmittal #3691	*2017200		*190.18 Serum Iron Studies
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Collagen Crosslinks, Any Method (190.19) NCD. *Transmittal #3691	*2017200		*190.19 Collagen Crosslinks, Any Method
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Blood Glucose Testing (190.20A) NCD. *Transmittal #3691	*2017200		*190.20A Blood Glucose Testing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Blood Glucose Testing (190.20B) NCD. *Transmittal #3691	*2017200		*190.20B Blood Glucose Testing
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Glycated Hemoglobin/Glycated Protein (190.21) NCD. *Transmittal #3691	*2017200		*190.21 Glycated Hemoglobin/Glycated Protein
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Thyroid Testing (190.22) NCD. *Transmittal #3691	*2017200		*190.22 Thyroid Testing
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Lipids Testing (190.23A) NCD. *Transmittal #3691	*2017200		*190.23A Lipids Testing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

<p>*04/01/17</p>	<p>*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Lipids Testing (190.23B) NCD.</p> <p>*Transmittal #3691</p>	<p>*2017200</p>		<p>*190.23B Lipids Testing</p>
<p>*04/01/17</p>	<p>*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Digoxin Therapeutic Drug Assay (190.24) NCD.</p> <p>*Transmittal #3691</p>	<p>*2017200</p>		<p>*190.24 Digoxin Therapeutic Drug Assay</p>
<p>*04/01/17</p>	<p>*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Alpha-fetoprotein (190.25) NCD.</p> <p>*Transmittal #3691</p>	<p>*2017200</p>		<p>*190.25 Alpha-fetoprotein</p>
<p>*04/01/17</p>	<p>*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Human Chorionic Gonadotropin (190.27) NCD.</p> <p>*Transmittal #3691</p>	<p>*2017200</p>		<p>*190.27 Human Chorionic Gonadotropin</p>



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Gamma Glutamyl Transferase (190.32) NCD. *Transmittal #3691	*2017200		*190.32 Gamma Glutamyl Transferase
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD. *Transmittal #3691	*2017200		*190.33 Hepatitis Panel/Acute Hepatitis Panel
*04/01/17	*Per CR 9934 add the specified ICD-10-CM codes to the list of ICD-10-CM codes for the Fecal Occult Blood Test (190.34) NCD. *Transmittal #3691	*2017200		*190.34 Fecal Occult Blood Test
The following section represents NCD Manual updates for January 2017				
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Urine Culture, Bacterial (190.12) NCD. Transmittal #3628	2017100		190.12 Urine Culture, Bacterial



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Urine Culture, Bacterial (190.12) NCD. Transmittal #3628	2017100		190.12 Urine Culture, Bacterial
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of ICD-10-CM Codes that Do Not Support Medical Necessity for the Blood Counts (190.15) NCD. Transmittal #3628	2017100		190.15 Blood Counts
01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of ICD-10-CM codes that Do Not Support Medical Necessity for the Blood Counts (190.15) NCD. Transmittal #3628	2017100		190.15 Blood Counts
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Partial Thromboplastin Time (PTT) (190.16) NCD. Transmittal #3628	2017100		190.16 Partial Thromboplastin Time (PTT)

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Partial Thromboplastin Time (PTT) (190.16) NCD. Transmittal #3628	2017100		190.16 Partial Thromboplastin Time (PTT)
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Prothrombin Time (PT) (190.17) NCD. Transmittal #3628	2017100		190.17 Prothrombin Time (PT)
01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Prothrombin Time (PT) (190.17) NCD. Transmittal #3628	2017100		190.17 Prothrombin Time (PT)
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Serum Iron Studies (190.18) NCD. Transmittal #3628	2017100		190.18 Serum Iron Studies



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Serum Iron Studies (190.18) NCD. Transmittal #3628	2017100		190.18 Serum Iron Studies
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Blood Glucose Testing (190.20) NCD. Transmittal #3628	2017100		190.20 Blood Glucose Testing
01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Blood Glucose Testing (190.20) NCD. Transmittal #3628	2017100		190.20 Blood Glucose Testing
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Glycated Hemoglobin/Glycated Protein (190.21) NCD. Transmittal #3628	2017100		190.21 Glycated Hemoglobin/Glycated Protein

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Glycated Hemoglobin/Glycated Protein (190.21) NCD. Transmittal #3628	2017100		190.21 Glycated Hemoglobin/Glycated Protein
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Thyroid Testing (190.22) NCD. Transmittal #3628	2017100		190.22 Thyroid Testing
01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Thyroid Testing (190.22) NCD. Transmittal #3628	2017100		190.22 Thyroid Testing
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Lipids Testing (190.23) NCD. Transmittal #3628	2017100		190.23 Lipids Testing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for Lipids Testing (190.23) NCD. Transmittal #3628	2017100		190.23 Lipids Testing
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Digoxin Therapeutic Drug Assay (190.24) NCD. Transmittal #3628	2017100		190.24 Digoxin Therapeutic Drug Assay
01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Digoxin Therapeutic Drug Assay (190.24) NCD. Transmittal #3628	2017100		190.24 Digoxin Therapeutic Drug Assay
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Alpha-fetoprotein (190.25) NCD. Transmittal #3628	2017100		190.25 Alpha-fetoprotein



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Alpha-fetoprotein (190.25) NCD. Transmittal #3628	2017100		190.25 Alpha-fetoprotein
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Human Chorionic Gonadotropin (190.27) NCD. Transmittal #3628	2017100		190.27 Human Chorionic Gonadotropin
01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Human Chorionic Gonadotropin (190.27) NCD. Transmittal #3628	2017100		190.27 Human Chorionic Gonadotropin
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Prostate Specific Antigen (190.31) NCD. Transmittal #3628	2017100		190.31 Prostate Specific Antigen



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Prostate Specific Antigen (190.31) NCD. Transmittal #3628	2017100		190.31 Prostate Specific Antigen
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Gamma Glutamyl Transferase (190.32) NCD. Transmittal #3628	2017100		190.32 Gamma Glutamyl Transferase
01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Gamma Glutamyl Transferase (190.32) NCD. Transmittal #3628	2017100		190.32 Gamma Glutamyl Transferase
01/01/17	Per CR 9806 delete the specified ICD-10-CM codes from the list of covered ICD-10-CM codes for the Fecal Occult Blood Test (190.34) NCD. Transmittal #3628	2017100		190.34 Fecal Occult Blood Test

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

01/01/17	Per CR 9806 add the specified ICD-10-CM codes to the list of covered ICD-10-CM codes for the Fecal Occult Blood Test (190.34) NCD. Transmittal #3628	2017100		190.34 Fecal Occult Blood Test
The following section represents NCD Manual updates for October 2016				
10/01/16	There were no CR updates for October 2016.			
The following section represents NCD Manual updates for July 2016				
07/01/16	Per CR 9584 add ICD-10-CM codes E61.1, M79.641, M79.642, M79.644, and M79.645 to the list of covered ICD-10-CM codes for the Serum Iron Studies (190.18) NCD. Transmittal # 3485	2016300	E61.1 Iron deficiency M79.641 Pain in right hand M79.642 Pain in left hand M79.644 Pain in right finger(s) M79.645 Pain in left finger(s)	190.18 Serum Iron Studies
The following section represents NCD Manual updates for April 2016				
04/01/16	There were no CR updates for April 2016.			



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Introduction

Background

Section 4554(b)(1) of the Balanced Budget Act of 1997 (BBA), Public Law 105-33, mandated the use of a negotiated rulemaking committee to develop national coverage and administrative policies for clinical diagnostic laboratory services payable under Medicare Part B by January 1, 1999. This provision requires that these national coverage policies be designed to promote program integrity and national uniformity and simplify administrative requirements with respect to clinical diagnostic laboratory services in connection with the following:

- Beneficiary information required to be submitted with each claim or order for laboratory services;
- The medical condition(s) for which a laboratory test service is reasonable and necessary (within the meaning of section 1862(a)(1)(A) of the Social Security Act);
- The appropriate use of procedure codes in billing for a laboratory test service, including the unbundling of laboratory services;
- The medical documentation that is required by a Medicare contractor at the time a claim is submitted for a laboratory test service (in accordance with section 1833(e) of the Act);
- Record keeping requirements in addition to any information required to be submitted with a claim, including physicians' obligations regarding these requirements;
- Procedures for filing claims and for providing remittances by electronic media; and
- Limitations on frequency of coverage for the same services performed on the same individual.

On March 10, 2000, a proposed rule was published in the Federal Register (65 FR 13082) which set forth uniform national coverage and administrative policies for clinical diagnostic laboratory services. These proposed policies reflected the consensus of the Negotiated Rulemaking Committee. The final rule, published in the Federal Register on November 23, 2001 (66 FR 58788), addressed the public comments received on the proposed rule. The final rule established the national coverage and administrative policies for clinical diagnostic laboratory services payable under Medicare Part B. It promoted Medicare program integrity and national uniformity, and simplified administrative requirements for clinical diagnostic services. The 23 Lab NCDs for diagnostic lab test services, which are included in the 2001 Final Rule, are listed below.

- Culture, Bacterial, Urine
- Human Immunodeficiency Virus Testing (Prognosis including monitoring)
- Human Immunodeficiency Virus Testing (Diagnosis)
- Blood Counts
- Partial Thromboplastin Time
- Prothrombin Time
- Serum Iron Studies
- Collagen Crosslinks, Any Method



- Blood Glucose Testing
- Glycated Hemoglobin/Glycated Protein
- Thyroid Testing
- Lipids
- Digoxin Therapeutic Drug Assay
- Alpha-fetoprotein
- Carcinoembryonic Antigen
- Human Chorionic Gonadotropin
- Tumor Antigen by Immunoassay CA 125
- Tumor Antigen by Immunoassay CA 15-3/CA 27.29
- Tumor Antigen by Immunoassay CA 19-9
- Prostate Specific Antigen
- Gamma Glutamyl Transferase
- Hepatitis Panel/Acute Hepatitis Panel
- Fecal Occult Blood

What Is a National Coverage Policy?

Part B of title XVIII of the Social Security Act (the Act) provides for Supplementary Medical Insurance (SMI) for certain Medicare beneficiaries, specifying what health care items or services will be covered by the Medicare Part B program. The 23 diagnostic laboratory services described in this Manual are covered under Part B.

Services that are excluded from coverage include routine physical examinations and other services that are not reasonable and necessary for the diagnosis or treatment of an illness or injury. CMS interprets these provisions to prohibit coverage of ‘screening’ services, including laboratory test services furnished in the absence of signs, symptoms, or personal history of disease or injury, except as explicitly authorized by statute. A test service might be considered medically appropriate, but nonetheless might be excluded from Medicare coverage by statute.

A national coverage policy for diagnostic laboratory test(s) is a document stating CMS’s policy with respect to the clinical circumstances in which the test(s) will be considered reasonable and necessary, and not screening, for Medicare purposes. Such a policy applies nationwide. A national coverage policy is neither a practice parameter nor a statement of the accepted standard of medical practice. Words such as “may be indicated” or “may be considered medically necessary” are used for this reason. Where a policy gives a general description and then lists examples (following words like “for example” or “including”), the list of examples is not meant to be all-inclusive but to provide some guidance.

What Is the Effect of a National Coverage Policy?

A national coverage policy to which this introduction applies is a National Coverage Decision (NCD) under section 1862(a) (1) of the Social Security Act. Regulations on National Coverage Decisions are codified at 42 CFR 405.732(b)–(d). A Medicare contractor may not develop a local policy that conflicts with a national coverage policy.



What Is the Format for These National Coverage Policies?

Below are the headings for national coverage policies, developed by the Negotiated Rulemaking Committee on Clinical Diagnostic Laboratory Tests.

Other Names/Abbreviations

This section identifies other names for the policy. It reflects more colloquial terminology.

Description

This section includes a description of the test(s) addressed by the policy and provides a general description of the appropriate uses of the test(s).

HCPCS Codes

The descriptor(s) used in this section is (are) the Current Procedural Terminology (CPT) or other CMS Common Procedure Coding System (HCPCS). The CPT© is developed and copyrighted by the American Medical Association (AMA). If a descriptor does not accurately or fully describe the test, a more complete description may be included elsewhere in the policy, such as in the 'Indications' section.

ICD-10-CM Codes Covered by Medicare Program

This section includes 'covered' codes – that is, codes for those lab test services for which Medicare provides the presumption of medical necessity, but may review a claim for such services to determine whether the service was in fact reasonable and necessary. The 'covered' diagnosis codes are from the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM). Where the policy takes an "exclusionary" approach, as described below, this section states: "Any ICD-10-CM code not listed in either of the ICD-10-CM code sections below."

Indications

This section lists detailed clinical indications for Medicare coverage of the test(s).

Limitations

This section lists any national frequency expectations, as well as other limitations on Medicare coverage of the specific test service addressed in the policy—for example, if it would be unnecessary to perform a particular test with a particular combination of diagnoses. In addition, coding guidelines specific to the diagnostic test service addressed in the policy might be included in this section.

ICD-10-CM Codes That Do Not Support Medical Necessity

This section lists/describes generally non-covered codes for which there are only limited exceptions. However, additional documentation could support a determination of medical necessity in certain circumstances. Subject to section 1879 of the Social Security Act (the Act), 42 CFR 411, subpart K, section 7330 of the Medicare Carriers Manual section 3440-3446.9 of the Medicare Fiscal Intermediary Manual and any applicable rulings, it would be appropriate for the ordering physician or the laboratory to obtain an advance beneficiary notice from the



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beneficiary. Where the policy takes an “inclusionary” approach, as described below, this section states: “Any ICD–10–CM code not listed in either of the ICD–10–CM sections above.”

Other Comments

This section may contain other relevant comments that are not addressed in the sections above, as well as coding guidance.

Documentation Requirements

This section refers to documentation requirements for clinical diagnostic laboratory tests at 42 CFR 410.32(d) and includes any specific documentation requirements related to the test(s) addressed in the policy.

Sources of Information

Relevant sources of information used in developing a Lab NCD are listed in this section.

Note: Additional general information about ICD-10-CM codes used in Medicare can be found on the CMS website, www.cms.gov/ICD10.



Non-covered ICD-10-CM Codes for All Lab NCDs

This section lists codes that are never covered by Medicare for a diagnostic lab testing service. If a code from this section is given as the reason for the test, the test may be billed to the Medicare beneficiary without billing Medicare first because the service is not covered by statute, in most instances because it is performed for screening purposes and is not within an exception. The beneficiary, however, does have a right to have the claim submitted to Medicare, upon request.

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
R99	Ill-defined and unknown cause of mortality
Z00.00	Encounter for general adult medical examination without abnormal findings
Z00.01	Encounter for general adult medical examination with abnormal findings
Z00.110	Health examination for newborn under 8 days old
Z00.111	Health examination for newborn 8 to 28 days old
Z00.121	Encounter for routine child health examination with abnormal findings
Z00.129	Encounter for routine child health examination without abnormal findings
Z00.5	Encounter for examination of potential donor of organ and tissue
Z00.6	Encounter for examination for normal comparison and control in clinical research program
Z00.70	Encounter for examination for period of delayed growth in childhood without abnormal findings
Z00.71	Encounter for examination for period of delayed growth in childhood with abnormal findings
Z00.8	Encounter for other general examination
Z02.0	Encounter for examination for admission to educational institution
Z02.1	Encounter for pre-employment examination
Z02.2	Encounter for examination for admission to residential institution
Z02.3	Encounter for examination for recruitment to armed forces
Z02.4	Encounter for examination for driving license
Z02.5	Encounter for examination for participation in sport
Z02.6	Encounter for examination for insurance purposes

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Code	Description
Z02.71	Encounter for disability determination
Z02.79	Encounter for issue of other medical certificate
Z02.81	Encounter for paternity testing
Z02.82	Encounter for adoption services
Z02.83	Encounter for blood-alcohol and blood-drug test
Z02.89	Encounter for other administrative examinations
Z02.9	Encounter for administrative examinations, unspecified
Z04.6	Encounter for general psychiatric examination, requested by authority
Z04.8	Encounter for examination and observation for other specified reasons
Z04.9	Encounter for examination and observation for unspecified reason
Z11.0	Encounter for screening for intestinal infectious diseases
Z11.1	Encounter for screening for respiratory tuberculosis
Z11.2	Encounter for screening for other bacterial diseases
Z11.3	Encounter for screening for infections with a predominantly sexual mode of transmission
Z11.4	Encounter for screening for human immunodeficiency virus [HIV]
Z11.51	Encounter for screening for human papillomavirus (HPV)
Z11.59	Encounter for screening for other viral diseases
Z11.6	Encounter for screening for other protozoal diseases and helminthiases
Z11.8	Encounter for screening for other infectious and parasitic diseases
Z11.9	Encounter for screening for infectious and parasitic diseases, unspecified
Z12.0	Encounter for screening for malignant neoplasm of stomach
Z12.10	Encounter for screening for malignant neoplasm of intestinal tract, unspecified
Z12.13	Encounter for screening for malignant neoplasm of small intestine
Z12.2	Encounter for screening for malignant neoplasm of respiratory organs
Z12.6	Encounter for screening for malignant neoplasm of bladder
Z12.71	Encounter for screening for malignant neoplasm of testis
Z12.72	Encounter for screening for malignant neoplasm of vagina
Z12.73	Encounter for screening for malignant neoplasm of ovary
Z12.79	Encounter for screening for malignant neoplasm of other genitourinary organs
Z12.81	Encounter for screening for malignant neoplasm of oral cavity

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Code	Description
Z12.82	Encounter for screening for malignant neoplasm of nervous system
Z12.83	Encounter for screening for malignant neoplasm of skin
Z12.89	Encounter for screening for malignant neoplasm of other sites
Z12.9	Encounter for screening for malignant neoplasm, site unspecified
Z13.0	Encounter for screening for diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
Z13.21	Encounter for screening for nutritional disorder
Z13.220	Encounter for screening for lipid disorders
Z13.228	Encounter for screening for other metabolic disorders
Z13.29	Encounter for screening for other suspected endocrine disorder
Z13.4	Encounter for screening for certain developmental disorders in childhood
Z13.5	Encounter for screening for eye and ear disorders
Z13.71	Encounter for nonprocreative screening for genetic disease carrier status
Z13.79	Encounter for other screening for genetic and chromosomal anomalies
Z13.810	Encounter for screening for upper gastrointestinal disorder
Z13.811	Encounter for screening for lower gastrointestinal disorder
Z13.818	Encounter for screening for other digestive system disorders
Z13.820	Encounter for screening for osteoporosis
Z13.828	Encounter for screening for other musculoskeletal disorder
Z13.83	Encounter for screening for respiratory disorder NEC
Z13.84	Encounter for screening for dental disorders
Z13.850	Encounter for screening for traumatic brain injury
Z13.858	Encounter for screening for other nervous system disorders
Z13.88	Encounter for screening for disorder due to exposure to contaminants
Z13.89	Encounter for screening for other disorder
Z13.9	Encounter for screening, unspecified
Z36	Encounter for antenatal screening of mother
Z40.00	Encounter for prophylactic removal of unspecified organ
Z40.01	Encounter for prophylactic removal of breast
Z40.02	Encounter for prophylactic removal of ovary
Z40.09	Encounter for prophylactic removal of other organ

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Code	Description
Z40.8	Encounter for other prophylactic surgery
Z40.9	Encounter for prophylactic surgery, unspecified
Z41.1	Encounter for cosmetic surgery
Z41.2	Encounter for routine and ritual male circumcision
Z41.3	Encounter for ear piercing
Z41.8	Encounter for other procedures for purposes other than remedying health state
Z41.9	Encounter for procedure for purposes other than remedying health state, unspecified
Z46.1	Encounter for fitting and adjustment of hearing aid
Z56.0	Unemployment, unspecified
Z56.2	Threat of job loss
Z56.3	Stressful work schedule
Z56.4	Discord with boss and workmates
Z56.5	Uncongenial work environment
Z56.6	Other physical and mental strain related to work
Z56.81	Sexual harassment on the job
Z56.82	Military deployment status
Z56.89	Other problems related to employment
Z56.9	Unspecified problems related to employment
Z57.0	Occupational exposure to noise
Z57.1	Occupational exposure to radiation
Z57.2	Occupational exposure to dust
Z57.31	Occupational exposure to environmental tobacco smoke
Z57.39	Occupational exposure to other air contaminants
Z57.4	Occupational exposure to toxic agents in agriculture
Z57.5	Occupational exposure to toxic agents in other industries
Z57.6	Occupational exposure to extreme temperature
Z57.7	Occupational exposure to vibration
Z57.8	Occupational exposure to other risk factors
Z57.9	Occupational exposure to unspecified risk factor
Z59.0	Homelessness

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Code	Description
Z59.1	Inadequate housing
Z59.2	Discord with neighbors, lodgers and landlord
Z59.3	Problems related to living in residential institution
Z59.4	Lack of adequate food and safe drinking water
Z59.5	Extreme poverty
Z59.6	Low income
Z59.7	Insufficient social insurance and welfare support
Z59.8	Other problems related to housing and economic circumstances
Z59.9	Problem related to housing and economic circumstances, unspecified
Z60.2	Problems related to living alone
Z62.21	Child in welfare custody
Z71.0	Person encountering health services to consult on behalf of another person
Z74.1	Need for assistance with personal care
Z74.2	Need for assistance at home and no other household member able to render care
Z74.3	Need for continuous supervision
Z74.8	Other problems related to care provider dependency
Z74.9	Problem related to care provider dependency, unspecified
Z75.5	Holiday relief care
Z76.0	Encounter for issue of repeat prescription
Z76.1	Encounter for health supervision and care of foundling
Z76.2	Encounter for health supervision and care of other healthy infant and child
Z76.3	Healthy person accompanying sick person
Z76.4	Other boarder to healthcare facility
Z76.81	Expectant parent(s) prebirth pediatrician visit
Z80.1	Family history of malignant neoplasm of trachea, bronchus and lung
Z80.2	Family history of malignant neoplasm of other respiratory and intrathoracic organs
Z80.49	Family history of malignant neoplasm of other genital organs
Z80.51	Family history of malignant neoplasm of kidney
Z80.52	Family history of malignant neoplasm of bladder
Z80.59	Family history of malignant neoplasm of other urinary tract organ

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Code	Description
Z80.6	Family history of leukemia
Z80.7	Family history of other malignant neoplasms of lymphoid, hematopoietic and related tissues
Z80.8	Family history of malignant neoplasm of other organs or systems
Z80.9	Family history of malignant neoplasm, unspecified
Z81.0	Family history of intellectual disabilities
Z81.1	Family history of alcohol abuse and dependence
Z81.2	Family history of tobacco abuse and dependence
Z81.3	Family history of other psychoactive substance abuse and dependence
Z81.4	Family history of other substance abuse and dependence
Z81.8	Family history of other mental and behavioral disorders
Z82.0	Family history of epilepsy and other diseases of the nervous system
Z82.1	Family history of blindness and visual loss
Z82.2	Family history of deafness and hearing loss
Z82.3	Family history of stroke
Z82.41	Family history of sudden cardiac death
Z82.49	Family history of ischemic heart disease and other diseases of the circulatory system
Z82.5	Family history of asthma and other chronic lower respiratory diseases
Z82.61	Family history of arthritis
Z82.62	Family history of osteoporosis
Z82.69	Family history of other diseases of the musculoskeletal system and connective tissue
Z82.71	Family history of polycystic kidney
Z82.79	Family history of other congenital malformations, deformations and chromosomal abnormalities
Z82.8	Family history of other disabilities and chronic diseases leading to disablement, not elsewhere classified
Z83.0	Family history of human immunodeficiency virus [HIV] disease
Z83.1	Family history of other infectious and parasitic diseases
Z83.2	Family history of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
Z83.3	Family history of diabetes mellitus
Z83.41	Family history of multiple endocrine neoplasia [MEN] syndrome

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Code	Description
Z83.49	Family history of other endocrine, nutritional and metabolic diseases
Z83.511	Family history of glaucoma
Z83.518	Family history of other specified eye disorder
Z83.52	Family history of ear disorders
Z83.6	Family history of other diseases of the respiratory system
Z83.71	Family history of colonic polyps
Z83.79	Family history of other diseases of the digestive system
Z84.0	Family history of diseases of the skin and subcutaneous tissue
Z84.1	Family history of disorders of kidney and ureter
Z84.2	Family history of other diseases of the genitourinary system
Z84.3	Family history of consanguinity
Z84.81	Family history of carrier of genetic disease
Z84.89	Family history of other specified conditions

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Reasons for Denial for All Lab NCDs

NOTE: This section includes CMS's interpretation of its longstanding policies pertaining to nationally covered laboratory services, and is included for informational purposes.

- Tests for screening purposes that are performed in the absence of signs, symptoms, complaints, or personal history of disease or injury are not covered except as explicitly authorized by statute.
- Tests for administrative purposes, including exams required by insurance companies, business establishments, government agencies, or other third parties, are not covered.
- Tests that are not reasonable and necessary for the diagnosis or treatment of an illness or injury are not covered by statute.
- Failure to provide documentation of the medical necessity of tests might result in denial of claims. The documentation may include notes documenting relevant signs, symptoms, or abnormal findings that substantiate the medical necessity for ordering the tests. In addition, failure to provide independent verification that the test was ordered by the treating physician (or qualified nonphysician practitioner) through documentation in the physician's office might result in denial.
- A claim for a test for which there is a national coverage policy will be denied as not reasonable and necessary if the claim is submitted without an ICD-10-CM code or narrative diagnosis listed as covered in the policy unless other medical documentation justifying the necessity is submitted with the claim.
- If a national coverage policy identifies a frequency expectation, a claim for a test that exceeds that expectation may be denied as not reasonable and necessary, unless it is submitted with documentation justifying increased frequency.
- Tests that are not ordered by a treating physician or other qualified treating nonphysician practitioner acting within the scope of their license and in compliance with Medicare requirements will be denied as not reasonable and necessary.
- Failure of the clinical laboratory performing the test to have the appropriate Clinical Laboratory Improvement Amendments of 1988 (CLIA) certificate will result in denial of claims.



Coding Guidelines for All Lab NCDs

1. On and after the implementation date for ICD-10-CM coding of Medicare billing claims, a claim for a clinical diagnostic laboratory service must include a valid ICD-10-CM diagnosis code. When a diagnosis has not been established by the physician, codes that describe symptoms and signs, as opposed to diagnoses, should be provided (see also bullet #5 below).

Please note that ICD-10-CM codes for diagnoses are not required (and will not be effective) for Medicare billing transactions prior to October 1, 2015. Please use ICD-9-CM codes for diagnoses prior to that date.

Please check the CMS website www.cms.gov/ICD10 for more information on the implementation of ICD-10-CM codes.

2. Medicare distinguishes ‘screening’ from ‘diagnostic uses’ of tests. ‘Screening’ is testing for disease or disease precursors so that early detection and treatment can be provided for those who test positive for the disease. Screening tests are performed when no specific sign, symptom, or diagnosis is present and the beneficiary has not been exposed to a disease.

In contrast, ‘diagnostic’ testing is testing to rule out or to confirm a suspected diagnosis because of a sign and/or symptom in the beneficiary. In these cases, the sign or symptom should be used to explain the reason for the test.

Some laboratory tests are covered by the Medicare program for screening purposes (for example, NCD # 210.1, Prostate Cancer Screening Tests). However, this manual focuses only on coding policies for diagnostic uses of laboratory services (for example, the test for prostate specific antigen (PSA)).

3. When the reason for performing a test is because the beneficiary has had contact with, or exposure to, a communicable disease, the appropriate code from category Z20, ‘Contact with or exposure to communicable diseases’, should be assigned. However, on review, the test might still be considered screening and not covered by Medicare.
4. All digits required by ICD-10-CM coding conventions must be used. A code is invalid if it has not been coded with all digits/characters required for that code.
5. The beneficiary’s condition(s) and/or diseases should be coded in ICD-10-CM to the highest degree of certainty for that encounter/visit, such as signs, symptoms, abnormal test results, or other reasons for the visit. When a non-specific ICD-10-CM code is submitted, the underlying sign, symptom, or condition must be related to the indications for the test.



Additional Coding Guideline(s)

Note: For any additional guideline(s) about ICD-10-CM coding for a specific diagnostic test service, please see the section “Limitations” in each NCD following the code list table.



190.12 - Urine Culture, Bacterial

Other Names/Abbreviations

Urine culture

Description

A bacterial urine culture is a laboratory test service performed on a urine specimen to establish the probable etiology of a presumed urinary tract infection. It is common practice to do a urinalysis prior to a urine culture. A urine culture for bacteria might also be used as part of the evaluation and management of another related condition. The procedure includes aerobic agar-based isolation of bacteria or other cultivable organisms present, and quantitation of types present based on morphologic criteria. Isolates deemed significant may be subjected to additional identification and susceptibility procedures as requested by the ordering physician. The physician's request may be through clearly documented and communicated laboratory protocols.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
87086	Culture, bacterial; quantitative, colony count, urine.
87088	Culture, bacterial; with isolation and presumptive identification of each isolates, urine.

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A02.1	Salmonella sepsis
A18.14	Tuberculosis of prostate
A34	Obstetrical tetanus
A40.0	Sepsis due to streptococcus, group A
A40.1	Sepsis due to streptococcus, group B
A40.3	Sepsis due to Streptococcus pneumoniae
A40.8	Other streptococcal sepsis
A40.9	Streptococcal sepsis, unspecified
A41.01	Sepsis due to Methicillin susceptible Staphylococcus aureus



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Code	Description
A41.02	Sepsis due to Methicillin resistant Staphylococcus aureus
A41.1	Sepsis due to other specified staphylococcus
A41.2	Sepsis due to unspecified staphylococcus
A41.3	Sepsis due to Hemophilus influenzae
A41.4	Sepsis due to anaerobes
A41.50	Gram-negative sepsis, unspecified
A41.51	Sepsis due to Escherichia coli [E. coli]
A41.52	Sepsis due to Pseudomonas
A41.53	Sepsis due to Serratia
A41.59	Other Gram-negative sepsis
A41.81	Sepsis due to Enterococcus
A41.89	Other specified sepsis
A41.9	Sepsis, unspecified organism
A42.7	Actinomycotic sepsis
A56.01	Chlamydial cystitis and urethritis
A56.02	Chlamydial vulvovaginitis
A56.11	Chlamydial female pelvic inflammatory disease
D65	Disseminated intravascular coagulation [defibrination syndrome]
D70.0	Congenital agranulocytosis
D70.1	Agranulocytosis secondary to cancer chemotherapy
D70.2	Other drug-induced agranulocytosis
D70.3	Neutropenia due to infection
D70.4	Cyclic neutropenia
D70.8	Other neutropenia
D70.9	Neutropenia, unspecified
D72.89	Other specified disorders of white blood cells
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E87.2	Acidosis



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Code	Description
E87.4	Mixed disorder of acid-base balance
F45.8	Other somatoform disorders
G93.3	Postviral fatigue syndrome
J80	Acute respiratory distress syndrome
K72.00	Acute and subacute hepatic failure without coma
K72.01	Acute and subacute hepatic failure with coma
K76.2	Central hemorrhagic necrosis of liver
*M04.1	*Periodic fever syndromes
M32.14	Glomerular disease in systemic lupus erythematosus
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus
M35.04	Sicca syndrome with tubulo-interstitial nephropathy
M54.89	Other dorsalgia
M54.9	Dorsalgia, unspecified
N00.0	Acute nephritic syndrome with minor glomerular abnormality
N00.1	Acute nephritic syndrome with focal and segmental glomerular lesions
N00.2	Acute nephritic syndrome with diffuse membranous glomerulonephritis
N00.3	Acute nephritic syndrome with diffuse mesangial proliferative glomerulonephritis
N00.4	Acute nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis
N00.5	Acute nephritic syndrome with diffuse mesangiocapillary glomerulonephritis
N00.6	Acute nephritic syndrome with dense deposit disease
N00.7	Acute nephritic syndrome with diffuse crescentic glomerulonephritis
N00.8	Acute nephritic syndrome with other morphologic changes
N00.9	Acute nephritic syndrome with unspecified morphologic changes
N01.0	Rapidly progressive nephritic syndrome with minor glomerular abnormality
N01.1	Rapidly progressive nephritic syndrome with focal and segmental glomerular lesions
N01.2	Rapidly progressive nephritic syndrome with diffuse membranous glomerulonephritis
N01.3	Rapidly progressive nephritic syndrome with diffuse mesangial proliferative glomerulonephritis
N01.4	Rapidly progressive nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis
N01.5	Rapidly progressive nephritic syndrome with diffuse mesangiocapillary glomerulonephritis

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Code	Description
N01.6	Rapidly progressive nephritic syndrome with dense deposit disease
N01.7	Rapidly progressive nephritic syndrome with diffuse crescentic glomerulonephritis
N01.8	Rapidly progressive nephritic syndrome with other morphologic changes
N01.9	Rapidly progressive nephritic syndrome with unspecified morphologic changes
N05.0	Unspecified nephritic syndrome with minor glomerular abnormality
N05.1	Unspecified nephritic syndrome with focal and segmental glomerular lesions
N05.2	Unspecified nephritic syndrome with diffuse membranous glomerulonephritis
N05.3	Unspecified nephritic syndrome with diffuse mesangial proliferative glomerulonephritis
N05.4	Unspecified nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis
N05.5	Unspecified nephritic syndrome with diffuse mesangiocapillary glomerulonephritis
N05.6	Unspecified nephritic syndrome with dense deposit disease
N05.7	Unspecified nephritic syndrome with diffuse crescentic glomerulonephritis
N05.8	Unspecified nephritic syndrome with other morphologic changes
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes
N06.0	Isolated proteinuria with minor glomerular abnormality
N06.1	Isolated proteinuria with focal and segmental glomerular lesions
N06.2	Isolated proteinuria with diffuse membranous glomerulonephritis
N06.3	Isolated proteinuria with diffuse mesangial proliferative glomerulonephritis
N06.4	Isolated proteinuria with diffuse endocapillary proliferative glomerulonephritis
N06.5	Isolated proteinuria with diffuse mesangiocapillary glomerulonephritis
N06.6	Isolated proteinuria with dense deposit disease
N06.7	Isolated proteinuria with diffuse crescentic glomerulonephritis
N06.8	Isolated proteinuria with other morphologic lesion
N06.9	Isolated proteinuria with unspecified morphologic lesion
N07.0	Hereditary nephropathy, not elsewhere classified with minor glomerular abnormality
N07.1	Hereditary nephropathy, not elsewhere classified with focal and segmental glomerular lesions
N07.2	Hereditary nephropathy, not elsewhere classified with diffuse membranous glomerulonephritis
N07.3	Hereditary nephropathy, not elsewhere classified with diffuse mesangial proliferative glomerulonephritis

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Code	Description
N07.4	Hereditary nephropathy, not elsewhere classified with diffuse endocapillary proliferative glomerulonephritis
N07.5	Hereditary nephropathy, not elsewhere classified with diffuse mesangiocapillary glomerulonephritis
N07.6	Hereditary nephropathy, not elsewhere classified with dense deposit disease
N07.7	Hereditary nephropathy, not elsewhere classified with diffuse crescentic glomerulonephritis
N07.8	Hereditary nephropathy, not elsewhere classified with other morphologic lesions
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions
N08	Glomerular disorders in diseases classified elsewhere
N10	Acute pyelonephritis
N11.0	Nonobstructive reflux-associated chronic pyelonephritis
N11.1	Chronic obstructive pyelonephritis
N11.8	Other chronic tubulo-interstitial nephritis
N11.9	Chronic tubulo-interstitial nephritis, unspecified
N12	Tubulo-interstitial nephritis, not specified as acute or chronic
*N13.0	*Hydronephrosis with ureteropelvic junction obstruction
N13.1	Hydronephrosis with ureteral stricture, not elsewhere classified
N13.2	Hydronephrosis with renal and ureteral calculous obstruction
N13.4	Hydroureter
N13.5	Crossing vessel and stricture of ureter without hydronephrosis
N13.6	Pyonephrosis
N13.70	Vesicoureteral-reflux, unspecified
N13.71	Vesicoureteral-reflux without reflux nephropathy
N13.721	Vesicoureteral-reflux with reflux nephropathy without hydroureter, unilateral
N13.722	Vesicoureteral-reflux with reflux nephropathy without hydroureter, bilateral
N13.729	Vesicoureteral-reflux with reflux nephropathy without hydroureter, unspecified
N13.731	Vesicoureteral-reflux with reflux nephropathy with hydroureter, unilateral
N13.732	Vesicoureteral-reflux with reflux nephropathy with hydroureter, bilateral
N13.739	Vesicoureteral-reflux with reflux nephropathy with hydroureter, unspecified
N13.8	Other obstructive and reflux uropathy
N13.9	Obstructive and reflux uropathy, unspecified

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Code	Description
N14.0	Analgesic nephropathy
N14.1	Nephropathy induced by other drugs, medicaments and biological substances
N14.2	Nephropathy induced by unspecified drug, medicament or biological substance
N14.3	Nephropathy induced by heavy metals
N14.4	Toxic nephropathy, not elsewhere classified
N15.0	Balkan nephropathy
N15.1	Renal and perinephric abscess
N15.8	Other specified renal tubulo-interstitial diseases
N15.9	Renal tubulo-interstitial disease, unspecified
N16	Renal tubulo-interstitial disorders in diseases classified elsewhere
N17.1	Acute kidney failure with acute cortical necrosis
N17.2	Acute kidney failure with medullary necrosis
N18.6	End stage renal disease
N20.0	Calculus of kidney
N20.1	Calculus of ureter
N20.2	Calculus of kidney with calculus of ureter
N20.9	Urinary calculus, unspecified
N21.0	Calculus in bladder
N21.1	Calculus in urethra
N21.8	Other lower urinary tract calculus
N21.9	Calculus of lower urinary tract, unspecified
N22	Calculus of urinary tract in diseases classified elsewhere
N23	Unspecified renal colic
N28.0	Ischemia and infarction of kidney
N28.1	Cyst of kidney, acquired
N28.81	Hypertrophy of kidney
N28.82	Megaloureter
N28.83	Nephroptosis
N28.84	Pyelitis cystica
N28.85	Pyeloureteritis cystica

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Code	Description
N28.86	Ureteritis cystica
N28.89	Other specified disorders of kidney and ureter
N28.9	Disorder of kidney and ureter, unspecified
N29	Other disorders of kidney and ureter in diseases classified elsewhere
N30.00	Acute cystitis without hematuria
N30.01	Acute cystitis with hematuria
N30.10	Interstitial cystitis (chronic) without hematuria
N30.11	Interstitial cystitis (chronic) with hematuria
N30.20	Other chronic cystitis without hematuria
N30.21	Other chronic cystitis with hematuria
N30.30	Trigonitis without hematuria
N30.31	Trigonitis with hematuria
N30.40	Irradiation cystitis without hematuria
N30.41	Irradiation cystitis with hematuria
N30.80	Other cystitis without hematuria
N30.81	Other cystitis with hematuria
N30.90	Cystitis, unspecified without hematuria
N30.91	Cystitis, unspecified with hematuria
N34.0	Urethral abscess
N34.1	Nonspecific urethritis
N34.2	Other urethritis
N34.3	Urethral syndrome, unspecified
N35.111	Postinfective urethral stricture, not elsewhere classified, male, meatal
N35.112	Postinfective bulbous urethral stricture, not elsewhere classified
N35.113	Postinfective membranous urethral stricture, not elsewhere classified
N35.114	Postinfective anterior urethral stricture, not elsewhere classified
N35.119	Postinfective urethral stricture, not elsewhere classified, male, unspecified
N35.12	Postinfective urethral stricture, not elsewhere classified, female
N37	Urethral disorders in diseases classified elsewhere
N39.0	Urinary tract infection, site not specified



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Code	Description
N39.3	Stress incontinence (female) (male)
N39.41	Urge incontinence
N39.42	Incontinence without sensory awareness
N39.43	Post-void dribbling
N39.44	Nocturnal enuresis
N39.45	Continuous leakage
N39.46	Mixed incontinence
N39.490	Overflow incontinence
*N39.491	*Coital incontinence
*N39.492	*Postural (urinary) incontinence
N39.498	Other specified urinary incontinence
N40.0	Benign prostatic hyperplasia without lower urinary tract symptoms
N40.1	Benign prostatic hyperplasia with lower urinary tract symptoms
N40.2	Nodular prostate without lower urinary tract symptoms
N40.3	Nodular prostate with lower urinary tract symptoms
N41.0	Acute prostatitis
N41.1	Chronic prostatitis
N41.2	Abscess of prostate
N41.3	Prostatocystitis
N41.4	Granulomatous prostatitis
N41.8	Other inflammatory diseases of prostate
N41.9	Inflammatory disease of prostate, unspecified
N42.0	Calculus of prostate
N42.1	Congestion and hemorrhage of prostate
N42.30	Unspecified dysplasia of prostate
N42.31	Prostatic intraepithelial neoplasia
N42.32	Atypical small acinar proliferation of prostate
N42.39	Other dysplasia of prostate
N42.81	Prostatodynia syndrome
N42.82	Prostatosis syndrome

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Code	Description
N42.83	Cyst of prostate
N42.89	Other specified disorders of prostate
N42.9	Disorder of prostate, unspecified
N43.40	Spermatocele of epididymis, unspecified
N43.41	Spermatocele of epididymis, single
N43.42	Spermatocele of epididymis, multiple
N44.00	Torsion of testis, unspecified
N44.01	Extravaginal torsion of spermatic cord
N44.02	Intravaginal torsion of spermatic cord
N44.03	Torsion of appendix testis
N44.04	Torsion of appendix epididymis
N44.1	Cyst of tunica albuginea testis
N44.2	Benign cyst of testis
N44.8	Other noninflammatory disorders of the testis
N45.1	Epididymitis
N45.2	Orchitis
N45.3	Epididymo-orchitis
N45.4	Abscess of epididymis or testis
N49.0	Inflammatory disorders of seminal vesicle
N49.1	Inflammatory disorders of spermatic cord, tunica vaginalis and vas deferens
N49.2	Inflammatory disorders of scrotum
N49.3	Fournier gangrene
N49.8	Inflammatory disorders of other specified male genital organs
N49.9	Inflammatory disorder of unspecified male genital organ
N50.0	Atrophy of testis
N50.1	Vascular disorders of male genital organs
N50.3	Cyst of epididymis
N50.811	Right testicular pain
N50.812	Left testicular pain
N50.819	Testicular pain, unspecified

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Code	Description
N50.82	Scrotal pain
N50.89	Other specified disorders of the male genital organs
N50.9	Disorder of male genital organs, unspecified
N51	Disorders of male genital organs in diseases classified elsewhere
N53.11	Retarded ejaculation
N53.12	Painful ejaculation
N53.13	Anejaculatory orgasm
N53.14	Retrograde ejaculation
N53.19	Other ejaculatory dysfunction
N53.8	Other male sexual dysfunction
N53.9	Unspecified male sexual dysfunction
N70.01	Acute salpingitis
N70.02	Acute oophoritis
N70.03	Acute salpingitis and oophoritis
N70.11	Chronic salpingitis
N70.12	Chronic oophoritis
N70.13	Chronic salpingitis and oophoritis
N70.91	Salpingitis, unspecified
N70.92	Oophoritis, unspecified
N70.93	Salpingitis and oophoritis, unspecified
N71.0	Acute inflammatory disease of uterus
N71.1	Chronic inflammatory disease of uterus
N71.9	Inflammatory disease of uterus, unspecified
N72	Inflammatory disease of cervix uteri
N73.0	Acute parametritis and pelvic cellulitis
N73.1	Chronic parametritis and pelvic cellulitis
N73.2	Unspecified parametritis and pelvic cellulitis
N73.3	Female acute pelvic peritonitis
N73.4	Female chronic pelvic peritonitis
N73.5	Female pelvic peritonitis, unspecified

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Code	Description
N73.6	Female pelvic peritoneal adhesions (postinfective)
N73.8	Other specified female pelvic inflammatory diseases
N73.9	Female pelvic inflammatory disease, unspecified
N74	Female pelvic inflammatory disorders in diseases classified elsewhere
N75.0	Cyst of Bartholin's gland
N75.1	Abscess of Bartholin's gland
N75.8	Other diseases of Bartholin's gland
N75.9	Disease of Bartholin's gland, unspecified
N76.0	Acute vaginitis
N76.1	Subacute and chronic vaginitis
N76.2	Acute vulvitis
N76.3	Subacute and chronic vulvitis
N76.4	Abscess of vulva
N76.5	Ulceration of vagina
N76.6	Ulceration of vulva
N76.81	Mucositis (ulcerative) of vagina and vulva
N76.89	Other specified inflammation of vagina and vulva
N77.0	Ulceration of vulva in diseases classified elsewhere
N77.1	Vaginitis, vulvitis and vulvovaginitis in diseases classified elsewhere
N82.0	Vesicovaginal fistula
N82.1	Other female urinary-genital tract fistulae
N82.2	Fistula of vagina to small intestine
N82.3	Fistula of vagina to large intestine
N82.4	Other female intestinal-genital tract fistulae
N82.5	Female genital tract-skin fistulae
N82.8	Other female genital tract fistulae
N82.9	Female genital tract fistula, unspecified
*N83.511	*Torsion of right ovary and ovarian pedicle
*N83.512	*Torsion of left ovary and ovarian pedicle
*N83.519	*Torsion of ovary and ovarian pedicle, unspecified side



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Code	Description
*N83.521	*Torsion of right fallopian tube
*N83.522	*Torsion of left fallopian tube
*N83.529	*Torsion of fallopian tube, unspecified side
*N99.115	*Postprocedural fossa navicularis urethral stricture
*N99.523	*Herniation of incontinent stoma of urinary tract
*N99.524	*Stenosis of incontinent stoma of urinary tract
*N99.533	*Herniation of continent stoma of urinary tract
*N99.534	*Stenosis of continent stoma of urinary tract
O08.0	Genital tract and pelvic infection following ectopic and molar pregnancy
O08.3	Shock following ectopic and molar pregnancy
O08.82	Sepsis following ectopic and molar pregnancy
*O12.04	*Gestational edema, complicating childbirth
*O12.05	*Gestational edema, complicating the puerperium
*O12.14	*Gestational proteinuria, complicating childbirth
*O12.15	*Gestational proteinuria, complicating the puerperium
*O12.24	*Gestational edema with proteinuria, complicating childbirth
*O12.25	*Gestational edema with proteinuria, complicating the puerperium
*O13.4	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth
*O13.5	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating the puerperium
*O14.04	*Mild to moderate pre-eclampsia, complicating childbirth
*O14.05	*Mild to moderate pre-eclampsia, complicating the puerperium
*O14.14	*Severe pre-eclampsia complicating childbirth
*O14.15	*Severe pre-eclampsia, complicating the puerperium
*O14.24	*HELLP syndrome, complicating childbirth
*O14.25	*HELLP syndrome, complicating the puerperium
*O14.94	*Unspecified pre-eclampsia, complicating childbirth
*O14.95	*Unspecified pre-eclampsia, complicating the puerperium
*O16.4	*Unspecified maternal hypertension, complicating childbirth
*O16.5	*Unspecified maternal hypertension, complicating the puerperium



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Code	Description
O23.00	Infections of kidney in pregnancy, unspecified trimester
O23.01	Infections of kidney in pregnancy, first trimester
O23.02	Infections of kidney in pregnancy, second trimester
O23.03	Infections of kidney in pregnancy, third trimester
O23.10	Infections of bladder in pregnancy, unspecified trimester
O23.11	Infections of bladder in pregnancy, first trimester
O23.12	Infections of bladder in pregnancy, second trimester
O23.13	Infections of bladder in pregnancy, third trimester
O23.20	Infections of urethra in pregnancy, unspecified trimester
O23.21	Infections of urethra in pregnancy, first trimester
O23.22	Infections of urethra in pregnancy, second trimester
O23.23	Infections of urethra in pregnancy, third trimester
O23.30	Infections of other parts of urinary tract in pregnancy, unspecified trimester
O23.31	Infections of other parts of urinary tract in pregnancy, first trimester
O23.32	Infections of other parts of urinary tract in pregnancy, second trimester
O23.33	Infections of other parts of urinary tract in pregnancy, third trimester
O23.40	Unspecified infection of urinary tract in pregnancy, unspecified trimester
O23.41	Unspecified infection of urinary tract in pregnancy, first trimester
O23.42	Unspecified infection of urinary tract in pregnancy, second trimester
O23.43	Unspecified infection of urinary tract in pregnancy, third trimester
O23.511	Infections of cervix in pregnancy, first trimester
O23.512	Infections of cervix in pregnancy, second trimester
O23.513	Infections of cervix in pregnancy, third trimester
O23.519	Infections of cervix in pregnancy, unspecified trimester
O23.521	Salpingo-oophoritis in pregnancy, first trimester
O23.522	Salpingo-oophoritis in pregnancy, second trimester
O23.523	Salpingo-oophoritis in pregnancy, third trimester
O23.529	Salpingo-oophoritis in pregnancy, unspecified trimester
O23.591	Infection of other part of genital tract in pregnancy, first trimester
O23.592	Infection of other part of genital tract in pregnancy, second trimester

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Code	Description
O23.593	Infection of other part of genital tract in pregnancy, third trimester
O23.599	Infection of other part of genital tract in pregnancy, unspecified trimester
O23.90	Unspecified genitourinary tract infection in pregnancy, unspecified trimester
O23.91	Unspecified genitourinary tract infection in pregnancy, first trimester
O23.92	Unspecified genitourinary tract infection in pregnancy, second trimester
O23.93	Unspecified genitourinary tract infection in pregnancy, third trimester
*O24.415	*Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs
*O24.425	*Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs
*O24.435	*Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs
*O33.7XX0	*Maternal care for disproportion due to other fetal deformities, not applicable or unspecified
*O33.7XX1	*Maternal care for disproportion due to other fetal deformities, fetus 1
*O33.7XX2	*Maternal care for disproportion due to other fetal deformities, fetus 2
*O33.7XX3	*Maternal care for disproportion due to other fetal deformities, fetus 3
*O33.7XX4	*Maternal care for disproportion due to other fetal deformities, fetus 4
*O33.7XX5	*Maternal care for disproportion due to other fetal deformities, fetus 5
*O33.7XX9	*Maternal care for disproportion due to other fetal deformities, other fetus
*O44.20	*Partial placenta previa NOS or without hemorrhage, unspecified trimester
*O44.21	*Partial placenta previa NOS or without hemorrhage, first trimester
*O44.22	*Partial placenta previa NOS or without hemorrhage, second trimester
*O44.23	*Partial placenta previa NOS or without hemorrhage, third trimester
*O44.30	*Partial placenta previa with hemorrhage, unspecified trimester
*O44.31	*Partial placenta previa with hemorrhage, first trimester
*O44.32	*Partial placenta previa with hemorrhage, second trimester
*O44.33	*Partial placenta previa with hemorrhage, third trimester
*O44.40	*Low lying placenta NOS or without hemorrhage, unspecified trimester
*O44.41	*Low lying placenta NOS or without hemorrhage, first trimester
*O44.42	*Low lying placenta NOS or without hemorrhage, second trimester
*O44.43	*Low lying placenta NOS or without hemorrhage, third trimester
*O44.50	*Low lying placenta with hemorrhage, unspecified trimester
*O44.51	*Low lying placenta with hemorrhage, first trimester



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Code	Description
*O44.52	*Low lying placenta with hemorrhage, second trimester
*O44.53	*Low lying placenta with hemorrhage, third trimester
O85	Puerperal sepsis
O86.11	Cervicitis following delivery
O86.12	Endometritis following delivery
O86.13	Vaginitis following delivery
O86.19	Other infection of genital tract following delivery
O86.20	Urinary tract infection following delivery, unspecified
O86.21	Infection of kidney following delivery
O86.22	Infection of bladder following delivery
O86.29	Other urinary tract infection following delivery
O86.4	Pyrexia of unknown origin following delivery
O86.81	Puerperal septic thrombophlebitis
O86.89	Other specified puerperal infections
P36.0	Sepsis of newborn due to streptococcus, group B
P36.10	Sepsis of newborn due to unspecified streptococci
P36.19	Sepsis of newborn due to other streptococci
P36.2	Sepsis of newborn due to Staphylococcus aureus
P36.30	Sepsis of newborn due to unspecified staphylococci
P36.39	Sepsis of newborn due to other staphylococci
P36.4	Sepsis of newborn due to Escherichia coli
P36.5	Sepsis of newborn due to anaerobes
P36.8	Other bacterial sepsis of newborn
P36.9	Bacterial sepsis of newborn, unspecified
P39.3	Neonatal urinary tract infection
R00.0	Tachycardia, unspecified
R10.0	Acute abdomen
R10.10	Upper abdominal pain, unspecified
R10.11	Right upper quadrant pain
R10.12	Left upper quadrant pain

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Code	Description
R10.13	Epigastric pain
R10.2	Pelvic and perineal pain
R10.30	Lower abdominal pain, unspecified
R10.31	Right lower quadrant pain
R10.32	Left lower quadrant pain
R10.33	Periumbilical pain
R10.811	Right upper quadrant abdominal tenderness
R10.812	Left upper quadrant abdominal tenderness
R10.813	Right lower quadrant abdominal tenderness
R10.814	Left lower quadrant abdominal tenderness
R10.815	Periumbilic abdominal tenderness
R10.816	Epigastric abdominal tenderness
R10.817	Generalized abdominal tenderness
R10.819	Abdominal tenderness, unspecified site
R10.821	Right upper quadrant rebound abdominal tenderness
R10.822	Left upper quadrant rebound abdominal tenderness
R10.823	Right lower quadrant rebound abdominal tenderness
R10.824	Left lower quadrant rebound abdominal tenderness
R10.825	Periumbilic rebound abdominal tenderness
R10.826	Epigastric rebound abdominal tenderness
R10.827	Generalized rebound abdominal tenderness
R10.829	Rebound abdominal tenderness, unspecified site
R10.83	Colic
R10.84	Generalized abdominal pain
R10.9	Unspecified abdominal pain
R30.0	Dysuria
R30.1	Vesical tenesmus
R30.9	Painful micturition, unspecified
R31.0	Gross hematuria
R31.1	Benign essential microscopic hematuria

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Code	Description
R31.21	Asymptomatic microscopic hematuria
R31.29	Other microscopic hematuria
R31.9	Hematuria, unspecified
R32	Unspecified urinary incontinence
R33.0	Drug induced retention of urine
R33.8	Other retention of urine
R33.9	Retention of urine, unspecified
R34	Anuria and oliguria
R35.0	Frequency of micturition
R35.1	Nocturia
R35.8	Other polyuria
R36.0	Urethral discharge without blood
R36.1	Hematospermia
R36.9	Urethral discharge, unspecified
R39.0	Extravasation of urine
R39.11	Hesitancy of micturition
R39.12	Poor urinary stream
R39.13	Splitting of urinary stream
R39.14	Feeling of incomplete bladder emptying
R39.15	Urgency of urination
R39.16	Straining to void
R39.191	Need to immediately re-void
R39.192	Position dependent micturition
R39.198	Other difficulties with micturition
R39.2	Extrarenal uremia
R39.81	Functional urinary incontinence
*R39.82	*Chronic bladder pain
R39.89	Other symptoms and signs involving the genitourinary system
R39.9	Unspecified symptoms and signs involving the genitourinary system
*R40.2410	*Glasgow coma scale score 13-15, unspecified time



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Code	Description
*R40.2411	*Glasgow coma scale score 13-15, in the field [EMT or ambulance]
*R40.2412	*Glasgow coma scale score 13-15, at arrival to emergency department
*R40.2413	*Glasgow coma scale score 13-15, at hospital admission
*R40.2414	*Glasgow coma scale score 13-15, 24 hours or more after hospital admission
*R40.2420	*Glasgow coma scale score 9-12, unspecified time
*R40.2421	*Glasgow coma scale score 9-12, in the field [EMT or ambulance]
*R40.2422	*Glasgow coma scale score 9-12, at arrival to emergency department
*R40.2423	*Glasgow coma scale score 9-12, at hospital admission
*R40.2424	*Glasgow coma scale score 9-12, 24 hours or more after hospital admission
*R40.2430	*Glasgow coma scale score 3-8, unspecified time
*R40.2431	*Glasgow coma scale score 3-8, in the field [EMT or ambulance]
*R40.2432	*Glasgow coma scale score 3-8, at arrival to emergency department
*R40.2433	*Glasgow coma scale score 3-8, at hospital admission
*R40.2434	*Glasgow coma scale score 3-8, 24 hours or more after hospital admission
*R40.2440	*Other coma, without documented Glasgow coma scale score, or with partial score reported, unspecified time
*R40.2441	*Other coma, without documented Glasgow coma scale score, or with partial score reported, in the field [EMT or ambulance]
*R40.2442	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at arrival to emergency department
*R40.2443	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at hospital admission
*R40.2444	*Other coma, without documented Glasgow coma scale score, or with partial score reported, 24 hours or more after hospital admission
R40.4	Transient alteration of awareness
R41.0	Disorientation, unspecified
R41.1	Anterograde amnesia
R41.2	Retrograde amnesia
R41.3	Other amnesia
R41.82	Altered mental status, unspecified
R41.9	Unspecified symptoms and signs involving cognitive functions and awareness
R45.84	Anhedonia

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Code	Description
R50.2	Drug induced fever
R50.81	Fever presenting with conditions classified elsewhere
R50.82	Postprocedural fever
R50.83	Postvaccination fever
R50.84	Febrile nonhemolytic transfusion reaction
R50.9	Fever, unspecified
R52	Pain, unspecified
R53.0	Neoplastic (malignant) related fatigue
R53.1	Weakness
R53.81	Other malaise
R53.83	Other fatigue
R57.0	Cardiogenic shock
R57.1	Hypovolemic shock
R57.8	Other shock
R57.9	Shock, unspecified
R65.21	Severe sepsis with septic shock
R68.0	Hypothermia, not associated with low environmental temperature
R68.81	Early satiety
R68.83	Chills (without fever)
R68.89	Other general symptoms and signs
*R73.03	*Prediabetes
R78.81	Bacteremia
R80.0	Isolated proteinuria
R80.1	Persistent proteinuria, unspecified
R80.2	Orthostatic proteinuria, unspecified
R80.3	Bence Jones proteinuria
R80.8	Other proteinuria
R80.9	Proteinuria, unspecified
R81	Glycosuria
R82.0	Chyluria



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Code	Description
R82.1	Myoglobinuria
R82.2	Biliuria
R82.3	Hemoglobinuria
R82.4	Acetonuria
R82.5	Elevated urine levels of drugs, medicaments and biological substances
R82.6	Abnormal urine levels of substances chiefly nonmedicinal as to source
R82.71	Bacteriuria
R82.79	Other abnormal findings on microbiological examination of urine
R82.8	Abnormal findings on cytological and histological examination of urine
R82.90	Unspecified abnormal findings in urine
R82.91	Other chromoabnormalities of urine
R82.99	Other abnormal findings in urine
T19.0XXA	Foreign body in urethra, initial encounter
T19.1XXA	Foreign body in bladder, initial encounter
T19.4XXA	Foreign body in penis, initial encounter
*T83.011A	*Breakdown (mechanical) of indwelling urethral catheter, initial encounter
*T83.011D	*Breakdown (mechanical) of indwelling urethral catheter, subsequent encounter
*T83.011S	*Breakdown (mechanical) of indwelling urethral catheter, sequela
*T83.012A	*Breakdown (mechanical) of nephrostomy catheter, initial encounter
*T83.012D	*Breakdown (mechanical) of nephrostomy catheter, subsequent encounter
*T83.012S	*Breakdown (mechanical) of nephrostomy catheter, sequela
*T83.021A	*Displacement of indwelling urethral catheter, initial encounter
*T83.021D	*Displacement of indwelling urethral catheter, subsequent encounter
*T83.021S	*Displacement of indwelling urethral catheter, sequela
*T83.022A	*Displacement of nephrostomy catheter, initial encounter
*T83.022D	*Displacement of nephrostomy catheter, subsequent encounter
*T83.022S	*Displacement of nephrostomy catheter, sequela
*T83.031A	*Leakage of indwelling urethral catheter, initial encounter
*T83.031D	*Leakage of indwelling urethral catheter, subsequent encounter
*T83.031S	*Leakage of indwelling urethral catheter, sequela



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Code	Description
*T83.032A	*Leakage of nephrostomy catheter, initial encounter
*T83.032D	*Leakage of nephrostomy catheter, subsequent encounter
*T83.032S	*Leakage of nephrostomy catheter, sequela
*T83.091A	*Other mechanical complication of indwelling urethral catheter, initial encounter
*T83.091D	*Other mechanical complication of indwelling urethral catheter, subsequent encounter
*T83.091S	*Other mechanical complication of indwelling urethral catheter, sequela
*T83.092A	*Other mechanical complication of nephrostomy catheter, initial encounter
*T83.092D	*Other mechanical complication of nephrostomy catheter, subsequent encounter
*T83.092S	*Other mechanical complication of nephrostomy catheter, sequela
*T83.113A	*Breakdown (mechanical) of other urinary stents, initial encounter
*T83.113D	*Breakdown (mechanical) of other urinary stents, subsequent encounter
*T83.113S	*Breakdown (mechanical) of other urinary stents, sequela
*T83.123A	*Displacement of other urinary stents, initial encounter
*T83.123D	*Displacement of other urinary stents, subsequent encounter
*T83.123S	*Displacement of other urinary stents, sequela
*T83.193A	*Other mechanical complication of other urinary stent, initial encounter
*T83.193D	*Other mechanical complication of other urinary stent, subsequent encounter
*T83.193S	*Other mechanical complication of other urinary stent, sequela
*T83.24XA	*Erosion of graft of urinary organ, initial encounter
*T83.24XD	*Erosion of graft of urinary organ, subsequent encounter
*T83.24XS	*Erosion of graft of urinary organ, sequela
*T83.25XA	*Exposure of graft of urinary organ, initial encounter
*T83.25XD	*Exposure of graft of urinary organ, subsequent encounter
*T83.25XS	*Exposure of graft of urinary organ, sequela
*T83.510A	*Infection and inflammatory reaction due to cystostomy catheter, initial encounter
*T83.510D	*Infection and inflammatory reaction due to cystostomy catheter, subsequent encounter
*T83.510S	*Infection and inflammatory reaction due to cystostomy catheter, sequela
*T83.511A	*Infection and inflammatory reaction due to indwelling urethral catheter, initial encounter



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Code	Description
*T83.511D	*Infection and inflammatory reaction due to indwelling urethral catheter, subsequent encounter
*T83.511S	*Infection and inflammatory reaction due to indwelling urethral catheter, sequela
*T83.512A	*Infection and inflammatory reaction due to nephrostomy catheter, initial encounter
*T83.512D	*Infection and inflammatory reaction due to nephrostomy catheter, subsequent encounter
*T83.512S	*Infection and inflammatory reaction due to nephrostomy catheter, sequela
*T83.518A	*Infection and inflammatory reaction due to other urinary catheter, initial encounter
*T83.518D	*Infection and inflammatory reaction due to other urinary catheter, subsequent encounter
*T83.518S	*Infection and inflammatory reaction due to other urinary catheter, sequela
*T83.590A	*Infection and inflammatory reaction due to implanted urinary neurostimulation device, initial encounter
*T83.590D	*Infection and inflammatory reaction due to implanted urinary neurostimulation device, subsequent encounter
*T83.590S	*Infection and inflammatory reaction due to implanted urinary neurostimulation device, sequela
*T83.591A	*Infection and inflammatory reaction due to implanted urinary sphincter, initial encounter
*T83.591D	*Infection and inflammatory reaction due to implanted urinary sphincter, subsequent encounter
*T83.591S	*Infection and inflammatory reaction due to implanted urinary sphincter, sequela
*T83.592A	*Infection and inflammatory reaction due to indwelling ureteral stent, initial encounter
*T83.592D	*Infection and inflammatory reaction due to indwelling ureteral stent, subsequent encounter
*T83.592S	*Infection and inflammatory reaction due to indwelling ureteral stent, sequela
*T83.593A	*Infection and inflammatory reaction due to other urinary stents, initial encounter
*T83.593D	*Infection and inflammatory reaction due to other urinary stents, subsequent encounter
*T83.593S	*Infection and inflammatory reaction due to other urinary stents, sequela
*T83.598A	*Infection and inflammatory reaction due to other prosthetic device, implant and graft in urinary system, initial encounter
*T83.598D	*Infection and inflammatory reaction due to other prosthetic device, implant and graft in urinary system, subsequent encounter



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Code	Description
*T83.598S	*Infection and inflammatory reaction due to other prosthetic device, implant and graft in urinary system, sequela
*T83.61XA	*Infection and inflammatory reaction due to implanted penile prosthesis, initial encounter
*T83.61XD	*Infection and inflammatory reaction due to implanted penile prosthesis, subsequent encounter
*T83.61XS	*Infection and inflammatory reaction due to implanted penile prosthesis, sequela
*T83.62XA	*Infection and inflammatory reaction due to implanted testicular prosthesis, initial encounter
*T83.62XD	*Infection and inflammatory reaction due to implanted testicular prosthesis, subsequent encounter
*T83.62XS	*Infection and inflammatory reaction due to implanted testicular prosthesis, sequela
*T83.69XA	*Infection and inflammatory reaction due to other prosthetic device, implant and graft in genital tract, initial encounter
*T83.69XD	*Infection and inflammatory reaction due to other prosthetic device, implant and graft in genital tract, subsequent encounter
*T83.69XS	*Infection and inflammatory reaction due to other prosthetic device, implant and graft in genital tract, sequela
*T83.712A	*Erosion of implanted urethral mesh to surrounding organ or tissue, initial encounter
*T83.712D	*Erosion of implanted urethral mesh to surrounding organ or tissue, subsequent encounter
*T83.712S	*Erosion of implanted urethral mesh to surrounding organ or tissue, sequela
*T83.713A	*Erosion of implanted urethral bulking agent to surrounding organ or tissue, initial encounter
*T83.713D	*Erosion of implanted urethral bulking agent to surrounding organ or tissue, subsequent encounter
*T83.713S	*Erosion of implanted urethral bulking agent to surrounding organ or tissue, sequela
*T83.714A	*Erosion of implanted ureteral bulking agent to surrounding organ or tissue, initial encounter
*T83.714D	*Erosion of implanted ureteral bulking agent to surrounding organ or tissue, subsequent encounter
*T83.714S	*Erosion of implanted ureteral bulking agent to surrounding organ or tissue, sequela



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Code	Description
*T83.719A	*Erosion of other prosthetic materials to surrounding organ or tissue, initial encounter
*T83.719D	*Erosion of other prosthetic materials to surrounding organ or tissue, subsequent encounter
*T83.719S	*Erosion of other prosthetic materials to surrounding organ or tissue, sequela
*T83.722A	*Exposure of implanted urethral mesh into urethra, initial encounter
*T83.722D	*Exposure of implanted urethral mesh into urethra, subsequent encounter
*T83.722S	*Exposure of implanted urethral mesh into urethra, sequela
*T83.723A	*Exposure of implanted urethral bulking agent into urethra, initial encounter
*T83.723D	*Exposure of implanted urethral bulking agent into urethra, subsequent encounter
*T83.723S	*Exposure of implanted urethral bulking agent into urethra, sequela
*T83.724A	*Exposure of implanted ureteral bulking agent into ureter, initial encounter
*T83.724D	*Exposure of implanted ureteral bulking agent into ureter, subsequent encounter
*T83.724S	*Exposure of implanted ureteral bulking agent into ureter, sequela
*T83.79XA	*Other specified complications due to other genitourinary prosthetic materials, initial encounter
*T83.79XD	*Other specified complications due to other genitourinary prosthetic materials, subsequent encounter
*T83.79XS	*Other specified complications due to other genitourinary prosthetic materials, sequela
*Z05.0	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1	*Observation and evaluation of newborn for suspected infectious condition ruled out
*Z05.2	*Observation and evaluation of newborn for suspected neurological condition ruled out
*Z05.3	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41	*Observation and evaluation of newborn for suspected genetic condition ruled out
*Z05.42	*Observation and evaluation of newborn for suspected metabolic condition ruled out
*Z05.43	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out



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Code	Description
*Z05.6	*Observation and evaluation of newborn for suspected genitourinary condition ruled out
*Z05.71	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
*Z05.73	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9	*Observation and evaluation of newborn for unspecified suspected condition ruled out
*Z19.1	*Hormone sensitive malignancy status
*Z19.2	*Hormone resistant malignancy status
*Z31.7	*Encounter for procreative management and counseling for gestational carrier
Z43.5	Encounter for attention to cystostomy
Z43.6	Encounter for attention to other artificial openings of urinary tract
Z79.3	Long term (current) use of hormonal contraceptives
*Z79.84	*Long term (current) use of oral hypoglycemic drugs
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
*Z84.82	*Family history of sudden infant death syndrome
Z93.50	Unspecified cystostomy status
Z93.51	Cutaneous-vesicostomy status
Z93.52	Appendico-vesicostomy status
Z93.59	Other cystostomy status
Z93.6	Other artificial openings of urinary tract status

Indications

1. A beneficiary's urinalysis is abnormal suggesting urinary tract infection, for example, abnormal microscopic (hematuria, pyuria, bacteriuria); abnormal biochemical urinalysis (positive leukocyte esterase, nitrite, protein, blood); a Gram's stain positive for

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microorganisms; positive bacteriuria screen by a non-culture technique; or other significant abnormality of a urinalysis. While it is not essential to evaluate a urine specimen by one of these methods before a urine culture is performed, certain clinical presentations with highly suggestive signs and symptoms may lend themselves to an antecedent urinalysis procedure where follow-up culture depends upon an initial positive or abnormal test result.

2. A beneficiary has clinical signs and symptoms indicative of a possible urinary tract infection (UTI). Acute lower UTI may present with urgency, frequency, nocturia, dysuria, discharge or incontinence. These findings might also be noted in upper UTI with additional systemic symptoms (for example, fever, chills, lethargy); or pain in the costovertebral, abdominal, or pelvic areas. Signs and symptoms might overlap considerably with other inflammatory conditions of the genitourinary tract (for example, prostatitis, urethritis, vaginitis, or cervicitis). Elderly or immunocompromised beneficiaries or those with neurologic disorders might present atypically (for example, general debility, acute mental status changes, declining functional status).
3. The beneficiary is being evaluated for suspected urosepsis, fever of unknown origin, or other systemic manifestations of infection but without a known source. Signs and symptoms used to define sepsis have been well established.
4. A test of cure is generally not indicated in an uncomplicated infection. However, it may be indicated if the beneficiary is being evaluated for response to therapy and there is a complicating co-existing urinary abnormality including structural or functional abnormalities, calculi, foreign bodies, or ureteral/renal stents or there is clinical or laboratory evidence of failure to respond as described in Indications 1 and 2.
5. In surgical procedures involving major manipulations of the genitourinary tract, preoperative examination to detect occult infection may be indicated in selected cases (for example, prior to renal transplantation, manipulation or removal of kidney stones, or transurethral surgery of the bladder or prostate).
6. Urine culture may be indicated to detect occult infection in renal transplant recipients on immunosuppressive therapy.

Limitations

1. CPT® code 87086 may be used one time per encounter.
2. Colony count restrictions on coverage of CPT® code 87088 do not apply as they may be highly variable according to syndrome or other clinical circumstances (for example, antecedent therapy, collection time, and degree of hydration).
3. CPT® code 87088 may be used multiple times in association with or independent of 87086, as urinary tract infections may be polymicrobial.
4. Testing for asymptomatic bacteriuria as part of a prenatal evaluation may be medically appropriate but is considered screening and therefore not covered by Medicare. The U.S. Preventive Services Task Force has concluded that screening for asymptomatic bacteriuria outside of the narrow indication for pregnant women is generally not



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indicated. There are insufficient data to recommend screening in ambulatory elderly beneficiaries including those with diabetes. Testing may be clinically indicated on other grounds including likelihood of recurrence or potential adverse effects of antibiotics, but is considered screening in the absence of clinical or laboratory evidence of infection.

5. To detect a clinically significant post-transplant occult infection in a renal allograft recipient on long-term immunosuppressive therapy, use code Z79.899.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Documentation Requirements

Appropriate HCPCS/CPT© code(s) must be used as described.

Sources of Information

Bone, RC, RA Bal, FB Cerra, & ACCP/SCCM Consensus Conference Committee. 1992. Definitions for sepsis & organ failure & guidelines for the use of innovative therapies in sepsis. Chest 101:1644-1655.

Clarridge, JE, JR Johnson, and MT Pezzlo. 1998 (in press). Cumitech 2B: Laboratory Diagnosis of Urinary Tract Infections. AS Weissfeld (coord. ed.); ASM Press, Washington, DC.

Kunin, CM. 1994. Urinary tract infections in females. Clin. Infect. Dis. 18:1-12.

Sodeman, TM. 1995. A practical strategy for diagnosis of urinary tract infections. Clin. Lab. Med. 15:235-250.

Stamm WE, and TM Hooton. 1993. Management of urinary tract infections in adults. N. Engl. J. Med. 329:1328-1334.

United States Preventive Services Task Force (1996). Guidelines for screening for asymptomatic bacteriuria.

Lachs MS, Nachamkin I, Edelstein PH et al. 1992. Spectrum bias in the evaluation of diagnostic tests: lessons from the rapid dipstick test for urinary tract infection. Ann. Int. Med. 117:135-140



190.13 - Human Immunodeficiency Virus (HIV) Testing (Prognosis Including Monitoring)

Other Names/Abbreviations

HIV-1 or HIV-2 quantification or viral load

Description

HIV quantification is achieved through the use of a number of different assays which measure the amount of circulating viral RNA. Assays vary both in methods used to detect viral RNA as well as in ability to detect viral levels at lower limits. However, all employ some type of nucleic acid amplification technique to enhance sensitivity, and results are expressed as the HIV copy number.

Quantification assays of HIV plasma RNA are used prognostically to assess relative risk for disease progression and predict time to death, as well as to assess efficacy of anti-retroviral therapies over time.

HIV quantification is often performed together with CD4+ T cell counts which provide information on extent of HIV induced immune system damage already incurred.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
87536	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification
87539	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, quantification

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
B20	Human immunodeficiency virus [HIV] disease
B97.35	Human immunodeficiency virus, type 2 [HIV 2] as the cause of diseases classified elsewhere
O98.411	Viral hepatitis complicating pregnancy, first trimester
O98.412	Viral hepatitis complicating pregnancy, second trimester
O98.413	Viral hepatitis complicating pregnancy, third trimester
O98.419	Viral hepatitis complicating pregnancy, unspecified trimester

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Code	Description
O98.42	Viral hepatitis complicating childbirth
O98.43	Viral hepatitis complicating the puerperium
O98.511	Other viral diseases complicating pregnancy, first trimester
O98.512	Other viral diseases complicating pregnancy, second trimester
O98.513	Other viral diseases complicating pregnancy, third trimester
O98.519	Other viral diseases complicating pregnancy, unspecified trimester
O98.52	Other viral diseases complicating childbirth
O98.53	Other viral diseases complicating the puerperium
O98.711	Human immunodeficiency virus [HIV] disease complicating pregnancy, first trimester
O98.712	Human immunodeficiency virus [HIV] disease complicating pregnancy, second trimester
O98.713	Human immunodeficiency virus [HIV] disease complicating pregnancy, third trimester
O98.719	Human immunodeficiency virus [HIV] disease complicating pregnancy, unspecified trimester
O98.72	Human immunodeficiency virus [HIV] disease complicating childbirth
O98.73	Human immunodeficiency virus [HIV] disease complicating the puerperium
R75	Inconclusive laboratory evidence of human immunodeficiency virus [HIV]
Z21	Asymptomatic human immunodeficiency virus [HIV] infection status

Indications

1. A plasma HIV RNA baseline level may be medically necessary in any patient with confirmed HIV infection.
2. Regular periodic measurement of plasma HIV RNA levels may be medically necessary to determine risk for disease progression in an HIV-infected individual and to determine when to initiate anti-retroviral treatment regimens.
3. In clinical situations where risk of HIV infection is significant and initiation of therapy is anticipated, a baseline HIV quantification may be performed. These situations include:
 - a. Persistence of borderline or equivocal serologic reactivity in an at-risk individual.
 - b. Signs and symptoms of acute retroviral syndrome characterized by fever, malaise, lymphadenopathy and rash in an at-risk individual.

Limitations

1. Viral quantification may be appropriate for prognostic use including baseline determination, periodic monitoring, and monitoring of response to therapy. Use as a diagnostic test method is not indicated.



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2. Measurement of plasma HIV RNA levels should be performed at the time of establishment of an HIV infection diagnosis. For an accurate baseline, 2 specimens in a 2-week period are appropriate.
3. For prognosis including anti-retroviral therapy monitoring, regular, periodic measurements are appropriate. The frequency of viral load testing should be consistent with the most current Centers for Disease Control and Prevention guidelines for use of anti-retroviral agents in adults and adolescents or pediatrics.
4. Because differences in absolute HIV copy number are known to occur using different assays, plasma HIV RNA levels should be measured by the same analytical method. A change in assay method may necessitate re-establishment of a baseline.
5. Nucleic acid quantification techniques are representative of rapidly emerging & evolving new technologies. Users advised to remain current on FDA-approval status.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Other Comments

Assessment of CD4+ T cell numbers is frequently performed in conjunction with viral load determination. When used in concert, the accuracy with which the risk for disease progression and death can be predicted is enhanced.

Sources of Information

CDC.1998. Guidelines for the use of antiretroviral agents in HIV-infected adults and adolescents. MMWR 47 (RR-5).

CDC.1998. Guidelines for use of antiretroviral agents in pediatric HIV infection. MMWR47 RR-4.

CDC.1998. Public Health Service Task Force recommendations for the use of anti-retroviral drugs in pregnant women infected with HIV-1 for maternal health and for reducing perinatal HIV-1 transmission in the United States. MMWR 47 (RR-2).

Carpenter, C.C., M.A. Fischl, S.M. Hammer, et al. 1998. Antiretroviral therapy for HIV infection in 1998. Updated recommendations of international AIDS society-USA panel. A.M.A. 280:78-86.

Saag, M.S., M. Holodniy, D.R. Kuritzkes, et al. 1996. HIV viral load markers in clinical practice. Nature Medicine 2(6): 625-629.



190.14 - Human Immunodeficiency Virus (HIV) Testing (Diagnosis)

Other Names/Abbreviations

HIV, HIV-1, HIV-2, HIV1/2, HTLV III, Human T-cell lymphotropic virus, AIDS, Acquired immune deficiency syndrome

Description

Diagnosis of Human Immunodeficiency Virus (HIV) infection is primarily made through the use of serologic assays. These assays take one of two forms: antibody detection assays and specific HIV antigen (p24) procedures. The antibody assays are usually enzyme immunoassays (EIA) which are used to confirm exposure of an individual's immune system to specific viral antigens. These assays may be formatted to detect HIV-1, HIV-2, or HIV-1 and 2 simultaneously and to detect both IgM and IgG. When the initial EIA test is repeatedly positive or indeterminate, an alternative test is used to confirm the specificity of the antibodies to individual viral components. The most commonly used method is the Western Blot.

The HIV-1 core antigen (p24) test detects circulating viral antigen which may be found prior to the development of antibodies and may also be present in later stages of illness in the form of recurrent or persistent antigenemia. Its prognostic utility in HIV infection has been diminished as a result of development of sensitive viral RNA assays, and its primary use today is as a routine screening tool in potential blood donors.

In several unique situations, serologic testing alone may not reliably establish an HIV infection. This may occur because the antibody response (particularly the IgG response detected by Western Blot) has not yet developed (that is, acute retroviral syndrome), or is persistently equivocal because of inherent viral antigen variability. It is also an issue in perinatal HIV infection due to transplacental passage of maternal HIV antibody. In these situations, laboratory evidence of HIV in blood by culture, antigen assays, or proviral DNA or viral RNA assays, is required to establish a definitive determination of HIV infection.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
86689	Qualitative or semiquantitative immunoassays performed by multiple step methods; HTLV or HIV antibody, confirmatory test (for example, Western Blot)
86701	Antibody; HIV-1
86702	Antibody; HIV-2
86703	Antibody; HIV-1 and HIV-2, single assay
87390	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step method; HIV-1
87391	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step method; HIV-2



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Code	Description
87534	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, direct probe technique
87535	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, amplified probe technique
87537	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, direct probe technique
87538	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, amplified probe technique

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at
<http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A02.1	Salmonella sepsis
A07.2	Cryptosporidiosis
A07.3	Isosporiasis
A07.8	Other specified protozoal intestinal diseases
A15.0	Tuberculosis of lung
A15.4	Tuberculosis of intrathoracic lymph nodes
A15.5	Tuberculosis of larynx, trachea and bronchus
A15.6	Tuberculous pleurisy
A15.7	Primary respiratory tuberculosis
A15.8	Other respiratory tuberculosis
A15.9	Respiratory tuberculosis unspecified
A17.0	Tuberculous meningitis
A17.1	Meningeal tuberculoma
A17.81	Tuberculoma of brain and spinal cord
A17.82	Tuberculous meningoencephalitis
A17.83	Tuberculous neuritis
A17.89	Other tuberculosis of nervous system
A17.9	Tuberculosis of nervous system, unspecified



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Code	Description
A18.01	Tuberculosis of spine
A18.02	Tuberculous arthritis of other joints
A18.03	Tuberculosis of other bones
A18.09	Other musculoskeletal tuberculosis
A18.10	Tuberculosis of genitourinary system, unspecified
A18.11	Tuberculosis of kidney and ureter
A18.12	Tuberculosis of bladder
A18.13	Tuberculosis of other urinary organs
A18.14	Tuberculosis of prostate
A18.15	Tuberculosis of other male genital organs
A18.16	Tuberculosis of cervix
A18.17	Tuberculous female pelvic inflammatory disease
A18.18	Tuberculosis of other female genital organs
A18.2	Tuberculous peripheral lymphadenopathy
A18.31	Tuberculous peritonitis
A18.32	Tuberculous enteritis
A18.39	Retroperitoneal tuberculosis
A18.4	Tuberculosis of skin and subcutaneous tissue
A18.50	Tuberculosis of eye, unspecified
A18.51	Tuberculous episcleritis
A18.52	Tuberculous keratitis
A18.53	Tuberculous chorioretinitis
A18.54	Tuberculous iridocyclitis
A18.59	Other tuberculosis of eye
A18.6	Tuberculosis of (inner) (middle) ear
A18.7	Tuberculosis of adrenal glands
A18.81	Tuberculosis of thyroid gland
A18.82	Tuberculosis of other endocrine glands
A18.83	Tuberculosis of digestive tract organs, not elsewhere classified
A18.84	Tuberculosis of heart

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Code	Description
A18.85	Tuberculosis of spleen
A18.89	Tuberculosis of other sites
A19.0	Acute miliary tuberculosis of a single specified site
A19.1	Acute miliary tuberculosis of multiple sites
A19.2	Acute miliary tuberculosis, unspecified
A19.8	Other miliary tuberculosis
A19.9	Miliary tuberculosis, unspecified
A28.1	Cat-scratch disease
A31.0	Pulmonary mycobacterial infection
A31.1	Cutaneous mycobacterial infection
A31.2	Disseminated mycobacterium avium-intracellulare complex (DMAC)
A31.8	Other mycobacterial infections
A31.9	Mycobacterial infection, unspecified
A32.0	Cutaneous listeriosis
A32.11	Listerial meningitis
A32.12	Listerial meningoencephalitis
A32.7	Listerial sepsis
A32.81	Oculoglandular listeriosis
A32.82	Listerial endocarditis
A32.89	Other forms of listeriosis
A32.9	Listeriosis, unspecified
A40.3	Sepsis due to Streptococcus pneumoniae
A41.52	Sepsis due to Pseudomonas
A42.0	Pulmonary actinomycosis
A42.1	Abdominal actinomycosis
A42.2	Cervicofacial actinomycosis
A42.81	Actinomycotic meningitis
A42.82	Actinomycotic encephalitis
A42.89	Other forms of actinomycosis
A42.9	Actinomycosis, unspecified

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Code	Description
A43.0	Pulmonary nocardiosis
A43.1	Cutaneous nocardiosis
A43.8	Other forms of nocardiosis
A43.9	Nocardiosis, unspecified
A44.0	Systemic bartonellosis
A44.1	Cutaneous and mucocutaneous bartonellosis
A44.8	Other forms of bartonellosis
A44.9	Bartonellosis, unspecified
A48.1	Legionnaires' disease
A50.01	Early congenital syphilitic oculopathy
A50.02	Early congenital syphilitic osteochondropathy
A50.03	Early congenital syphilitic pharyngitis
A50.04	Early congenital syphilitic pneumonia
A50.05	Early congenital syphilitic rhinitis
A50.06	Early cutaneous congenital syphilis
A50.07	Early mucocutaneous congenital syphilis
A50.08	Early visceral congenital syphilis
A50.09	Other early congenital syphilis, symptomatic
A50.1	Early congenital syphilis, latent
A50.2	Early congenital syphilis, unspecified
A50.30	Late congenital syphilitic oculopathy, unspecified
A50.31	Late congenital syphilitic interstitial keratitis
A50.32	Late congenital syphilitic chorioretinitis
A50.39	Other late congenital syphilitic oculopathy
A50.40	Late congenital neurosyphilis, unspecified
A50.41	Late congenital syphilitic meningitis
A50.42	Late congenital syphilitic encephalitis
A50.43	Late congenital syphilitic polyneuropathy
A50.44	Late congenital syphilitic optic nerve atrophy
A50.45	Juvenile general paresis

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Code	Description
A50.49	Other late congenital neurosyphilis
A50.51	Clutton's joints
A50.52	Hutchinson's teeth
A50.53	Hutchinson's triad
A50.54	Late congenital cardiovascular syphilis
A50.55	Late congenital syphilitic arthropathy
A50.56	Late congenital syphilitic osteochondropathy
A50.57	Syphilitic saddle nose
A50.59	Other late congenital syphilis, symptomatic
A50.6	Late congenital syphilis, latent
A50.7	Late congenital syphilis, unspecified
A50.9	Congenital syphilis, unspecified
A51.0	Primary genital syphilis
A51.1	Primary anal syphilis
A51.2	Primary syphilis of other sites
A51.31	Condyloma latum
A51.32	Syphilitic alopecia
A51.39	Other secondary syphilis of skin
A51.41	Secondary syphilitic meningitis
A51.42	Secondary syphilitic female pelvic disease
A51.43	Secondary syphilitic oculopathy
A51.44	Secondary syphilitic nephritis
A51.45	Secondary syphilitic hepatitis
A51.46	Secondary syphilitic osteopathy
A51.49	Other secondary syphilitic conditions
A51.5	Early syphilis, latent
A51.9	Early syphilis, unspecified
A52.00	Cardiovascular syphilis, unspecified
A52.01	Syphilitic aneurysm of aorta
A52.02	Syphilitic aortitis



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Code	Description
A52.03	Syphilitic endocarditis
A52.04	Syphilitic cerebral arteritis
A52.05	Other cerebrovascular syphilis
A52.06	Other syphilitic heart involvement
A52.09	Other cardiovascular syphilis
A52.10	Symptomatic neurosyphilis, unspecified
A52.11	Tabes dorsalis
A52.12	Other cerebrospinal syphilis
A52.13	Late syphilitic meningitis
A52.14	Late syphilitic encephalitis
A52.15	Late syphilitic neuropathy
A52.16	Charcot's arthropathy (tabetic)
A52.17	General paresis
A52.19	Other symptomatic neurosyphilis
A52.2	Asymptomatic neurosyphilis
A52.3	Neurosyphilis, unspecified
A52.71	Late syphilitic ophthalmopathy
A52.72	Syphilis of lung and bronchus
A52.73	Symptomatic late syphilis of other respiratory organs
A52.74	Syphilis of liver and other viscera
A52.75	Syphilis of kidney and ureter
A52.76	Other genitourinary symptomatic late syphilis
A52.77	Syphilis of bone and joint
A52.78	Syphilis of other musculoskeletal tissue
A52.79	Other symptomatic late syphilis
A52.8	Late syphilis, latent
A52.9	Late syphilis, unspecified
A53.0	Latent syphilis, unspecified as early or late
A53.9	Syphilis, unspecified
A54.00	Gonococcal infection of lower genitourinary tract, unspecified



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Code	Description
A54.01	Gonococcal cystitis and urethritis, unspecified
A54.02	Gonococcal vulvovaginitis, unspecified
A54.03	Gonococcal cervicitis, unspecified
A54.09	Other gonococcal infection of lower genitourinary tract
A54.1	Gonococcal infection of lower genitourinary tract with periurethral and accessory gland abscess
A54.21	Gonococcal infection of kidney and ureter
A54.22	Gonococcal prostatitis
A54.23	Gonococcal infection of other male genital organs
A54.24	Gonococcal female pelvic inflammatory disease
A54.29	Other gonococcal genitourinary infections
A54.30	Gonococcal infection of eye, unspecified
A54.31	Gonococcal conjunctivitis
A54.32	Gonococcal iridocyclitis
A54.33	Gonococcal keratitis
A54.39	Other gonococcal eye infection
A54.40	Gonococcal infection of musculoskeletal system, unspecified
A54.41	Gonococcal spondylopathy
A54.42	Gonococcal arthritis
A54.43	Gonococcal osteomyelitis
A54.49	Gonococcal infection of other musculoskeletal tissue
A54.5	Gonococcal pharyngitis
A54.6	Gonococcal infection of anus and rectum
A54.81	Gonococcal meningitis
A54.82	Gonococcal brain abscess
A54.83	Gonococcal heart infection
A54.84	Gonococcal pneumonia
A54.85	Gonococcal peritonitis
A54.86	Gonococcal sepsis
A54.89	Other gonococcal infections
A54.9	Gonococcal infection, unspecified

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Code	Description
A55	Chlamydial lymphogranuloma (venereum)
A56.00	Chlamydial infection of lower genitourinary tract, unspecified
A56.01	Chlamydial cystitis and urethritis
A56.02	Chlamydial vulvovaginitis
A56.09	Other chlamydial infection of lower genitourinary tract
A56.11	Chlamydial female pelvic inflammatory disease
A56.19	Other chlamydial genitourinary infection
A56.2	Chlamydial infection of genitourinary tract, unspecified
A56.3	Chlamydial infection of anus and rectum
A56.4	Chlamydial infection of pharynx
A56.8	Sexually transmitted chlamydial infection of other sites
A57	Chancroid
A58	Granuloma inguinale
A59.01	Trichomonal vulvovaginitis
A60.00	Herpesviral infection of urogenital system, unspecified
A60.01	Herpesviral infection of penis
A60.02	Herpesviral infection of other male genital organs
A60.03	Herpesviral cervicitis
A60.04	Herpesviral vulvovaginitis
A60.09	Herpesviral infection of other urogenital tract
A60.1	Herpesviral infection of perianal skin and rectum
A60.9	Anogenital herpesviral infection, unspecified
A63.0	Anogenital (venereal) warts
A63.8	Other specified predominantly sexually transmitted diseases
A64	Unspecified sexually transmitted disease
A74.81	Chlamydial peritonitis
A74.89	Other chlamydial diseases
A74.9	Chlamydial infection, unspecified
A81.2	Progressive multifocal leukoencephalopathy
A85.0	Enteroviral encephalitis

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Code	Description
A85.1	Adenoviral encephalitis
A85.8	Other specified viral encephalitis
A86	Unspecified viral encephalitis
A87.1	Adenoviral meningitis
A87.2	Lymphocytic choriomeningitis
A88.8	Other specified viral infections of central nervous system
A89	Unspecified viral infection of central nervous system
B00.0	Eczema herpeticum
B00.1	Herpesviral vesicular dermatitis
B00.2	Herpesviral gingivostomatitis and pharyngotonsillitis
B00.3	Herpesviral meningitis
B00.4	Herpesviral encephalitis
B00.50	Herpesviral ocular disease, unspecified
B00.51	Herpesviral iridocyclitis
B00.52	Herpesviral keratitis
B00.53	Herpesviral conjunctivitis
B00.59	Other herpesviral disease of eye
B00.7	Disseminated herpesviral disease
B00.81	Herpesviral hepatitis
B00.82	Herpes simplex myelitis
B00.89	Other herpesviral infection
B00.9	Herpesviral infection, unspecified
B01.0	Varicella meningitis
B01.11	Varicella encephalitis and encephalomyelitis
B01.12	Varicella myelitis
B01.2	Varicella pneumonia
B01.81	Varicella keratitis
B01.89	Other varicella complications
B02.0	Zoster encephalitis
B02.1	Zoster meningitis

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Code	Description
B02.21	Postherpetic geniculate ganglionitis
B02.22	Postherpetic trigeminal neuralgia
B02.23	Postherpetic polyneuropathy
B02.24	Postherpetic myelitis
B02.29	Other postherpetic nervous system involvement
B02.30	Zoster ocular disease, unspecified
B02.31	Zoster conjunctivitis
B02.32	Zoster iridocyclitis
B02.33	Zoster keratitis
B02.34	Zoster scleritis
B02.39	Other herpes zoster eye disease
B02.7	Disseminated zoster
B02.8	Zoster with other complications
B02.9	Zoster without complications
B05.0	Measles complicated by encephalitis
B05.1	Measles complicated by meningitis
B05.2	Measles complicated by pneumonia
B05.3	Measles complicated by otitis media
B05.4	Measles with intestinal complications
B05.81	Measles keratitis and keratoconjunctivitis
B05.89	Other measles complications
B07.0	Plantar wart
B07.8	Other viral warts
B07.9	Viral wart, unspecified
B08.1	Molluscum contagiosum
B16.0	Acute hepatitis B with delta-agent with hepatic coma
B16.1	Acute hepatitis B with delta-agent without hepatic coma
B16.2	Acute hepatitis B without delta-agent with hepatic coma
B16.9	Acute hepatitis B without delta-agent and without hepatic coma
B17.0	Acute delta-(super) infection of hepatitis B carrier

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Code	Description
B17.10	Acute hepatitis C without hepatic coma
B17.11	Acute hepatitis C with hepatic coma
B17.8	Other specified acute viral hepatitis
B17.9	Acute viral hepatitis, unspecified
B18.0	Chronic viral hepatitis B with delta-agent
B18.1	Chronic viral hepatitis B without delta-agent
B18.2	Chronic viral hepatitis C
B18.8	Other chronic viral hepatitis
B18.9	Chronic viral hepatitis, unspecified
B19.0	Unspecified viral hepatitis with hepatic coma
B19.10	Unspecified viral hepatitis B without hepatic coma
B19.11	Unspecified viral hepatitis B with hepatic coma
B19.20	Unspecified viral hepatitis C without hepatic coma
B19.21	Unspecified viral hepatitis C with hepatic coma
B19.9	Unspecified viral hepatitis without hepatic coma
B20	Human immunodeficiency virus [HIV] disease
B25.0	Cytomegaloviral pneumonitis
B25.1	Cytomegaloviral hepatitis
B25.2	Cytomegaloviral pancreatitis
B25.8	Other cytomegaloviral diseases
B25.9	Cytomegaloviral disease, unspecified
B33.3	Retrovirus infections, not elsewhere classified
B34.3	Parvovirus infection, unspecified
B35.1	Tinea unguium
B36.0	Pityriasis versicolor
B37.0	Candidal stomatitis
B37.1	Pulmonary candidiasis
B37.2	Candidiasis of skin and nail
B37.3	Candidiasis of vulva and vagina
B37.41	Candidal cystitis and urethritis

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Code	Description
B37.42	Candidal balanitis
B37.49	Other urogenital candidiasis
B37.5	Candidal meningitis
B37.6	Candidal endocarditis
B37.7	Candidal sepsis
B37.81	Candidal esophagitis
B37.82	Candidal enteritis
B37.83	Candidal cheilitis
B37.84	Candidal otitis externa
B37.89	Other sites of candidiasis
B37.9	Candidiasis, unspecified
B38.0	Acute pulmonary coccidioidomycosis
B38.1	Chronic pulmonary coccidioidomycosis
B38.2	Pulmonary coccidioidomycosis, unspecified
B38.3	Cutaneous coccidioidomycosis
B38.4	Coccidioidomycosis meningitis
B38.7	Disseminated coccidioidomycosis
B38.81	Prostatic coccidioidomycosis
B38.89	Other forms of coccidioidomycosis
B38.9	Coccidioidomycosis, unspecified
B39.0	Acute pulmonary histoplasmosis capsulati
B39.1	Chronic pulmonary histoplasmosis capsulati
B39.2	Pulmonary histoplasmosis capsulati, unspecified
B39.3	Disseminated histoplasmosis capsulati
B39.4	Histoplasmosis capsulati, unspecified
B39.5	Histoplasmosis duboisii
B39.9	Histoplasmosis, unspecified
B40.0	Acute pulmonary blastomycosis
B40.1	Chronic pulmonary blastomycosis
B40.2	Pulmonary blastomycosis, unspecified

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Code	Description
B40.3	Cutaneous blastomycosis
B40.7	Disseminated blastomycosis
B40.81	Blastomycotic meningoencephalitis
B40.89	Other forms of blastomycosis
B40.9	Blastomycosis, unspecified
B41.0	Pulmonary paracoccidioidomycosis
B41.7	Disseminated paracoccidioidomycosis
B41.8	Other forms of paracoccidioidomycosis
B41.9	Paracoccidioidomycosis, unspecified
B44.0	Invasive pulmonary aspergillosis
B44.1	Other pulmonary aspergillosis
B44.2	Tonsillar aspergillosis
B44.7	Disseminated aspergillosis
B44.89	Other forms of aspergillosis
B44.9	Aspergillosis, unspecified
B45.0	Pulmonary cryptococcosis
B45.1	Cerebral cryptococcosis
B45.2	Cutaneous cryptococcosis
B45.3	Osseous cryptococcosis
B45.7	Disseminated cryptococcosis
B45.8	Other forms of cryptococcosis
B45.9	Cryptococcosis, unspecified
B47.1	Actinomycetoma
B47.9	Mycetoma, unspecified
B48.0	Lobomycosis
B48.4	Penicilloles
B48.8	Other specified mycoses
B55.0	Visceral leishmaniasis
B55.1	Cutaneous leishmaniasis
B55.2	Mucocutaneous leishmaniasis



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Code	Description
B55.9	Leishmaniasis, unspecified
B58.00	Toxoplasma oculopathy, unspecified
B58.01	Toxoplasma chorioretinitis
B58.09	Other toxoplasma oculopathy
B58.1	Toxoplasma hepatitis
B58.2	Toxoplasma meningoencephalitis
B58.3	Pulmonary toxoplasmosis
B58.81	Toxoplasma myocarditis
B58.82	Toxoplasma myositis
B58.83	Toxoplasma tubulo-interstitial nephropathy
B58.89	Toxoplasmosis with other organ involvement
B58.9	Toxoplasmosis, unspecified
B59	Pneumocystosis
B60.10	Acanthamebiasis, unspecified
B60.11	Meningoencephalitis due to Acanthamoeba (culbertsoni)
B60.12	Conjunctivitis due to Acanthamoeba
B60.13	Keratoconjunctivitis due to Acanthamoeba
B60.19	Other acanthamebic disease
B60.2	Naegleriasis
B60.8	Other specified protozoal diseases
B78.0	Intestinal strongyloidiasis
B78.7	Disseminated strongyloidiasis
B78.9	Strongyloidiasis, unspecified
B85.3	Phthiriasis
B86	Scabies
B96.5	Pseudomonas (aeruginosa) (mallei) (pseudomallei) as the cause of diseases classified elsewhere
B97.30	Unspecified retrovirus as the cause of diseases classified elsewhere
B97.31	Lentivirus as the cause of diseases classified elsewhere
B97.32	Oncovirus as the cause of diseases classified elsewhere



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Code	Description
B97.33	Human T-cell lymphotropic virus, type I [HTLV-I] as the cause of diseases classified elsewhere
B97.34	Human T-cell lymphotropic virus, type II [HTLV-II] as the cause of diseases classified elsewhere
B97.35	Human immunodeficiency virus, type 2 [HIV 2] as the cause of diseases classified elsewhere
B97.39	Other retrovirus as the cause of diseases classified elsewhere
B99.8	Other infectious disease
C46.0	Kaposi's sarcoma of skin
C46.1	Kaposi's sarcoma of soft tissue
C46.2	Kaposi's sarcoma of palate
C46.3	Kaposi's sarcoma of lymph nodes
C46.4	Kaposi's sarcoma of gastrointestinal sites
C46.50	Kaposi's sarcoma of unspecified lung
C46.51	Kaposi's sarcoma of right lung
C46.52	Kaposi's sarcoma of left lung
C46.7	Kaposi's sarcoma of other sites
C46.9	Kaposi's sarcoma, unspecified
C53.0	Malignant neoplasm of endocervix
C53.1	Malignant neoplasm of exocervix
C53.8	Malignant neoplasm of overlapping sites of cervix uteri
C53.9	Malignant neoplasm of cervix uteri, unspecified
C81.00	Nodular lymphocyte predominant Hodgkin lymphoma, unspecified site
C81.01	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.02	Nodular lymphocyte predominant Hodgkin lymphoma, intrathoracic lymph nodes
C81.03	Nodular lymphocyte predominant Hodgkin lymphoma, intra-abdominal lymph nodes
C81.04	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.05	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.06	Nodular lymphocyte predominant Hodgkin lymphoma, intrapelvic lymph nodes

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Code	Description
C81.07	Nodular lymphocyte predominant Hodgkin lymphoma, spleen
C81.08	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of multiple sites
C81.09	Nodular lymphocyte predominant Hodgkin lymphoma, extranodal and solid organ sites
C81.10	Nodular sclerosis Hodgkin lymphoma, unspecified site
C81.11	Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.12	Nodular sclerosis Hodgkin lymphoma, intrathoracic lymph nodes
C81.13	Nodular sclerosis Hodgkin lymphoma, intra-abdominal lymph nodes
C81.14	Nodular sclerosis Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.15	Nodular sclerosis Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.16	Nodular sclerosis Hodgkin lymphoma, intrapelvic lymph nodes
C81.17	Nodular sclerosis Hodgkin lymphoma, spleen
C81.18	Nodular sclerosis Hodgkin lymphoma, lymph nodes of multiple sites
C81.19	Nodular sclerosis Hodgkin lymphoma, extranodal and solid organ sites
C81.20	Mixed cellularity Hodgkin lymphoma, unspecified site
C81.21	Mixed cellularity Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.22	Mixed cellularity Hodgkin lymphoma, intrathoracic lymph nodes
C81.23	Mixed cellularity Hodgkin lymphoma, intra-abdominal lymph nodes
C81.24	Mixed cellularity Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.25	Mixed cellularity Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.26	Mixed cellularity Hodgkin lymphoma, intrapelvic lymph nodes
C81.27	Mixed cellularity Hodgkin lymphoma, spleen
C81.28	Mixed cellularity Hodgkin lymphoma, lymph nodes of multiple sites
C81.29	Mixed cellularity Hodgkin lymphoma, extranodal and solid organ sites
C81.30	Lymphocyte depleted Hodgkin lymphoma, unspecified site
C81.31	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.32	Lymphocyte depleted Hodgkin lymphoma, intrathoracic lymph nodes
C81.33	Lymphocyte depleted Hodgkin lymphoma, intra-abdominal lymph nodes
C81.34	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.35	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.36	Lymphocyte depleted Hodgkin lymphoma, intrapelvic lymph nodes

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Code	Description
C81.37	Lymphocyte depleted Hodgkin lymphoma, spleen
C81.38	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of multiple sites
C81.39	Lymphocyte depleted Hodgkin lymphoma, extranodal and solid organ sites
C81.40	Lymphocyte-rich Hodgkin lymphoma, unspecified site
C81.41	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.42	Lymphocyte-rich Hodgkin lymphoma, intrathoracic lymph nodes
C81.43	Lymphocyte-rich Hodgkin lymphoma, intra-abdominal lymph nodes
C81.44	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.45	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.46	Lymphocyte-rich Hodgkin lymphoma, intrapelvic lymph nodes
C81.47	Lymphocyte-rich Hodgkin lymphoma, spleen
C81.48	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of multiple sites
C81.49	Lymphocyte-rich Hodgkin lymphoma, extranodal and solid organ sites
C81.70	Other Hodgkin lymphoma, unspecified site
C81.71	Other Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.72	Other Hodgkin lymphoma, intrathoracic lymph nodes
C81.73	Other Hodgkin lymphoma, intra-abdominal lymph nodes
C81.74	Other Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.75	Other Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.76	Other Hodgkin lymphoma, intrapelvic lymph nodes
C81.77	Other Hodgkin lymphoma, spleen
C81.78	Other Hodgkin lymphoma, lymph nodes of multiple sites
C81.79	Other Hodgkin lymphoma, extranodal and solid organ sites
C81.90	Hodgkin lymphoma, unspecified, unspecified site
C81.91	Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck
C81.92	Hodgkin lymphoma, unspecified, intrathoracic lymph nodes
C81.93	Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes
C81.94	Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb
C81.95	Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C81.96	Hodgkin lymphoma, unspecified, intrapelvic lymph nodes

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Code	Description
C81.97	Hodgkin lymphoma, unspecified, spleen
C81.98	Hodgkin lymphoma, unspecified, lymph nodes of multiple sites
C81.99	Hodgkin lymphoma, unspecified, extranodal and solid organ sites
C83.00	Small cell B-cell lymphoma, unspecified site
C83.01	Small cell B-cell lymphoma, lymph nodes of head, face, and neck
C83.02	Small cell B-cell lymphoma, intrathoracic lymph nodes
C83.03	Small cell B-cell lymphoma, intra-abdominal lymph nodes
C83.04	Small cell B-cell lymphoma, lymph nodes of axilla and upper limb
C83.05	Small cell B-cell lymphoma, lymph nodes of inguinal region and lower limb
C83.06	Small cell B-cell lymphoma, intrapelvic lymph nodes
C83.07	Small cell B-cell lymphoma, spleen
C83.08	Small cell B-cell lymphoma, lymph nodes of multiple sites
C83.09	Small cell B-cell lymphoma, extranodal and solid organ sites
C83.70	Burkitt lymphoma, unspecified site
C83.71	Burkitt lymphoma, lymph nodes of head, face, and neck
C83.72	Burkitt lymphoma, intrathoracic lymph nodes
C83.73	Burkitt lymphoma, intra-abdominal lymph nodes
C83.74	Burkitt lymphoma, lymph nodes of axilla and upper limb
C83.75	Burkitt lymphoma, lymph nodes of inguinal region and lower limb
C83.76	Burkitt lymphoma, intrapelvic lymph nodes
C83.77	Burkitt lymphoma, spleen
C83.78	Burkitt lymphoma, lymph nodes of multiple sites
C83.79	Burkitt lymphoma, extranodal and solid organ sites
C83.80	Other non-follicular lymphoma, unspecified site
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck
C83.82	Other non-follicular lymphoma, intrathoracic lymph nodes
C83.83	Other non-follicular lymphoma, intra-abdominal lymph nodes
C83.84	Other non-follicular lymphoma, lymph nodes of axilla and upper limb
C83.85	Other non-follicular lymphoma, lymph nodes of inguinal region and lower limb
C83.86	Other non-follicular lymphoma, intrapelvic lymph nodes

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Code	Description
C83.87	Other non-follicular lymphoma, spleen
C83.88	Other non-follicular lymphoma, lymph nodes of multiple sites
C83.89	Other non-follicular lymphoma, extranodal and solid organ sites
C83.90	Non-follicular (diffuse) lymphoma, unspecified, unspecified site
C83.91	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of head, face, and neck
C83.92	Non-follicular (diffuse) lymphoma, unspecified, intrathoracic lymph nodes
C83.93	Non-follicular (diffuse) lymphoma, unspecified, intra-abdominal lymph nodes
C83.94	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of axilla and upper limb
C83.95	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C83.96	Non-follicular (diffuse) lymphoma, unspecified, intrapelvic lymph nodes
C83.97	Non-follicular (diffuse) lymphoma, unspecified, spleen
C83.98	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of multiple sites
C83.99	Non-follicular (diffuse) lymphoma, unspecified, extranodal and solid organ sites
C86.5	Angioimmunoblastic T-cell lymphoma
C86.6	Primary cutaneous CD30-positive T-cell proliferations
D50.0	Iron deficiency anemia secondary to blood loss (chronic)
D50.1	Sideropenic dysphagia
D50.8	Other iron deficiency anemias
D50.9	Iron deficiency anemia, unspecified
D64.9	Anemia, unspecified
D69.3	Immune thrombocytopenic purpura
D69.41	Evans syndrome
D69.42	Congenital and hereditary thrombocytopenia purpura
D69.49	Other primary thrombocytopenia
D70.0	Congenital agranulocytosis
D70.1	Agranulocytosis secondary to cancer chemotherapy
D70.2	Other drug-induced agranulocytosis
D70.3	Neutropenia due to infection
D70.4	Cyclic neutropenia
D70.8	Other neutropenia

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Code	Description
D70.9	Neutropenia, unspecified
D72.810	Lymphocytopenia
D72.818	Other decreased white blood cell count
D72.819	Decreased white blood cell count, unspecified
D72.820	Lymphocytosis (symptomatic)
D72.821	Monocytosis (symptomatic)
D72.822	Plasmacytosis
D72.823	Leukemoid reaction
D72.824	Basophilia
D72.825	Bandemia
D72.828	Other elevated white blood cell count
D72.829	Elevated white blood cell count, unspecified
D72.89	Other specified disorders of white blood cells
D73.81	Neutropenic splenomegaly
D76.1	Hemophagocytic lymphohistiocytosis
D76.2	Hemophagocytic syndrome, infection-associated
D76.3	Other histiocytosis syndromes
E44.0	Moderate protein-calorie malnutrition
E44.1	Mild protein-calorie malnutrition
E46	Unspecified protein-calorie malnutrition
E64.0	Sequelae of protein-calorie malnutrition
F06.1	Catatonic disorder due to known physiological condition
F06.8	Other specified mental disorders due to known physiological condition
F07.0	Personality change due to known physiological condition
G03.1	Chronic meningitis
G31.09	Other frontotemporal dementia
G31.84	Mild cognitive impairment, so stated
G56.00	Carpal tunnel syndrome, unspecified upper limb
G56.01	Carpal tunnel syndrome, right upper limb
G56.02	Carpal tunnel syndrome, left upper limb

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Code	Description
G56.10	Other lesions of median nerve, unspecified upper limb
G56.11	Other lesions of median nerve, right upper limb
G56.12	Other lesions of median nerve, left upper limb
G56.20	Lesion of ulnar nerve, unspecified upper limb
G56.21	Lesion of ulnar nerve, right upper limb
G56.22	Lesion of ulnar nerve, left upper limb
G56.30	Lesion of radial nerve, unspecified upper limb
G56.31	Lesion of radial nerve, right upper limb
G56.32	Lesion of radial nerve, left upper limb
G56.40	Causalgia of unspecified upper limb
G56.41	Causalgia of right upper limb
G56.42	Causalgia of left upper limb
G56.80	Other specified mononeuropathies of unspecified upper limb
G56.81	Other specified mononeuropathies of right upper limb
G56.82	Other specified mononeuropathies of left upper limb
G56.90	Unspecified mononeuropathy of unspecified upper limb
G56.91	Unspecified mononeuropathy of right upper limb
G56.92	Unspecified mononeuropathy of left upper limb
G58.0	Intercostal neuropathy
G58.7	Mononeuritis multiplex
G60.8	Other hereditary and idiopathic neuropathies
G93.3	Postviral fatigue syndrome
G93.40	Encephalopathy, unspecified
G93.49	Other encephalopathy
G95.20	Unspecified cord compression
G95.29	Other cord compression
G95.9	Disease of spinal cord, unspecified
H30.891	Other chorioretinal inflammations, right eye
H30.892	Other chorioretinal inflammations, left eye
H30.893	Other chorioretinal inflammations, bilateral

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Code	Description
H30.899	Other chorioretinal inflammations, unspecified eye
H30.90	Unspecified chorioretinal inflammation, unspecified eye
H30.91	Unspecified chorioretinal inflammation, right eye
H30.92	Unspecified chorioretinal inflammation, left eye
H30.93	Unspecified chorioretinal inflammation, bilateral
I42.0	Dilated cardiomyopathy
I42.5	Other restrictive cardiomyopathy
I42.8	Other cardiomyopathies
I42.9	Cardiomyopathy, unspecified
I67.3	Progressive vascular leukoencephalopathy
I67.83	Posterior reversible encephalopathy syndrome
J13	Pneumonia due to Streptococcus pneumoniae
J14	Pneumonia due to Hemophilus influenzae
J15.0	Pneumonia due to Klebsiella pneumoniae
J15.1	Pneumonia due to Pseudomonas
J15.20	Pneumonia due to staphylococcus, unspecified
J15.211	Pneumonia due to Methicillin susceptible Staphylococcus aureus
J15.212	Pneumonia due to Methicillin resistant Staphylococcus aureus
J15.29	Pneumonia due to other staphylococcus
J15.3	Pneumonia due to streptococcus, group B
J15.4	Pneumonia due to other streptococci
J15.5	Pneumonia due to Escherichia coli
J15.6	Pneumonia due to other aerobic Gram-negative bacteria
J15.8	Pneumonia due to other specified bacteria
J15.9	Unspecified bacterial pneumonia
J18.1	Lobar pneumonia, unspecified organism
J18.8	Other pneumonia, unspecified organism
J18.9	Pneumonia, unspecified organism
J32.0	Chronic maxillary sinusitis
J32.1	Chronic frontal sinusitis

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Code	Description
J32.2	Chronic ethmoidal sinusitis
J32.3	Chronic sphenoidal sinusitis
J32.4	Chronic pansinusitis
J32.8	Other chronic sinusitis
J32.9	Chronic sinusitis, unspecified
J84.09	Other alveolar and parieto-alveolar conditions
J93.11	Primary spontaneous pneumothorax
J93.12	Secondary spontaneous pneumothorax
J93.81	Chronic pneumothorax
K12.0	Recurrent oral aphthae
K12.2	Cellulitis and abscess of mouth
K13.21	Leukoplakia of oral mucosa, including tongue
K13.3	Hairy leukoplakia
K22.10	Ulcer of esophagus without bleeding
K22.11	Ulcer of esophagus with bleeding
K22.70	Barrett's esophagus without dysplasia
K22.710	Barrett's esophagus with low grade dysplasia
K22.711	Barrett's esophagus with high grade dysplasia
K22.719	Barrett's esophagus with dysplasia, unspecified
*K52.3	*Indeterminate colitis
*K52.831	*Collagenous colitis
*K52.832	*Lymphocytic colitis
*K52.838	*Other microscopic colitis
*K52.839	*Microscopic colitis, unspecified
L02.01	Cutaneous abscess of face
L02.11	Cutaneous abscess of neck
L02.211	Cutaneous abscess of abdominal wall
L02.212	Cutaneous abscess of back [any part, except buttock]
L02.213	Cutaneous abscess of chest wall
L02.214	Cutaneous abscess of groin



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Code	Description
L02.215	Cutaneous abscess of perineum
L02.216	Cutaneous abscess of umbilicus
L02.219	Cutaneous abscess of trunk, unspecified
L02.31	Cutaneous abscess of buttock
L02.411	Cutaneous abscess of right axilla
L02.412	Cutaneous abscess of left axilla
L02.413	Cutaneous abscess of right upper limb
L02.414	Cutaneous abscess of left upper limb
L02.415	Cutaneous abscess of right lower limb
L02.416	Cutaneous abscess of left lower limb
L02.419	Cutaneous abscess of limb, unspecified
L02.511	Cutaneous abscess of right hand
L02.512	Cutaneous abscess of left hand
L02.519	Cutaneous abscess of unspecified hand
L02.611	Cutaneous abscess of right foot
L02.612	Cutaneous abscess of left foot
L02.619	Cutaneous abscess of unspecified foot
L02.811	Cutaneous abscess of head [any part, except face]
L02.818	Cutaneous abscess of other sites
L02.91	Cutaneous abscess, unspecified
L03.111	Cellulitis of right axilla
L03.112	Cellulitis of left axilla
L03.113	Cellulitis of right upper limb
L03.114	Cellulitis of left upper limb
L03.115	Cellulitis of right lower limb
L03.116	Cellulitis of left lower limb
L03.119	Cellulitis of unspecified part of limb
L03.121	Acute lymphangitis of right axilla
L03.122	Acute lymphangitis of left axilla
L03.123	Acute lymphangitis of right upper limb

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Code	Description
L03.124	Acute lymphangitis of left upper limb
L03.125	Acute lymphangitis of right lower limb
L03.126	Acute lymphangitis of left lower limb
L03.129	Acute lymphangitis of unspecified part of limb
L03.211	Cellulitis of face
L03.212	Acute lymphangitis of face
*L03.213	*Periorbital cellulitis
L03.221	Cellulitis of neck
L03.222	Acute lymphangitis of neck
L03.311	Cellulitis of abdominal wall
L03.312	Cellulitis of back [any part except buttock]
L03.313	Cellulitis of chest wall
L03.314	Cellulitis of groin
L03.315	Cellulitis of perineum
L03.316	Cellulitis of umbilicus
L03.317	Cellulitis of buttock
L03.319	Cellulitis of trunk, unspecified
L03.321	Acute lymphangitis of abdominal wall
L03.322	Acute lymphangitis of back [any part except buttock]
L03.323	Acute lymphangitis of chest wall
L03.324	Acute lymphangitis of groin
L03.325	Acute lymphangitis of perineum
L03.326	Acute lymphangitis of umbilicus
L03.327	Acute lymphangitis of buttock
L03.329	Acute lymphangitis of trunk, unspecified
L03.811	Cellulitis of head [any part, except face]
L03.818	Cellulitis of other sites
L03.891	Acute lymphangitis of head [any part, except face]
L03.898	Acute lymphangitis of other sites
L03.90	Cellulitis, unspecified



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Code	Description
L03.91	Acute lymphangitis, unspecified
L08.1	Erythrasma
L20.83	Infantile (acute) (chronic) eczema
L21.0	Seborrhea capitis
L21.1	Seborrheic infantile dermatitis
L21.8	Other seborrheic dermatitis
L21.9	Seborrheic dermatitis, unspecified
L28.0	Lichen simplex chronicus
L28.1	Prurigo nodularis
L40.0	Psoriasis vulgaris
L40.1	Generalized pustular psoriasis
L40.2	Acrodermatitis continua
L40.3	Pustulosis palmaris et plantaris
L40.4	Guttate psoriasis
L40.8	Other psoriasis
L40.9	Psoriasis, unspecified
L66.3	Perifolliculitis capitis abscedens
L70.0	Acne vulgaris
L70.1	Acne conglobata
L70.2	Acne varioliformis
L70.3	Acne tropica
L70.4	Infantile acne
L70.5	Acne excoriee
L70.8	Other acne
L70.9	Acne, unspecified
L72.0	Epidermal cyst
L72.2	Steatocystoma multiplex
L72.3	Sebaceous cyst
L72.8	Other follicular cysts of the skin and subcutaneous tissue
L72.9	Follicular cyst of the skin and subcutaneous tissue, unspecified



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Code	Description
L73.0	Acne keloid
L73.1	Pseudofolliculitis barbae
L73.8	Other specified follicular disorders
L73.9	Follicular disorder, unspecified
L85.3	Xerosis cutis
L98.3	Eosinophilic cellulitis [Wells]
M02.30	Reiter's disease, unspecified site
M02.311	Reiter's disease, right shoulder
M02.312	Reiter's disease, left shoulder
M02.319	Reiter's disease, unspecified shoulder
M02.321	Reiter's disease, right elbow
M02.322	Reiter's disease, left elbow
M02.329	Reiter's disease, unspecified elbow
M02.331	Reiter's disease, right wrist
M02.332	Reiter's disease, left wrist
M02.339	Reiter's disease, unspecified wrist
M02.341	Reiter's disease, right hand
M02.342	Reiter's disease, left hand
M02.349	Reiter's disease, unspecified hand
M02.351	Reiter's disease, right hip
M02.352	Reiter's disease, left hip
M02.359	Reiter's disease, unspecified hip
M02.361	Reiter's disease, right knee
M02.362	Reiter's disease, left knee
M02.369	Reiter's disease, unspecified knee
M02.371	Reiter's disease, right ankle and foot
M02.372	Reiter's disease, left ankle and foot
M02.379	Reiter's disease, unspecified ankle and foot
M02.38	Reiter's disease, vertebrae
M02.39	Reiter's disease, multiple sites



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Code	Description
*M04.1	*Periodic fever syndromes
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes
N06.9	Isolated proteinuria with unspecified morphologic lesion
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions
N15.9	Renal tubulo-interstitial disease, unspecified
N25.81	Secondary hyperparathyroidism of renal origin
N25.89	Other disorders resulting from impaired renal tubular function
N34.1	Nonspecific urethritis
*O09.A0	*Supervision of pregnancy with history of molar pregnancy, unspecified trimester
*O09.A1	*Supervision of pregnancy with history of molar pregnancy, first trimester
*O09.A2	*Supervision of pregnancy with history of molar pregnancy, second trimester
*O09.A3	*Supervision of pregnancy with history of molar pregnancy, third trimester
*O11.4	*Pre-existing hypertension with pre-eclampsia, complicating childbirth
*O11.5	*Pre-existing hypertension with pre-eclampsia, complicating the puerperium
*O12.04	*Gestational edema, complicating childbirth
*O12.05	*Gestational edema, complicating the puerperium
*O12.14	*Gestational proteinuria, complicating childbirth
*O12.15	*Gestational proteinuria, complicating the puerperium
*O12.24	*Gestational edema with proteinuria, complicating childbirth
*O12.25	*Gestational edema with proteinuria, complicating the puerperium
*O13.4	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth
*O13.5	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating the puerperium
*O14.04	*Mild to moderate pre-eclampsia, complicating childbirth
*O14.05	*Mild to moderate pre-eclampsia, complicating the puerperium
*O14.14	*Severe pre-eclampsia complicating childbirth
*O14.15	*Severe pre-eclampsia, complicating the puerperium
*O14.24	*HELLP syndrome, complicating childbirth
*O14.25	*HELLP syndrome, complicating the puerperium
*O14.94	*Unspecified pre-eclampsia, complicating childbirth

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Code	Description
*O14.95	*Unspecified pre-eclampsia, complicating the puerperium
*O16.4	*Unspecified maternal hypertension, complicating childbirth
*O16.5	*Unspecified maternal hypertension, complicating the puerperium
*O24.415	*Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs
*O24.425	*Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs
*O24.435	*Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs
*O44.20	*Partial placenta previa NOS or without hemorrhage, unspecified trimester
*O44.21	*Partial placenta previa NOS or without hemorrhage, first trimester
*O44.22	*Partial placenta previa NOS or without hemorrhage, second trimester
*O44.23	*Partial placenta previa NOS or without hemorrhage, third trimester
*O44.30	*Partial placenta previa with hemorrhage, unspecified trimester
*O44.31	*Partial placenta previa with hemorrhage, first trimester
*O44.32	*Partial placenta previa with hemorrhage, second trimester
*O44.33	*Partial placenta previa with hemorrhage, third trimester
*O44.40	*Low lying placenta NOS or without hemorrhage, unspecified trimester
*O44.41	*Low lying placenta NOS or without hemorrhage, first trimester
*O44.42	*Low lying placenta NOS or without hemorrhage, second trimester
*O44.43	*Low lying placenta NOS or without hemorrhage, third trimester
*O44.50	*Low lying placenta with hemorrhage, unspecified trimester
*O44.51	*Low lying placenta with hemorrhage, first trimester
*O44.52	*Low lying placenta with hemorrhage, second trimester
*O44.53	*Low lying placenta with hemorrhage, third trimester
O98.411	Viral hepatitis complicating pregnancy, first trimester
O98.412	Viral hepatitis complicating pregnancy, second trimester
O98.413	Viral hepatitis complicating pregnancy, third trimester
O98.419	Viral hepatitis complicating pregnancy, unspecified trimester
O98.42	Viral hepatitis complicating childbirth
O98.43	Viral hepatitis complicating the puerperium
O98.511	Other viral diseases complicating pregnancy, first trimester
O98.512	Other viral diseases complicating pregnancy, second trimester



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Code	Description
O98.513	Other viral diseases complicating pregnancy, third trimester
O98.519	Other viral diseases complicating pregnancy, unspecified trimester
O98.52	Other viral diseases complicating childbirth
O98.53	Other viral diseases complicating the puerperium
O98.711	Human immunodeficiency virus [HIV] disease complicating pregnancy, first trimester
O98.712	Human immunodeficiency virus [HIV] disease complicating pregnancy, second trimester
O98.713	Human immunodeficiency virus [HIV] disease complicating pregnancy, third trimester
O98.719	Human immunodeficiency virus [HIV] disease complicating pregnancy, unspecified trimester
O98.72	Human immunodeficiency virus [HIV] disease complicating childbirth
O98.73	Human immunodeficiency virus [HIV] disease complicating the puerperium
*P05.09	*Newborn light for gestational age, 2500 grams and over
R04.2	Hemoptysis
R04.81	Acute idiopathic pulmonary hemorrhage in infants
R04.89	Hemorrhage from other sites in respiratory passages
R04.9	Hemorrhage from respiratory passages, unspecified
R05	Cough
R06.02	Shortness of breath
R06.9	Unspecified abnormalities of breathing
R09.3	Abnormal sputum
R19.7	Diarrhea, unspecified
*R29.700	*NIHSS score 0
*R29.701	*NIHSS score 1
*R29.702	*NIHSS score 2
*R29.703	*NIHSS score 3
*R29.704	*NIHSS score 4
*R29.705	*NIHSS score 5
*R29.706	*NIHSS score 6
*R29.707	*NIHSS score 7
*R29.708	*NIHSS score 8
*R29.709	*NIHSS score 9

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Code	Description
*R29.710	*NIHSS score 10
*R29.711	*NIHSS score 11
*R29.712	*NIHSS score 12
*R29.713	*NIHSS score 13
*R29.714	*NIHSS score 14
*R29.715	*NIHSS score 15
*R29.716	*NIHSS score 16
*R29.717	*NIHSS score 17
*R29.718	*NIHSS score 18
*R29.719	*NIHSS score 19
*R29.720	*NIHSS score 20
*R29.721	*NIHSS score 21
*R29.722	*NIHSS score 22
*R29.723	*NIHSS score 23
*R29.724	*NIHSS score 24
*R29.725	*NIHSS score 25
*R29.726	*NIHSS score 26
*R29.727	*NIHSS score 27
*R29.728	*NIHSS score 28
*R29.729	*NIHSS score 29
*R29.730	*NIHSS score 30
*R29.731	*NIHSS score 31
*R29.732	*NIHSS score 32
*R29.733	*NIHSS score 33
*R29.734	*NIHSS score 34
*R29.735	*NIHSS score 35
*R29.736	*NIHSS score 36
*R29.737	*NIHSS score 37
*R29.738	*NIHSS score 38
*R29.739	*NIHSS score 39



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Code	Description
*R29.740	*NIHSS score 40
*R29.741	*NIHSS score 41
*R29.742	*NIHSS score 42
R50.81	Fever presenting with conditions classified elsewhere
R50.82	Postprocedural fever
R50.83	Postvaccination fever
R50.84	Febrile nonhemolytic transfusion reaction
R50.9	Fever, unspecified
R53.0	Neoplastic (malignant) related fatigue
R53.1	Weakness
R53.81	Other malaise
R53.83	Other fatigue
R59.0	Localized enlarged lymph nodes
R59.1	Generalized enlarged lymph nodes
R59.9	Enlarged lymph nodes, unspecified
R62.50	Unspecified lack of expected normal physiological development in childhood
R62.59	Other lack of expected normal physiological development in childhood
R63.4	Abnormal weight loss
R64	Cachexia
R68.0	Hypothermia, not associated with low environmental temperature
R68.83	Chills (without fever)
*R73.03	*Prediabetes
R75	Inconclusive laboratory evidence of human immunodeficiency virus [HIV]
Z04.41	Encounter for examination and observation following alleged adult rape
Z04.42	Encounter for examination and observation following alleged child rape
*Z05.0	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1	*Observation and evaluation of newborn for suspected infectious condition ruled out
*Z05.2	*Observation and evaluation of newborn for suspected neurological condition ruled out



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Code	Description
*Z05.3	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41	*Observation and evaluation of newborn for suspected genetic condition ruled out
*Z05.42	*Observation and evaluation of newborn for suspected metabolic condition ruled out
*Z05.43	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
*Z05.6	*Observation and evaluation of newborn for suspected genitourinary condition ruled out
*Z05.71	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
*Z05.73	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9	*Observation and evaluation of newborn for unspecified suspected condition ruled out
*Z19.1	*Hormone sensitive malignancy status
*Z19.2	*Hormone resistant malignancy status
Z20.5	Contact with and (suspected) exposure to viral hepatitis
Z20.6	Contact with and (suspected) exposure to human immunodeficiency virus [HIV]
Z20.820	Contact with and (suspected) exposure to varicella
Z20.828	Contact with and (suspected) exposure to other viral communicable diseases
*Z31.7	*Encounter for procreative management and counseling for gestational carrier
*Z84.82	*Family history of sudden infant death syndrome

Indications

Diagnostic testing to establish HIV infection may be indicated when there is a strong clinical suspicion supported by one or more of the following clinical findings:



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1. The patient has a documented, otherwise unexplained, AIDS-defining or AIDS-associated opportunistic infection.
2. The patient has another documented sexually transmitted disease which identifies significant risk of exposure to HIV and the potential for an early or subclinical infection.
3. The patient has documented acute or chronic hepatitis B or C infection that identifies a significant risk of exposure to HIV and the potential for an early or subclinical infection.
4. The patient has a documented AIDS-defining or AIDS-associated neoplasm.
5. The patient has a documented AIDS-associated neurologic disorder or otherwise unexplained dementia.
6. The patient has another documented AIDS-defining clinical condition, or a history of other severe, recurrent, or persistent conditions which suggest an underlying immune deficiency (for example, cutaneous or mucosal disorders).
7. The patient has otherwise unexplained generalized signs and symptoms suggestive of a chronic process with an underlying immune deficiency (for example, fever, weight loss, malaise, fatigue, chronic diarrhea, failure to thrive, chronic cough, hemoptysis, shortness of breath, or lymphadenopathy).
8. The patient has otherwise unexplained laboratory evidence of a chronic disease process with an underlying immune deficiency (for example, anemia, leukopenia, pancytopenia, lymphopenia, or low CD4+ lymphocyte count).
9. The patient has signs and symptoms of acute retroviral syndrome with fever, malaise, lymphadenopathy, and skin rash.
10. The patient has documented exposure to blood or body fluids known to be capable of transmitting HIV (for example, needlesticks and other significant blood exposures) and antiviral therapy is initiated or anticipated to be initiated.
11. The patient is undergoing treatment for rape. (HIV testing is part of the rape treatment protocol.)

Limitations

1. HIV antibody testing in the United States is usually performed using HIV-1 or HIV-1/2 combination tests. HIV-2 testing is indicated if clinical circumstances suggest HIV-2 is likely (that is compatible clinical findings and HIV-1 test negative). HIV-2 testing may be indicated in areas of the country where there is greater prevalence of HIV-2 infections.
2. The Western Blot test should be performed only after documentation that the initial EIA tests are repeatedly positive or equivocal on a single sample.
3. The HIV antigen tests currently have no defined diagnostic usage.
4. Direct viral RNA detection may be performed in those situations where serologic testing does not establish a diagnosis but strong clinical suspicion persists (for example, acute retroviral syndrome, nonspecific serologic evidence of HIV, or perinatal HIV infection).



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5. If initial serologic tests confirm an HIV infection, repeat testing is not indicated.
6. If initial serologic tests are HIV EIA negative and there is no indication for confirmation of infection by viral RNA detection, the interval prior to retesting is 3-6 months.
7. Testing for evidence of HIV infection using serologic methods may be medically appropriate in situations where there is a risk of exposure to HIV. However, in the absence of a documented AIDS defining or HIV-associated disease, an HIV-associated sign or symptom, or documented exposure to a known HIV-infected source, the testing is considered by Medicare to be screening and thus is not covered by Medicare (for example, history of multiple blood component transfusions, exposure to blood or body fluids not resulting in consideration of therapy, history of transplant, history of illicit drug use, multiple sexual partners, same-sex encounters, prostitution, or contact with prostitutes).
8. The CPT Editorial Panel has issued a number of codes for infectious agent detection by direct antigen or nucleic acid probe techniques that have not yet been developed or are only being used on an investigational basis. Laboratory providers are advised to remain current on FDA-approval status for these tests.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Documentation Requirements

Appropriate HCPCS/CPT code (s) must be used as described.

Sources of Information

CDC, 1993. Revised classification system for HIV infection and expanded surveillance case definition for AIDS among adolescents and adults. MMWR 41 (No. RR17).

CDC, 1994. Revised classification system for human immunodeficiency virus infection in children less than 13 years of age.

CDC, 1998. Guidelines for treatment of sexually transmitted diseases. MMWR 47 (RR1):11-17.

Piatak, M., M.S. Saag, L.C. Yang, et al. 1993. High levels of HIV-1 in plasma during all stages of infection determined by competitive PCR. Science 259:1749-1754.

Rhame, R.S. 1994. Acquired immunodeficiency syndrome, p. 628-652. In Infectious Diseases; P.D. Hoeprich, M.C. Jordan, and A.R. Ronald (J.B. Lippincott Co., Philadelphia).

Vasudevachari, M.D., R.T. Davey, Jr., J.A. Metcalf, and H.C. Lane. 1997. Principles and procedures of human immunodeficiency virus serodiagnosis. In Manual of Clinical Laboratory Immunology (Fifth ed.); N.R. Rose, E.C. de Macario, J.D. Folds, H.C. Lane, and R.M. Nakamura (ASM Press, Washington, DC).



190.15 - Blood Counts

Other Names/Abbreviations

CBC

Description

Blood counts are used to evaluate and diagnose diseases relating to abnormalities of the blood or bone marrow. These include primary disorders such as anemia, leukemia, polycythemia, thrombocytosis and thrombocytopenia. Many other conditions secondarily affect the blood or bone marrow, including reaction to inflammation and infections, coagulopathies, neoplasms and exposure to toxic substances. Many treatments and therapies affect the blood or bone marrow, and blood counts may be used to monitor treatment effects.

The complete blood count (CBC) includes a hemogram and differential white blood count (WBC). The hemogram includes enumeration of red blood cells, white blood cells, and platelets, as well as the determination of hemoglobin, hematocrit, and indices.

The symptoms of hematological disorders are often nonspecific, and are commonly encountered in patients who may or may not prove to have a disorder of the blood or bone marrow. Furthermore, many medical conditions that are not primarily due to abnormalities of blood or bone marrow may have hematological manifestations that result from the disease or its treatment. As a result, the CBC is one of the most commonly indicated laboratory tests.

In patients with possible hematological abnormalities, it may be necessary to determine the hemoglobin and hematocrit, to calculate the red cell indices, and to measure the concentration of white blood cells and platelets. These measurements are usually performed on a multichannel analyzer that measures all of the parameters on every sample. Therefore, laboratory assessments routinely include these measurements.

HCPCS Codes (Alphanumeric, CPT®/AMA)

Code	Description
85004	Blood count, automated differential white blood cell (WBC) count
85007	Blood count; blood smear, microscopic examination with manual differential WBC count
85008	Blood count; blood smear, microscopic examination without manual differential WBC count
85013	Blood count, Spun microhematocrit
85014	Blood count, hematocrit (Hct)
85018	Blood count, Hemoglobin
85025	Blood count, complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count
85027	Blood count, complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count)
85032	Blood count; manual cell count (erythrocyte, leukocyte, platelet) each



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Code	Description
85048	Blood count, leukocyte (WBC), automated
85049	Blood count; platelet, automated

ICD-10-CM Codes Covered by Medicare Program

Any ICD-10-CM code not listed in either the non-covered section or the medical necessity section.

Indications

Indications for a CBC or hemogram include red cell, platelet, and white cell disorders. Examples of these indications are enumerated individually below.

1. Indications for a CBC generally include the evaluation of bone marrow dysfunction as a result of neoplasms, therapeutic agents, exposure to toxic substances, or pregnancy. The CBC is also useful in assessing peripheral destruction of blood cells, suspected bone marrow failure or bone marrow infiltrate, suspected myeloproliferative, myelodysplastic, or lymphoproliferative processes, and immune disorders.
2. Indications for hemogram or CBC related to red cell (RBC) parameters of the hemogram include signs, symptoms, test results, illness, or disease that can be associated with anemia or other red blood cell disorder (e.g., pallor, weakness, fatigue, weight loss, bleeding, acute injury associated with blood loss or suspected blood loss, abnormal menstrual bleeding, hematuria, hematemesis, hematochezia, positive fecal occult blood test, malnutrition, vitamin deficiency, malabsorption, neuropathy, known malignancy, presence of acute or chronic disease that may have associated anemia, coagulation or hemostatic disorders, postural dizziness, syncope, abdominal pain, change in bowel habits, chronic marrow hypoplasia or decreased RBC production, tachycardia, systolic heart murmur, congestive heart failure, dyspnea, angina, nailbed deformities, growth retardation, jaundice, hepatomegaly, splenomegaly, lymphadenopathy, ulcers on the lower extremities).
3. Indications for hemogram or CBC related to red cell (RBC) parameters of the hemogram include signs, symptoms, test results, illness, or disease that can be associated with polycythemia (for example, fever, chills, ruddy skin, conjunctival redness, cough, wheezing, cyanosis, clubbing of the fingers, orthopnea, heart murmur, headache, vague cognitive changes including memory changes, sleep apnea, weakness, pruritus, dizziness, excessive sweating, visual symptoms, weight loss, massive obesity, gastrointestinal bleeding, paresthesias, dyspnea, joint symptoms, epigastric distress, pain and erythema of the fingers or toes, venous or arterial thrombosis, thromboembolism, myocardial infarction, stroke, transient ischemic attacks, congenital heart disease, chronic obstructive pulmonary disease, increased erythropoietin production associated with neoplastic, renal or hepatic disorders, androgen or diuretic use, splenomegaly, hepatomegaly, diastolic hypertension.)
4. Specific indications for CBC with differential count related to the WBC include signs, symptoms, test results, illness, or disease associated with leukemia, infections or



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inflammatory processes, suspected bone marrow failure or bone marrow infiltrate, suspected myeloproliferative, myelodysplastic or lymphoproliferative disorder, use of drugs that may cause leukopenia, and immune disorders (e.g., fever, chills, sweats, shock, fatigue, malaise, tachycardia, tachypnea, heart murmur, seizures, alterations of consciousness, meningismus, pain such as headache, abdominal pain, arthralgia, odynophagia, or dysuria, redness or swelling of skin, soft tissue bone, or joint, ulcers of the skin or mucous membranes, gangrene, mucous membrane discharge, bleeding, thrombosis, respiratory failure, pulmonary infiltrate, jaundice, diarrhea, vomiting, hepatomegaly, splenomegaly, lymphadenopathy, opportunistic infection, such as oral candidiasis.)

5. Specific indications for CBC related to the platelet count include signs, symptoms, test results, illness, or disease associated with increased or decreased platelet production and destruction, or platelet dysfunction (e.g., gastrointestinal bleeding, genitourinary tract bleeding, bilateral epistaxis, thrombosis, ecchymosis, purpura, jaundice, petechiae, fever, heparin therapy, suspected DIC, shock, pre-eclampsia, neonate with maternal ITP, massive transfusion, recent platelet transfusion, cardiopulmonary bypass, hemolytic uremic syndrome, renal diseases, lymphadenopathy, hepatomegaly, splenomegaly, hypersplenism, neurologic abnormalities, viral or other infection, myeloproliferative, myelodysplastic, or lymphoproliferative disorder, thrombosis, exposure to toxic agents, excessive alcohol ingestion, autoimmune disorder (SLE, RA).
6. Indications for hemogram or CBC related to red cell (RBC) parameters of the hemogram include, in addition to those already listed, thalassemia, suspected hemoglobinopathy, lead poisoning, arsenic poisoning, and spherocytosis.
7. Specific indications for CBC with differential count related to the WBC include, in addition to those already listed, storage diseases; mucopolysaccharidoses, and use of drugs that cause leukocytosis such as G-CSF or CM-CSF.
8. Specific indications for CBC related to platelet count include, in addition to those already listed, May-Hegglin syndrome and Wiskott-Aldrich syndrome.

Limitations

1. Testing of patients who are asymptomatic, or who do not have a condition that could be expected to result in a hematological abnormality, is screening and is not a covered service.
2. In some circumstances it may be appropriate to perform only a hemoglobin or hematocrit to assess the oxygen carrying capacity of the blood. When the ordering provider requests only a hemoglobin or hematocrit, the remaining components of the CBC are not covered.
3. When a blood count is performed for an end-stage renal disease (ESRD) patient, and is billed outside the ESRD rate, documentation of the medical necessity for the blood count must be submitted with the claim.



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4. In some patients presenting with certain signs, symptoms or diseases, a single CBC may be appropriate. Repeat testing may not be indicated unless abnormal results are found, or unless there is a change in clinical condition. If repeat testing is performed, a more descriptive diagnosis code (e.g., anemia) should be reported to support medical necessity. However, repeat testing may be indicated where results are normal in patients with conditions where there is a continued risk for the development of hematologic abnormality.

ICD-10-CM Codes That Do Not Support Medical Necessity

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A18.59	Other tuberculosis of eye
A63.0	Anogenital (venereal) warts
B07.0	Plantar wart
B07.8	Other viral warts
B07.9	Viral wart, unspecified
D00.00	Carcinoma in situ of oral cavity, unspecified site
D00.01	Carcinoma in situ of labial mucosa and vermilion border
D00.02	Carcinoma in situ of buccal mucosa
D00.03	Carcinoma in situ of gingiva and edentulous alveolar ridge
D00.04	Carcinoma in situ of soft palate
D00.05	Carcinoma in situ of hard palate
D00.06	Carcinoma in situ of floor of mouth
D00.07	Carcinoma in situ of tongue
D00.08	Carcinoma in situ of pharynx
D04.0	Carcinoma in situ of skin of lip
D04.10	Carcinoma in situ of skin of unspecified eyelid, including canthus
D04.11	Carcinoma in situ of skin of right eyelid, including canthus
D04.12	Carcinoma in situ of skin of left eyelid, including canthus
D04.20	Carcinoma in situ of skin of unspecified ear and external auricular canal
D04.21	Carcinoma in situ of skin of right ear and external auricular canal



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Code	Description
D04.22	Carcinoma in situ of skin of left ear and external auricular canal
D04.30	Carcinoma in situ of skin of unspecified part of face
D04.39	Carcinoma in situ of skin of other parts of face
D04.4	Carcinoma in situ of skin of scalp and neck
D04.5	Carcinoma in situ of skin of trunk
D04.60	Carcinoma in situ of skin of unspecified upper limb, including shoulder
D04.61	Carcinoma in situ of skin of right upper limb, including shoulder
D04.62	Carcinoma in situ of skin of left upper limb, including shoulder
D04.70	Carcinoma in situ of skin of unspecified lower limb, including hip
D04.71	Carcinoma in situ of skin of right lower limb, including hip
D04.72	Carcinoma in situ of skin of left lower limb, including hip
D04.8	Carcinoma in situ of skin of other sites
D04.9	Carcinoma in situ of skin, unspecified
D10.0	Benign neoplasm of lip
D10.1	Benign neoplasm of tongue
D10.2	Benign neoplasm of floor of mouth
D10.30	Benign neoplasm of unspecified part of mouth
D10.39	Benign neoplasm of other parts of mouth
D10.4	Benign neoplasm of tonsil
D10.5	Benign neoplasm of other parts of oropharynx
D10.6	Benign neoplasm of nasopharynx
D10.7	Benign neoplasm of hypopharynx
D10.9	Benign neoplasm of pharynx, unspecified
D11.0	Benign neoplasm of parotid gland
D11.7	Benign neoplasm of other major salivary glands
D11.9	Benign neoplasm of major salivary gland, unspecified
D17.0	Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck
D22.0	Melanocytic nevi of lip
D22.10	Melanocytic nevi of unspecified eyelid, including canthus
D22.11	Melanocytic nevi of right eyelid, including canthus

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Code	Description
D22.12	Melanocytic nevi of left eyelid, including canthus
D22.20	Melanocytic nevi of unspecified ear and external auricular canal
D22.21	Melanocytic nevi of right ear and external auricular canal
D22.22	Melanocytic nevi of left ear and external auricular canal
D22.30	Melanocytic nevi of unspecified part of face
D22.39	Melanocytic nevi of other parts of face
D22.4	Melanocytic nevi of scalp and neck
D22.5	Melanocytic nevi of trunk
D22.60	Melanocytic nevi of unspecified upper limb, including shoulder
D22.61	Melanocytic nevi of right upper limb, including shoulder
D22.62	Melanocytic nevi of left upper limb, including shoulder
D22.70	Melanocytic nevi of unspecified lower limb, including hip
D22.71	Melanocytic nevi of right lower limb, including hip
D22.72	Melanocytic nevi of left lower limb, including hip
D22.9	Melanocytic nevi, unspecified
D23.0	Other benign neoplasm of skin of lip
D23.10	Other benign neoplasm of skin of unspecified eyelid, including canthus
D23.11	Other benign neoplasm of skin of right eyelid, including canthus
D23.12	Other benign neoplasm of skin of left eyelid, including canthus
D23.20	Other benign neoplasm of skin of unspecified ear and external auricular canal
D23.21	Other benign neoplasm of skin of right ear and external auricular canal
D23.22	Other benign neoplasm of skin of left ear and external auricular canal
D23.30	Other benign neoplasm of skin of unspecified part of face
D23.39	Other benign neoplasm of skin of other parts of face
D23.4	Other benign neoplasm of skin of scalp and neck
D23.5	Other benign neoplasm of skin of trunk
D23.60	Other benign neoplasm of skin of unspecified upper limb, including shoulder
D23.61	Other benign neoplasm of skin of right upper limb, including shoulder
D23.62	Other benign neoplasm of skin of left upper limb, including shoulder
D23.70	Other benign neoplasm of skin of unspecified lower limb, including hip

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Code	Description
D23.71	Other benign neoplasm of skin of right lower limb, including hip
D23.72	Other benign neoplasm of skin of left lower limb, including hip
D23.9	Other benign neoplasm of skin, unspecified
D24.1	Benign neoplasm of right breast
D24.2	Benign neoplasm of left breast
D24.9	Benign neoplasm of unspecified breast
D29.0	Benign neoplasm of penis
D29.1	Benign neoplasm of prostate
D29.20	Benign neoplasm of unspecified testis
D29.21	Benign neoplasm of right testis
D29.22	Benign neoplasm of left testis
D29.30	Benign neoplasm of unspecified epididymis
D29.31	Benign neoplasm of right epididymis
D29.32	Benign neoplasm of left epididymis
D29.4	Benign neoplasm of scrotum
D29.8	Benign neoplasm of other specified male genital organs
D29.9	Benign neoplasm of male genital organ, unspecified
D31.40	Benign neoplasm of unspecified ciliary body
D31.41	Benign neoplasm of right ciliary body
D31.42	Benign neoplasm of left ciliary body
D48.1	Neoplasm of uncertain behavior of connective and other soft tissue
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene

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Code	Description
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy
E10.36	Type 1 diabetes mellitus with diabetic cataract
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy
E11.36	Type 2 diabetes mellitus with diabetic cataract
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy
E13.36	Other specified diabetes mellitus with diabetic cataract
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E13.618	Other specified diabetes mellitus with other diabetic arthropathy
E23.0	Hypopituitarism
F21	Schizotypal disorder
F34.0	Cyclothymic disorder
F34.1	Dysthymic disorder
F41.0	Panic disorder [episodic paroxysmal anxiety] without agoraphobia
F41.1	Generalized anxiety disorder
F41.3	Other mixed anxiety disorders
F41.8	Other specified anxiety disorders
F41.9	Anxiety disorder, unspecified
F45.41	Pain disorder exclusively related to psychological factors
F45.42	Pain disorder with related psychological factors
F48.9	Nonpsychotic mental disorder, unspecified
F52.0	Hypoactive sexual desire disorder
F52.1	Sexual aversion disorder
F52.21	Male erectile disorder
F52.22	Female sexual arousal disorder
F52.31	Female orgasmic disorder

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Code	Description
F52.32	Male orgasmic disorder
F52.4	Premature ejaculation
F52.6	Dyspareunia not due to a substance or known physiological condition
F52.8	Other sexual dysfunction not due to a substance or known physiological condition
F52.9	Unspecified sexual dysfunction not due to a substance or known physiological condition
F60.0	Paranoid personality disorder
F60.1	Schizoid personality disorder
F60.2	Antisocial personality disorder
F60.3	Borderline personality disorder
F60.4	Histrionic personality disorder
F60.5	Obsessive-compulsive personality disorder
F60.6	Avoidant personality disorder
F60.7	Dependent personality disorder
F60.81	Narcissistic personality disorder
F60.89	Other specific personality disorders
F60.9	Personality disorder, unspecified
F63.0	Pathological gambling
F63.1	Pyromania
F63.2	Kleptomania
F63.3	Trichotillomania
F63.81	Intermittent explosive disorder
F63.89	Other impulse disorders
F63.9	Impulse disorder, unspecified
F64.1	Dual role transvestism
F64.2	Gender identity disorder of childhood
F64.8	Other gender identity disorders
F64.9	Gender identity disorder, unspecified
F65.0	Fetishism
F65.1	Transvestic fetishism
F65.2	Exhibitionism

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Code	Description
F65.3	Voyeurism
F65.4	Pedophilia
F65.50	Sadomasochism, unspecified
F65.51	Sexual masochism
F65.52	Sexual sadism
F65.81	Frotteurism
F65.89	Other paraphilias
F65.9	Paraphilia, unspecified
F66	Other sexual disorders
F68.10	Factitious disorder, unspecified
F68.12	Factitious disorder with predominantly physical signs and symptoms
F68.13	Factitious disorder with combined psychological and physical signs and symptoms
F69	Unspecified disorder of adult personality and behavior
F81.9	Developmental disorder of scholastic skills, unspecified
F90.0	Attention-deficit hyperactivity disorder, predominantly inattentive type
F90.1	Attention-deficit hyperactivity disorder, predominantly hyperactive type
F90.2	Attention-deficit hyperactivity disorder, combined type
F90.8	Attention-deficit hyperactivity disorder, other type
F90.9	Attention-deficit hyperactivity disorder, unspecified type
F91.0	Conduct disorder confined to family context
F91.1	Conduct disorder, childhood-onset type
F91.2	Conduct disorder, adolescent-onset type
F91.3	Oppositional defiant disorder
F91.8	Other conduct disorders
F91.9	Conduct disorder, unspecified
F93.8	Other childhood emotional disorders
F93.9	Childhood emotional disorder, unspecified
F94.0	Selective mutism
F94.1	Reactive attachment disorder of childhood
F94.2	Disinhibited attachment disorder of childhood

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Code	Description
F94.8	Other childhood disorders of social functioning
F94.9	Childhood disorder of social functioning, unspecified
F95.0	Transient tic disorder
F95.1	Chronic motor or vocal tic disorder
F95.2	Tourette's disorder
F95.8	Other tic disorders
F95.9	Tic disorder, unspecified
F98.4	Stereotyped movement disorders
F98.5	Adult onset fluency disorder
F98.8	Other specified behavioral and emotional disorders with onset usually occurring in childhood and adolescence
F98.9	Unspecified behavioral and emotional disorders with onset usually occurring in childhood and adolescence
G44.209	Tension-type headache, unspecified, not intractable
G89.0	Central pain syndrome
G89.11	Acute pain due to trauma
G89.12	Acute post-thoracotomy pain
G89.18	Other acute postprocedural pain
G89.21	Chronic pain due to trauma
G89.22	Chronic post-thoracotomy pain
G89.28	Other chronic postprocedural pain
G89.29	Other chronic pain
G89.4	Chronic pain syndrome
H00.011	Hordeolum externum right upper eyelid
H00.012	Hordeolum externum right lower eyelid
H00.013	Hordeolum externum right eye, unspecified eyelid
H00.014	Hordeolum externum left upper eyelid
H00.015	Hordeolum externum left lower eyelid
H00.016	Hordeolum externum left eye, unspecified eyelid
H00.019	Hordeolum externum unspecified eye, unspecified eyelid
H00.021	Hordeolum internum right upper eyelid

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Code	Description
H00.022	Hordeolum internum right lower eyelid
H00.023	Hordeolum internum right eye, unspecified eyelid
H00.024	Hordeolum internum left upper eyelid
H00.025	Hordeolum internum left lower eyelid
H00.026	Hordeolum internum left eye, unspecified eyelid
H00.029	Hordeolum internum unspecified eye, unspecified eyelid
H00.031	Abscess of right upper eyelid
H00.032	Abscess of right lower eyelid
H00.033	Abscess of eyelid right eye, unspecified eyelid
H00.034	Abscess of left upper eyelid
H00.035	Abscess of left lower eyelid
H00.036	Abscess of eyelid left eye, unspecified eyelid
H00.039	Abscess of eyelid unspecified eye, unspecified eyelid
H00.11	Chalazion right upper eyelid
H00.12	Chalazion right lower eyelid
H00.13	Chalazion right eye, unspecified eyelid
H00.14	Chalazion left upper eyelid
H00.15	Chalazion left lower eyelid
H00.16	Chalazion left eye, unspecified eyelid
H00.19	Chalazion unspecified eye, unspecified eyelid
H01.001	Unspecified blepharitis right upper eyelid
H01.002	Unspecified blepharitis right lower eyelid
H01.003	Unspecified blepharitis right eye, unspecified eyelid
H01.004	Unspecified blepharitis left upper eyelid
H01.005	Unspecified blepharitis left lower eyelid
H01.006	Unspecified blepharitis left eye, unspecified eyelid
H01.009	Unspecified blepharitis unspecified eye, unspecified eyelid
H01.011	Ulcerative blepharitis right upper eyelid
H01.012	Ulcerative blepharitis right lower eyelid
H01.013	Ulcerative blepharitis right eye, unspecified eyelid

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Code	Description
H01.014	Ulcerative blepharitis left upper eyelid
H01.015	Ulcerative blepharitis left lower eyelid
H01.016	Ulcerative blepharitis left eye, unspecified eyelid
H01.019	Ulcerative blepharitis unspecified eye, unspecified eyelid
H01.021	Squamous blepharitis right upper eyelid
H01.022	Squamous blepharitis right lower eyelid
H01.023	Squamous blepharitis right eye, unspecified eyelid
H01.024	Squamous blepharitis left upper eyelid
H01.025	Squamous blepharitis left lower eyelid
H01.026	Squamous blepharitis left eye, unspecified eyelid
H01.029	Squamous blepharitis unspecified eye, unspecified eyelid
H01.111	Allergic dermatitis of right upper eyelid
H01.112	Allergic dermatitis of right lower eyelid
H01.113	Allergic dermatitis of right eye, unspecified eyelid
H01.114	Allergic dermatitis of left upper eyelid
H01.115	Allergic dermatitis of left lower eyelid
H01.116	Allergic dermatitis of left eye, unspecified eyelid
H01.119	Allergic dermatitis of unspecified eye, unspecified eyelid
H01.121	Discoid lupus erythematosus of right upper eyelid
H01.122	Discoid lupus erythematosus of right lower eyelid
H01.123	Discoid lupus erythematosus of right eye, unspecified eyelid
H01.124	Discoid lupus erythematosus of left upper eyelid
H01.125	Discoid lupus erythematosus of left lower eyelid
H01.126	Discoid lupus erythematosus of left eye, unspecified eyelid
H01.129	Discoid lupus erythematosus of unspecified eye, unspecified eyelid
H01.131	Eczematous dermatitis of right upper eyelid
H01.132	Eczematous dermatitis of right lower eyelid
H01.133	Eczematous dermatitis of right eye, unspecified eyelid
H01.134	Eczematous dermatitis of left upper eyelid
H01.135	Eczematous dermatitis of left lower eyelid

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Code	Description
H01.136	Eczematous dermatitis of left eye, unspecified eyelid
H01.139	Eczematous dermatitis of unspecified eye, unspecified eyelid
H01.141	Xeroderma of right upper eyelid
H01.142	Xeroderma of right lower eyelid
H01.143	Xeroderma of right eye, unspecified eyelid
H01.144	Xeroderma of left upper eyelid
H01.145	Xeroderma of left lower eyelid
H01.146	Xeroderma of left eye, unspecified eyelid
H01.149	Xeroderma of unspecified eye, unspecified eyelid
H01.8	Other specified inflammations of eyelid
H01.9	Unspecified inflammation of eyelid
H04.001	Unspecified dacryoadenitis, right lacrimal gland
H04.002	Unspecified dacryoadenitis, left lacrimal gland
H04.003	Unspecified dacryoadenitis, bilateral lacrimal glands
H04.009	Unspecified dacryoadenitis, unspecified lacrimal gland
H04.011	Acute dacryoadenitis, right lacrimal gland
H04.012	Acute dacryoadenitis, left lacrimal gland
H04.013	Acute dacryoadenitis, bilateral lacrimal glands
H04.019	Acute dacryoadenitis, unspecified lacrimal gland
H04.021	Chronic dacryoadenitis, right lacrimal gland
H04.022	Chronic dacryoadenitis, left lacrimal gland
H04.023	Chronic dacryoadenitis, bilateral lacrimal gland
H04.029	Chronic dacryoadenitis, unspecified lacrimal gland
H04.031	Chronic enlargement of right lacrimal gland
H04.032	Chronic enlargement of left lacrimal gland
H04.033	Chronic enlargement of bilateral lacrimal glands
H04.039	Chronic enlargement of unspecified lacrimal gland
H04.111	Dacryops of right lacrimal gland
H04.112	Dacryops of left lacrimal gland
H04.113	Dacryops of bilateral lacrimal glands

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Code	Description
H04.119	Dacryops of unspecified lacrimal gland
H04.121	Dry eye syndrome of right lacrimal gland
H04.122	Dry eye syndrome of left lacrimal gland
H04.123	Dry eye syndrome of bilateral lacrimal glands
H04.129	Dry eye syndrome of unspecified lacrimal gland
H04.131	Lacrimal cyst, right lacrimal gland
H04.132	Lacrimal cyst, left lacrimal gland
H04.133	Lacrimal cyst, bilateral lacrimal glands
H04.139	Lacrimal cyst, unspecified lacrimal gland
H04.141	Primary lacrimal gland atrophy, right lacrimal gland
H04.142	Primary lacrimal gland atrophy, left lacrimal gland
H04.143	Primary lacrimal gland atrophy, bilateral lacrimal glands
H04.149	Primary lacrimal gland atrophy, unspecified lacrimal gland
H04.151	Secondary lacrimal gland atrophy, right lacrimal gland
H04.152	Secondary lacrimal gland atrophy, left lacrimal gland
H04.153	Secondary lacrimal gland atrophy, bilateral lacrimal glands
H04.159	Secondary lacrimal gland atrophy, unspecified lacrimal gland
H04.161	Lacrimal gland dislocation, right lacrimal gland
H04.162	Lacrimal gland dislocation, left lacrimal gland
H04.163	Lacrimal gland dislocation, bilateral lacrimal glands
H04.169	Lacrimal gland dislocation, unspecified lacrimal gland
H04.19	Other specified disorders of lacrimal gland
H04.201	Unspecified epiphora, right lacrimal gland
H04.202	Unspecified epiphora, left lacrimal gland
H04.203	Unspecified epiphora, bilateral lacrimal glands
H04.209	Unspecified epiphora, unspecified lacrimal gland
H04.211	Epiphora due to excess lacrimation, right lacrimal gland
H04.212	Epiphora due to excess lacrimation, left lacrimal gland
H04.213	Epiphora due to excess lacrimation, bilateral lacrimal glands
H04.219	Epiphora due to excess lacrimation, unspecified lacrimal gland

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Code	Description
H04.221	Epiphora due to insufficient drainage, right lacrimal gland
H04.222	Epiphora due to insufficient drainage, left lacrimal gland
H04.223	Epiphora due to insufficient drainage, bilateral lacrimal glands
H04.229	Epiphora due to insufficient drainage, unspecified lacrimal gland
H04.301	Unspecified dacryocystitis of right lacrimal passage
H04.302	Unspecified dacryocystitis of left lacrimal passage
H04.303	Unspecified dacryocystitis of bilateral lacrimal passages
H04.309	Unspecified dacryocystitis of unspecified lacrimal passage
H04.311	Phlegmonous dacryocystitis of right lacrimal passage
H04.312	Phlegmonous dacryocystitis of left lacrimal passage
H04.313	Phlegmonous dacryocystitis of bilateral lacrimal passages
H04.319	Phlegmonous dacryocystitis of unspecified lacrimal passage
H04.321	Acute dacryocystitis of right lacrimal passage
H04.322	Acute dacryocystitis of left lacrimal passage
H04.323	Acute dacryocystitis of bilateral lacrimal passages
H04.329	Acute dacryocystitis of unspecified lacrimal passage
H04.331	Acute lacrimal canaliculitis of right lacrimal passage
H04.332	Acute lacrimal canaliculitis of left lacrimal passage
H04.333	Acute lacrimal canaliculitis of bilateral lacrimal passages
H04.339	Acute lacrimal canaliculitis of unspecified lacrimal passage
H04.411	Chronic dacryocystitis of right lacrimal passage
H04.412	Chronic dacryocystitis of left lacrimal passage
H04.413	Chronic dacryocystitis of bilateral lacrimal passages
H04.419	Chronic dacryocystitis of unspecified lacrimal passage
H04.421	Chronic lacrimal canaliculitis of right lacrimal passage
H04.422	Chronic lacrimal canaliculitis of left lacrimal passage
H04.423	Chronic lacrimal canaliculitis of bilateral lacrimal passages
H04.429	Chronic lacrimal canaliculitis of unspecified lacrimal passage
H04.431	Chronic lacrimal mucocele of right lacrimal passage
H04.432	Chronic lacrimal mucocele of left lacrimal passage

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Code	Description
H04.433	Chronic lacrimal mucocele of bilateral lacrimal passages
H04.439	Chronic lacrimal mucocele of unspecified lacrimal passage
H04.511	Dacryolith of right lacrimal passage
H04.512	Dacryolith of left lacrimal passage
H04.513	Dacryolith of bilateral lacrimal passages
H04.519	Dacryolith of unspecified lacrimal passage
H04.521	Eversion of right lacrimal punctum
H04.522	Eversion of left lacrimal punctum
H04.523	Eversion of bilateral lacrimal punctum
H04.529	Eversion of unspecified lacrimal punctum
H04.531	Neonatal obstruction of right nasolacrimal duct
H04.532	Neonatal obstruction of left nasolacrimal duct
H04.533	Neonatal obstruction of bilateral nasolacrimal duct
H04.539	Neonatal obstruction of unspecified nasolacrimal duct
H04.541	Stenosis of right lacrimal canaliculi
H04.542	Stenosis of left lacrimal canaliculi
H04.543	Stenosis of bilateral lacrimal canaliculi
H04.549	Stenosis of unspecified lacrimal canaliculi
H04.551	Acquired stenosis of right nasolacrimal duct
H04.552	Acquired stenosis of left nasolacrimal duct
H04.553	Acquired stenosis of bilateral nasolacrimal duct
H04.559	Acquired stenosis of unspecified nasolacrimal duct
H04.561	Stenosis of right lacrimal punctum
H04.562	Stenosis of left lacrimal punctum
H04.563	Stenosis of bilateral lacrimal punctum
H04.569	Stenosis of unspecified lacrimal punctum
H04.571	Stenosis of right lacrimal sac
H04.572	Stenosis of left lacrimal sac
H04.573	Stenosis of bilateral lacrimal sac
H04.579	Stenosis of unspecified lacrimal sac

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Code	Description
H04.611	Lacrimal fistula right lacrimal passage
H04.612	Lacrimal fistula left lacrimal passage
H04.613	Lacrimal fistula bilateral lacrimal passages
H04.619	Lacrimal fistula unspecified lacrimal passage
H04.69	Other changes of lacrimal passages
H04.811	Granuloma of right lacrimal passage
H04.812	Granuloma of left lacrimal passage
H04.813	Granuloma of bilateral lacrimal passages
H04.819	Granuloma of unspecified lacrimal passage
H04.89	Other disorders of lacrimal system
H04.9	Disorder of lacrimal system, unspecified
H05.30	Unspecified deformity of orbit
H05.311	Atrophy of right orbit
H05.312	Atrophy of left orbit
H05.313	Atrophy of bilateral orbit
H05.319	Atrophy of unspecified orbit
H05.321	Deformity of right orbit due to bone disease
H05.322	Deformity of left orbit due to bone disease
H05.323	Deformity of bilateral orbits due to bone disease
H05.329	Deformity of unspecified orbit due to bone disease
H05.331	Deformity of right orbit due to trauma or surgery
H05.332	Deformity of left orbit due to trauma or surgery
H05.333	Deformity of bilateral orbits due to trauma or surgery
H05.339	Deformity of unspecified orbit due to trauma or surgery
H05.341	Enlargement of right orbit
H05.342	Enlargement of left orbit
H05.343	Enlargement of bilateral orbits
H05.349	Enlargement of unspecified orbit
H05.351	Exostosis of right orbit
H05.352	Exostosis of left orbit



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Code	Description
H05.353	Exostosis of bilateral orbits
H05.359	Exostosis of unspecified orbit
H05.401	Unspecified enophthalmos, right eye
H05.402	Unspecified enophthalmos, left eye
H05.403	Unspecified enophthalmos, bilateral
H05.409	Unspecified enophthalmos, unspecified eye
H05.411	Enophthalmos due to atrophy of orbital tissue, right eye
H05.412	Enophthalmos due to atrophy of orbital tissue, left eye
H05.413	Enophthalmos due to atrophy of orbital tissue, bilateral
H05.419	Enophthalmos due to atrophy of orbital tissue, unspecified eye
H05.421	Enophthalmos due to trauma or surgery, right eye
H05.422	Enophthalmos due to trauma or surgery, left eye
H05.423	Enophthalmos due to trauma or surgery, bilateral
H05.429	Enophthalmos due to trauma or surgery, unspecified eye
H05.50	Retained (old) foreign body following penetrating wound of unspecified orbit
H05.51	Retained (old) foreign body following penetrating wound of right orbit
H05.52	Retained (old) foreign body following penetrating wound of left orbit
H05.53	Retained (old) foreign body following penetrating wound of bilateral orbits
H05.811	Cyst of right orbit
H05.812	Cyst of left orbit
H05.813	Cyst of bilateral orbits
H05.819	Cyst of unspecified orbit
H05.821	Myopathy of extraocular muscles, right orbit
H05.822	Myopathy of extraocular muscles, left orbit
H05.823	Myopathy of extraocular muscles, bilateral
H05.829	Myopathy of extraocular muscles, unspecified orbit
H05.89	Other disorders of orbit
H05.9	Unspecified disorder of orbit
H17.00	Adherent leukoma, unspecified eye
H17.01	Adherent leukoma, right eye



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Code	Description
H17.02	Adherent leukoma, left eye
H17.03	Adherent leukoma, bilateral
H17.10	Central corneal opacity, unspecified eye
H17.11	Central corneal opacity, right eye
H17.12	Central corneal opacity, left eye
H17.13	Central corneal opacity, bilateral
H17.811	Minor opacity of cornea, right eye
H17.812	Minor opacity of cornea, left eye
H17.813	Minor opacity of cornea, bilateral
H17.819	Minor opacity of cornea, unspecified eye
H17.821	Peripheral opacity of cornea, right eye
H17.822	Peripheral opacity of cornea, left eye
H17.823	Peripheral opacity of cornea, bilateral
H17.829	Peripheral opacity of cornea, unspecified eye
H17.89	Other corneal scars and opacities
H17.9	Unspecified corneal scar and opacity
H18.001	Unspecified corneal deposit, right eye
H18.002	Unspecified corneal deposit, left eye
H18.003	Unspecified corneal deposit, bilateral
H18.009	Unspecified corneal deposit, unspecified eye
H18.011	Anterior corneal pigmentations, right eye
H18.012	Anterior corneal pigmentations, left eye
H18.013	Anterior corneal pigmentations, bilateral
H18.019	Anterior corneal pigmentations, unspecified eye
H18.021	Argentous corneal deposits, right eye
H18.022	Argentous corneal deposits, left eye
H18.023	Argentous corneal deposits, bilateral
H18.029	Argentous corneal deposits, unspecified eye
H18.031	Corneal deposits in metabolic disorders, right eye
H18.032	Corneal deposits in metabolic disorders, left eye

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Code	Description
H18.033	Corneal deposits in metabolic disorders, bilateral
H18.039	Corneal deposits in metabolic disorders, unspecified eye
H18.041	Kayser-Fleischer ring, right eye
H18.042	Kayser-Fleischer ring, left eye
H18.043	Kayser-Fleischer ring, bilateral
H18.049	Kayser-Fleischer ring, unspecified eye
H18.051	Posterior corneal pigmentations, right eye
H18.052	Posterior corneal pigmentations, left eye
H18.053	Posterior corneal pigmentations, bilateral
H18.059	Posterior corneal pigmentations, unspecified eye
H18.061	Stromal corneal pigmentations, right eye
H18.062	Stromal corneal pigmentations, left eye
H18.063	Stromal corneal pigmentations, bilateral
H18.069	Stromal corneal pigmentations, unspecified eye
H18.10	Bullous keratopathy, unspecified eye
H18.11	Bullous keratopathy, right eye
H18.12	Bullous keratopathy, left eye
H18.13	Bullous keratopathy, bilateral
H18.20	Unspecified corneal edema
H18.211	Corneal edema secondary to contact lens, right eye
H18.212	Corneal edema secondary to contact lens, left eye
H18.213	Corneal edema secondary to contact lens, bilateral
H18.219	Corneal edema secondary to contact lens, unspecified eye
H18.221	Idiopathic corneal edema, right eye
H18.222	Idiopathic corneal edema, left eye
H18.223	Idiopathic corneal edema, bilateral
H18.229	Idiopathic corneal edema, unspecified eye
H18.231	Secondary corneal edema, right eye
H18.232	Secondary corneal edema, left eye
H18.233	Secondary corneal edema, bilateral

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Code	Description
H18.239	Secondary corneal edema, unspecified eye
H18.30	Unspecified corneal membrane change
H18.311	Folds and rupture in Bowman's membrane, right eye
H18.312	Folds and rupture in Bowman's membrane, left eye
H18.313	Folds and rupture in Bowman's membrane, bilateral
H18.319	Folds and rupture in Bowman's membrane, unspecified eye
H18.321	Folds in Descemet's membrane, right eye
H18.322	Folds in Descemet's membrane, left eye
H18.323	Folds in Descemet's membrane, bilateral
H18.329	Folds in Descemet's membrane, unspecified eye
H18.331	Rupture in Descemet's membrane, right eye
H18.332	Rupture in Descemet's membrane, left eye
H18.333	Rupture in Descemet's membrane, bilateral
H18.339	Rupture in Descemet's membrane, unspecified eye
H18.40	Unspecified corneal degeneration
H18.411	Arcus senilis, right eye
H18.412	Arcus senilis, left eye
H18.413	Arcus senilis, bilateral
H18.419	Arcus senilis, unspecified eye
H18.421	Band keratopathy, right eye
H18.422	Band keratopathy, left eye
H18.423	Band keratopathy, bilateral
H18.429	Band keratopathy, unspecified eye
H18.43	Other calcareous corneal degeneration
H18.441	Keratomalacia, right eye
H18.442	Keratomalacia, left eye
H18.443	Keratomalacia, bilateral
H18.449	Keratomalacia, unspecified eye
H18.451	Nodular corneal degeneration, right eye
H18.452	Nodular corneal degeneration, left eye

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Code	Description
H18.453	Nodular corneal degeneration, bilateral
H18.459	Nodular corneal degeneration, unspecified eye
H18.461	Peripheral corneal degeneration, right eye
H18.462	Peripheral corneal degeneration, left eye
H18.463	Peripheral corneal degeneration, bilateral
H18.469	Peripheral corneal degeneration, unspecified eye
H18.49	Other corneal degeneration
H18.50	Unspecified hereditary corneal dystrophies
H18.51	Endothelial corneal dystrophy
H18.52	Epithelial (juvenile) corneal dystrophy
H18.53	Granular corneal dystrophy
H18.54	Lattice corneal dystrophy
H18.55	Macular corneal dystrophy
H18.59	Other hereditary corneal dystrophies
H18.601	Keratoconus, unspecified, right eye
H18.602	Keratoconus, unspecified, left eye
H18.603	Keratoconus, unspecified, bilateral
H18.609	Keratoconus, unspecified, unspecified eye
H18.611	Keratoconus, stable, right eye
H18.612	Keratoconus, stable, left eye
H18.613	Keratoconus, stable, bilateral
H18.619	Keratoconus, stable, unspecified eye
H18.621	Keratoconus, unstable, right eye
H18.622	Keratoconus, unstable, left eye
H18.623	Keratoconus, unstable, bilateral
H18.629	Keratoconus, unstable, unspecified eye
H18.70	Unspecified corneal deformity
H18.711	Corneal ectasia, right eye
H18.712	Corneal ectasia, left eye
H18.713	Corneal ectasia, bilateral

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Code	Description
H18.719	Corneal ectasia, unspecified eye
H18.721	Corneal staphyloma, right eye
H18.722	Corneal staphyloma, left eye
H18.723	Corneal staphyloma, bilateral
H18.729	Corneal staphyloma, unspecified eye
H18.731	Descemetocoele, right eye
H18.732	Descemetocoele, left eye
H18.733	Descemetocoele, bilateral
H18.739	Descemetocoele, unspecified eye
H18.791	Other corneal deformities, right eye
H18.792	Other corneal deformities, left eye
H18.793	Other corneal deformities, bilateral
H18.799	Other corneal deformities, unspecified eye
H18.811	Anesthesia and hypoesthesia of cornea, right eye
H18.812	Anesthesia and hypoesthesia of cornea, left eye
H18.813	Anesthesia and hypoesthesia of cornea, bilateral
H18.819	Anesthesia and hypoesthesia of cornea, unspecified eye
H18.821	Corneal disorder due to contact lens, right eye
H18.822	Corneal disorder due to contact lens, left eye
H18.823	Corneal disorder due to contact lens, bilateral
H18.829	Corneal disorder due to contact lens, unspecified eye
H18.831	Recurrent erosion of cornea, right eye
H18.832	Recurrent erosion of cornea, left eye
H18.833	Recurrent erosion of cornea, bilateral
H18.839	Recurrent erosion of cornea, unspecified eye
H18.891	Other specified disorders of cornea, right eye
H18.892	Other specified disorders of cornea, left eye
H18.893	Other specified disorders of cornea, bilateral
H18.899	Other specified disorders of cornea, unspecified eye
H18.9	Unspecified disorder of cornea



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Code	Description
H25.011	Cortical age-related cataract, right eye
H25.012	Cortical age-related cataract, left eye
H25.013	Cortical age-related cataract, bilateral
H25.019	Cortical age-related cataract, unspecified eye
H25.031	Anterior subcapsular polar age-related cataract, right eye
H25.032	Anterior subcapsular polar age-related cataract, left eye
H25.033	Anterior subcapsular polar age-related cataract, bilateral
H25.039	Anterior subcapsular polar age-related cataract, unspecified eye
H25.041	Posterior subcapsular polar age-related cataract, right eye
H25.042	Posterior subcapsular polar age-related cataract, left eye
H25.043	Posterior subcapsular polar age-related cataract, bilateral
H25.049	Posterior subcapsular polar age-related cataract, unspecified eye
H25.091	Other age-related incipient cataract, right eye
H25.092	Other age-related incipient cataract, left eye
H25.093	Other age-related incipient cataract, bilateral
H25.099	Other age-related incipient cataract, unspecified eye
H25.10	Age-related nuclear cataract, unspecified eye
H25.11	Age-related nuclear cataract, right eye
H25.12	Age-related nuclear cataract, left eye
H25.13	Age-related nuclear cataract, bilateral
H25.20	Age-related cataract, morgagnian type, unspecified eye
H25.21	Age-related cataract, morgagnian type, right eye
H25.22	Age-related cataract, morgagnian type, left eye
H25.23	Age-related cataract, morgagnian type, bilateral
H25.811	Combined forms of age-related cataract, right eye
H25.812	Combined forms of age-related cataract, left eye
H25.813	Combined forms of age-related cataract, bilateral
H25.819	Combined forms of age-related cataract, unspecified eye
H25.89	Other age-related cataract
H25.9	Unspecified age-related cataract

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Code	Description
H26.001	Unspecified infantile and juvenile cataract, right eye
H26.002	Unspecified infantile and juvenile cataract, left eye
H26.003	Unspecified infantile and juvenile cataract, bilateral
H26.009	Unspecified infantile and juvenile cataract, unspecified eye
H26.011	Infantile and juvenile cortical, lamellar, or zonular cataract, right eye
H26.012	Infantile and juvenile cortical, lamellar, or zonular cataract, left eye
H26.013	Infantile and juvenile cortical, lamellar, or zonular cataract, bilateral
H26.019	Infantile and juvenile cortical, lamellar, or zonular cataract, unspecified eye
H26.031	Infantile and juvenile nuclear cataract, right eye
H26.032	Infantile and juvenile nuclear cataract, left eye
H26.033	Infantile and juvenile nuclear cataract, bilateral
H26.039	Infantile and juvenile nuclear cataract, unspecified eye
H26.041	Anterior subcapsular polar infantile and juvenile cataract, right eye
H26.042	Anterior subcapsular polar infantile and juvenile cataract, left eye
H26.043	Anterior subcapsular polar infantile and juvenile cataract, bilateral
H26.049	Anterior subcapsular polar infantile and juvenile cataract, unspecified eye
H26.051	Posterior subcapsular polar infantile and juvenile cataract, right eye
H26.052	Posterior subcapsular polar infantile and juvenile cataract, left eye
H26.053	Posterior subcapsular polar infantile and juvenile cataract, bilateral
H26.059	Posterior subcapsular polar infantile and juvenile cataract, unspecified eye
H26.061	Combined forms of infantile and juvenile cataract, right eye
H26.062	Combined forms of infantile and juvenile cataract, left eye
H26.063	Combined forms of infantile and juvenile cataract, bilateral
H26.069	Combined forms of infantile and juvenile cataract, unspecified eye
H26.09	Other infantile and juvenile cataract
H26.101	Unspecified traumatic cataract, right eye
H26.102	Unspecified traumatic cataract, left eye
H26.103	Unspecified traumatic cataract, bilateral
H26.109	Unspecified traumatic cataract, unspecified eye
H26.111	Localized traumatic opacities, right eye



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Code	Description
H26.112	Localized traumatic opacities, left eye
H26.113	Localized traumatic opacities, bilateral
H26.119	Localized traumatic opacities, unspecified eye
H26.121	Partially resolved traumatic cataract, right eye
H26.122	Partially resolved traumatic cataract, left eye
H26.123	Partially resolved traumatic cataract, bilateral
H26.129	Partially resolved traumatic cataract, unspecified eye
H26.131	Total traumatic cataract, right eye
H26.132	Total traumatic cataract, left eye
H26.133	Total traumatic cataract, bilateral
H26.139	Total traumatic cataract, unspecified eye
H26.20	Unspecified complicated cataract
H26.211	Cataract with neovascularization, right eye
H26.212	Cataract with neovascularization, left eye
H26.213	Cataract with neovascularization, bilateral
H26.219	Cataract with neovascularization, unspecified eye
H26.221	Cataract secondary to ocular disorders (degenerative) (inflammatory), right eye
H26.222	Cataract secondary to ocular disorders (degenerative) (inflammatory), left eye
H26.223	Cataract secondary to ocular disorders (degenerative) (inflammatory), bilateral
H26.229	Cataract secondary to ocular disorders (degenerative) (inflammatory), unspecified eye
H26.231	Glaucomatous flecks (subcapsular), right eye
H26.232	Glaucomatous flecks (subcapsular), left eye
H26.233	Glaucomatous flecks (subcapsular), bilateral
H26.239	Glaucomatous flecks (subcapsular), unspecified eye
H26.30	Drug-induced cataract, unspecified eye
H26.31	Drug-induced cataract, right eye
H26.32	Drug-induced cataract, left eye
H26.33	Drug-induced cataract, bilateral
H26.40	Unspecified secondary cataract
H26.411	Soemmering's ring, right eye



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Code	Description
H26.412	Soemmering's ring, left eye
H26.413	Soemmering's ring, bilateral
H26.419	Soemmering's ring, unspecified eye
H26.491	Other secondary cataract, right eye
H26.492	Other secondary cataract, left eye
H26.493	Other secondary cataract, bilateral
H26.499	Other secondary cataract, unspecified eye
H26.8	Other specified cataract
H26.9	Unspecified cataract
H28	Cataract in diseases classified elsewhere
H31.001	Unspecified chorioretinal scars, right eye
H31.002	Unspecified chorioretinal scars, left eye
H31.003	Unspecified chorioretinal scars, bilateral
H31.009	Unspecified chorioretinal scars, unspecified eye
H31.011	Macula scars of posterior pole (postinflammatory) (post-traumatic), right eye
H31.012	Macula scars of posterior pole (postinflammatory) (post-traumatic), left eye
H31.013	Macula scars of posterior pole (postinflammatory) (post-traumatic), bilateral
H31.019	Macula scars of posterior pole (postinflammatory) (post-traumatic), unspecified eye
H31.021	Solar retinopathy, right eye
H31.022	Solar retinopathy, left eye
H31.023	Solar retinopathy, bilateral
H31.029	Solar retinopathy, unspecified eye
H31.091	Other chorioretinal scars, right eye
H31.092	Other chorioretinal scars, left eye
H31.093	Other chorioretinal scars, bilateral
H31.099	Other chorioretinal scars, unspecified eye
H31.101	Choroidal degeneration, unspecified, right eye
H31.102	Choroidal degeneration, unspecified, left eye
H31.103	Choroidal degeneration, unspecified, bilateral
H31.109	Choroidal degeneration, unspecified, unspecified eye

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Code	Description
H31.111	Age-related choroidal atrophy, right eye
H31.112	Age-related choroidal atrophy, left eye
H31.113	Age-related choroidal atrophy, bilateral
H31.119	Age-related choroidal atrophy, unspecified eye
H31.121	Diffuse secondary atrophy of choroid, right eye
H31.122	Diffuse secondary atrophy of choroid, left eye
H31.123	Diffuse secondary atrophy of choroid, bilateral
H31.129	Diffuse secondary atrophy of choroid, unspecified eye
H31.20	Hereditary choroidal dystrophy, unspecified
H31.21	Choroideremia
H31.22	Choroidal dystrophy (central areolar) (generalized) (peripapillary)
H31.23	Gyrate atrophy, choroid
H31.29	Other hereditary choroidal dystrophy
H31.401	Unspecified choroidal detachment, right eye
H31.402	Unspecified choroidal detachment, left eye
H31.403	Unspecified choroidal detachment, bilateral
H31.409	Unspecified choroidal detachment, unspecified eye
H31.411	Hemorrhagic choroidal detachment, right eye
H31.412	Hemorrhagic choroidal detachment, left eye
H31.413	Hemorrhagic choroidal detachment, bilateral
H31.419	Hemorrhagic choroidal detachment, unspecified eye
H31.421	Serous choroidal detachment, right eye
H31.422	Serous choroidal detachment, left eye
H31.423	Serous choroidal detachment, bilateral
H31.429	Serous choroidal detachment, unspecified eye
H31.8	Other specified disorders of choroid
H31.9	Unspecified disorder of choroid
H32	Chorioretinal disorders in diseases classified elsewhere
H35.33	Angioid streaks of macula
H47.20	Unspecified optic atrophy

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Code	Description
H47.211	Primary optic atrophy, right eye
H47.212	Primary optic atrophy, left eye
H47.213	Primary optic atrophy, bilateral
H47.219	Primary optic atrophy, unspecified eye
H47.22	Hereditary optic atrophy
H47.231	Glaucomatous optic atrophy, right eye
H47.232	Glaucomatous optic atrophy, left eye
H47.233	Glaucomatous optic atrophy, bilateral
H47.239	Glaucomatous optic atrophy, unspecified eye
H47.291	Other optic atrophy, right eye
H47.292	Other optic atrophy, left eye
H47.293	Other optic atrophy, bilateral
H47.299	Other optic atrophy, unspecified eye
H47.311	Coloboma of optic disc, right eye
H47.312	Coloboma of optic disc, left eye
H47.313	Coloboma of optic disc, bilateral
H47.319	Coloboma of optic disc, unspecified eye
H47.321	Drusen of optic disc, right eye
H47.322	Drusen of optic disc, left eye
H47.323	Drusen of optic disc, bilateral
H47.329	Drusen of optic disc, unspecified eye
H47.331	Pseudopapilledema of optic disc, right eye
H47.332	Pseudopapilledema of optic disc, left eye
H47.333	Pseudopapilledema of optic disc, bilateral
H47.339	Pseudopapilledema of optic disc, unspecified eye
H47.391	Other disorders of optic disc, right eye
H47.392	Other disorders of optic disc, left eye
H47.393	Other disorders of optic disc, bilateral
H47.399	Other disorders of optic disc, unspecified eye
H52.00	Hypermetropia, unspecified eye

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Code	Description
H52.01	Hypermetropia, right eye
H52.02	Hypermetropia, left eye
H52.03	Hypermetropia, bilateral
H52.10	Myopia, unspecified eye
H52.11	Myopia, right eye
H52.12	Myopia, left eye
H52.13	Myopia, bilateral
H52.201	Unspecified astigmatism, right eye
H52.202	Unspecified astigmatism, left eye
H52.203	Unspecified astigmatism, bilateral
H52.209	Unspecified astigmatism, unspecified eye
H52.211	Irregular astigmatism, right eye
H52.212	Irregular astigmatism, left eye
H52.213	Irregular astigmatism, bilateral
H52.219	Irregular astigmatism, unspecified eye
H52.221	Regular astigmatism, right eye
H52.222	Regular astigmatism, left eye
H52.223	Regular astigmatism, bilateral
H52.229	Regular astigmatism, unspecified eye
H52.31	Anisometropia
H52.32	Aniseikonia
H52.4	Presbyopia
H52.511	Internal ophthalmoplegia (complete) (total), right eye
H52.512	Internal ophthalmoplegia (complete) (total), left eye
H52.513	Internal ophthalmoplegia (complete) (total), bilateral
H52.519	Internal ophthalmoplegia (complete) (total), unspecified eye
H52.521	Paresis of accommodation, right eye
H52.522	Paresis of accommodation, left eye
H52.523	Paresis of accommodation, bilateral
H52.529	Paresis of accommodation, unspecified eye



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Code	Description
H52.531	Spasm of accommodation, right eye
H52.532	Spasm of accommodation, left eye
H52.533	Spasm of accommodation, bilateral
H52.539	Spasm of accommodation, unspecified eye
H52.6	Other disorders of refraction
H52.7	Unspecified disorder of refraction
H54.7	Unspecified visual loss
H57.9	Unspecified disorder of eye and adnexa
H71.00	Cholesteatoma of attic, unspecified ear
H71.01	Cholesteatoma of attic, right ear
H71.02	Cholesteatoma of attic, left ear
H71.03	Cholesteatoma of attic, bilateral
H71.10	Cholesteatoma of tympanum, unspecified ear
H71.11	Cholesteatoma of tympanum, right ear
H71.12	Cholesteatoma of tympanum, left ear
H71.13	Cholesteatoma of tympanum, bilateral
H71.20	Cholesteatoma of mastoid, unspecified ear
H71.21	Cholesteatoma of mastoid, right ear
H71.22	Cholesteatoma of mastoid, left ear
H71.23	Cholesteatoma of mastoid, bilateral
H71.30	Diffuse cholesteatosis, unspecified ear
H71.31	Diffuse cholesteatosis, right ear
H71.32	Diffuse cholesteatosis, left ear
H71.33	Diffuse cholesteatosis, bilateral
H71.90	Unspecified cholesteatoma, unspecified ear
H71.91	Unspecified cholesteatoma, right ear
H71.92	Unspecified cholesteatoma, left ear
H71.93	Unspecified cholesteatoma, bilateral
H72.00	Central perforation of tympanic membrane, unspecified ear
H72.01	Central perforation of tympanic membrane, right ear



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Code	Description
H72.02	Central perforation of tympanic membrane, left ear
H72.03	Central perforation of tympanic membrane, bilateral
H72.10	Attic perforation of tympanic membrane, unspecified ear
H72.11	Attic perforation of tympanic membrane, right ear
H72.12	Attic perforation of tympanic membrane, left ear
H72.13	Attic perforation of tympanic membrane, bilateral
H72.2X1	Other marginal perforations of tympanic membrane, right ear
H72.2X2	Other marginal perforations of tympanic membrane, left ear
H72.2X3	Other marginal perforations of tympanic membrane, bilateral
H72.2X9	Other marginal perforations of tympanic membrane, unspecified ear
H72.811	Multiple perforations of tympanic membrane, right ear
H72.812	Multiple perforations of tympanic membrane, left ear
H72.813	Multiple perforations of tympanic membrane, bilateral
H72.819	Multiple perforations of tympanic membrane, unspecified ear
H72.821	Total perforations of tympanic membrane, right ear
H72.822	Total perforations of tympanic membrane, left ear
H72.823	Total perforations of tympanic membrane, bilateral
H72.829	Total perforations of tympanic membrane, unspecified ear
H72.90	Unspecified perforation of tympanic membrane, unspecified ear
H72.91	Unspecified perforation of tympanic membrane, right ear
H72.92	Unspecified perforation of tympanic membrane, left ear
H72.93	Unspecified perforation of tympanic membrane, bilateral
H73.811	Atrophic flaccid tympanic membrane, right ear
H73.812	Atrophic flaccid tympanic membrane, left ear
H73.813	Atrophic flaccid tympanic membrane, bilateral
H73.819	Atrophic flaccid tympanic membrane, unspecified ear
H73.821	Atrophic nonflaccid tympanic membrane, right ear
H73.822	Atrophic nonflaccid tympanic membrane, left ear
H73.823	Atrophic nonflaccid tympanic membrane, bilateral
H73.829	Atrophic nonflaccid tympanic membrane, unspecified ear

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Code	Description
H74.01	Tympanosclerosis, right ear
H74.02	Tympanosclerosis, left ear
H74.03	Tympanosclerosis, bilateral
H74.09	Tympanosclerosis, unspecified ear
H74.11	Adhesive right middle ear disease
H74.12	Adhesive left middle ear disease
H74.13	Adhesive middle ear disease, bilateral
H74.19	Adhesive middle ear disease, unspecified ear
H74.20	Discontinuity and dislocation of ear ossicles, unspecified ear
H74.21	Discontinuity and dislocation of right ear ossicles
H74.22	Discontinuity and dislocation of left ear ossicles
H74.23	Discontinuity and dislocation of ear ossicles, bilateral
H74.311	Ankylosis of ear ossicles, right ear
H74.312	Ankylosis of ear ossicles, left ear
H74.313	Ankylosis of ear ossicles, bilateral
H74.319	Ankylosis of ear ossicles, unspecified ear
H74.321	Partial loss of ear ossicles, right ear
H74.322	Partial loss of ear ossicles, left ear
H74.323	Partial loss of ear ossicles, bilateral
H74.329	Partial loss of ear ossicles, unspecified ear
H74.391	Other acquired abnormalities of right ear ossicles
H74.392	Other acquired abnormalities of left ear ossicles
H74.393	Other acquired abnormalities of ear ossicles, bilateral
H74.399	Other acquired abnormalities of ear ossicles, unspecified ear
H74.40	Polyp of middle ear, unspecified ear
H74.41	Polyp of right middle ear
H74.42	Polyp of left middle ear
H74.43	Polyp of middle ear, bilateral
H74.8X1	Other specified disorders of right middle ear and mastoid
H74.8X2	Other specified disorders of left middle ear and mastoid

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Code	Description
H74.8X3	Other specified disorders of middle ear and mastoid, bilateral
H74.8X9	Other specified disorders of middle ear and mastoid, unspecified ear
H74.90	Unspecified disorder of middle ear and mastoid, unspecified ear
H74.91	Unspecified disorder of right middle ear and mastoid
H74.92	Unspecified disorder of left middle ear and mastoid
H74.93	Unspecified disorder of middle ear and mastoid, bilateral
H80.00	Otosclerosis involving oval window, nonobliterative, unspecified ear
H80.01	Otosclerosis involving oval window, nonobliterative, right ear
H80.02	Otosclerosis involving oval window, nonobliterative, left ear
H80.03	Otosclerosis involving oval window, nonobliterative, bilateral
H80.10	Otosclerosis involving oval window, obliterative, unspecified ear
H80.11	Otosclerosis involving oval window, obliterative, right ear
H80.12	Otosclerosis involving oval window, obliterative, left ear
H80.13	Otosclerosis involving oval window, obliterative, bilateral
H80.20	Cochlear otosclerosis, unspecified ear
H80.21	Cochlear otosclerosis, right ear
H80.22	Cochlear otosclerosis, left ear
H80.23	Cochlear otosclerosis, bilateral
H80.80	Other otosclerosis, unspecified ear
H80.81	Other otosclerosis, right ear
H80.82	Other otosclerosis, left ear
H80.83	Other otosclerosis, bilateral
H80.90	Unspecified otosclerosis, unspecified ear
H80.91	Unspecified otosclerosis, right ear
H80.92	Unspecified otosclerosis, left ear
H80.93	Unspecified otosclerosis, bilateral
H83.3X1	Noise effects on right inner ear
H83.3X2	Noise effects on left inner ear
H83.3X3	Noise effects on inner ear, bilateral
H83.3X9	Noise effects on inner ear, unspecified ear



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Code	Description
H90.0	Conductive hearing loss, bilateral
H90.11	Conductive hearing loss, unilateral, right ear, with unrestricted hearing on the contralateral side
H90.12	Conductive hearing loss, unilateral, left ear, with unrestricted hearing on the contralateral side
H90.2	Conductive hearing loss, unspecified
H90.3	Sensorineural hearing loss, bilateral
H90.41	Sensorineural hearing loss, unilateral, right ear, with unrestricted hearing on the contralateral side
H90.42	Sensorineural hearing loss, unilateral, left ear, with unrestricted hearing on the contralateral side
H90.5	Unspecified sensorineural hearing loss
H90.6	Mixed conductive and sensorineural hearing loss, bilateral
H90.71	Mixed conductive and sensorineural hearing loss, unilateral, right ear, with unrestricted hearing on the contralateral side
H90.72	Mixed conductive and sensorineural hearing loss, unilateral, left ear, with unrestricted hearing on the contralateral side
H90.8	Mixed conductive and sensorineural hearing loss, unspecified
H91.01	Ototoxic hearing loss, right ear
H91.02	Ototoxic hearing loss, left ear
H91.03	Ototoxic hearing loss, bilateral
H91.09	Ototoxic hearing loss, unspecified ear
H91.10	Presbycusis, unspecified ear
H91.11	Presbycusis, right ear
H91.12	Presbycusis, left ear
H91.13	Presbycusis, bilateral
H91.20	Sudden idiopathic hearing loss, unspecified ear
H91.21	Sudden idiopathic hearing loss, right ear
H91.22	Sudden idiopathic hearing loss, left ear
H91.23	Sudden idiopathic hearing loss, bilateral
H91.3	Deaf nonspeaking, not elsewhere classified
H91.8X1	Other specified hearing loss, right ear



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Code	Description
H91.8X2	Other specified hearing loss, left ear
H91.8X3	Other specified hearing loss, bilateral
H91.8X9	Other specified hearing loss, unspecified ear
H91.90	Unspecified hearing loss, unspecified ear
H91.91	Unspecified hearing loss, right ear
H91.92	Unspecified hearing loss, left ear
H91.93	Unspecified hearing loss, bilateral
H93.011	Transient ischemic deafness, right ear
H93.012	Transient ischemic deafness, left ear
H93.013	Transient ischemic deafness, bilateral
H93.019	Transient ischemic deafness, unspecified ear
H93.091	Unspecified degenerative and vascular disorders of right ear
H93.092	Unspecified degenerative and vascular disorders of left ear
H93.093	Unspecified degenerative and vascular disorders of ear, bilateral
H93.099	Unspecified degenerative and vascular disorders of unspecified ear
H93.11	Tinnitus, right ear
H93.12	Tinnitus, left ear
H93.13	Tinnitus, bilateral
H93.19	Tinnitus, unspecified ear
H93.211	Auditory recruitment, right ear
H93.212	Auditory recruitment, left ear
H93.213	Auditory recruitment, bilateral
H93.219	Auditory recruitment, unspecified ear
H93.221	Diplacusis, right ear
H93.222	Diplacusis, left ear
H93.223	Diplacusis, bilateral
H93.229	Diplacusis, unspecified ear
H93.231	Hyperacusis, right ear
H93.232	Hyperacusis, left ear
H93.233	Hyperacusis, bilateral



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Code	Description
H93.239	Hyperacusis, unspecified ear
H93.241	Temporary auditory threshold shift, right ear
H93.242	Temporary auditory threshold shift, left ear
H93.243	Temporary auditory threshold shift, bilateral
H93.249	Temporary auditory threshold shift, unspecified ear
H93.291	Other abnormal auditory perceptions, right ear
H93.292	Other abnormal auditory perceptions, left ear
H93.293	Other abnormal auditory perceptions, bilateral
H93.299	Other abnormal auditory perceptions, unspecified ear
H93.3X1	Disorders of right acoustic nerve
H93.3X2	Disorders of left acoustic nerve
H93.3X3	Disorders of bilateral acoustic nerves
H93.3X9	Disorders of unspecified acoustic nerve
H93.90	Unspecified disorder of ear, unspecified ear
H93.91	Unspecified disorder of right ear
H93.92	Unspecified disorder of left ear
H93.93	Unspecified disorder of ear, bilateral
H94.00	Acoustic neuritis in infectious and parasitic diseases classified elsewhere, unspecified ear
H94.01	Acoustic neuritis in infectious and parasitic diseases classified elsewhere, right ear
H94.02	Acoustic neuritis in infectious and parasitic diseases classified elsewhere, left ear
H94.03	Acoustic neuritis in infectious and parasitic diseases classified elsewhere, bilateral
*I60.2	*Nontraumatic subarachnoid hemorrhage from anterior communicating artery
I70.0	Atherosclerosis of aorta
I70.1	Atherosclerosis of renal artery
*I72.5	*Aneurysm of other precerebral arteries
*I72.6	*Aneurysm of vertebral artery
I73.81	Erythromelalgia
I73.89	Other specified peripheral vascular diseases
I73.9	Peripheral vascular disease, unspecified
*I77.70	*Dissection of unspecified artery



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Code	Description
*I77.75	*Dissection of other precerebral arteries
*I77.76	*Dissection of artery of upper extremity
*I77.77	*Dissection of artery of lower extremity
I78.1	Nevus, non-neoplastic
I79.1	Aortitis in diseases classified elsewhere
I79.8	Other disorders of arteries, arterioles and capillaries in diseases classified elsewhere
I97.2	Postmastectomy lymphedema syndrome
J33.0	Polyp of nasal cavity
J33.1	Polypoid sinus degeneration
J33.8	Other polyp of sinus
J33.9	Nasal polyp, unspecified
J34.0	Abscess, furuncle and carbuncle of nose
J34.1	Cyst and mucocele of nose and nasal sinus
J34.2	Deviated nasal septum
J34.3	Hypertrophy of nasal turbinates
J34.81	Nasal mucositis (ulcerative)
J34.89	Other specified disorders of nose and nasal sinuses
J34.9	Unspecified disorder of nose and nasal sinuses
J38.1	Polyp of vocal cord and larynx
K00.0	Anodontia
K00.1	Supernumerary teeth
K00.2	Abnormalities of size and form of teeth
K00.3	Mottled teeth
K00.4	Disturbances in tooth formation
K00.5	Hereditary disturbances in tooth structure, not elsewhere classified
K00.6	Disturbances in tooth eruption
K00.7	Teething syndrome
K00.8	Other disorders of tooth development
K00.9	Disorder of tooth development, unspecified
K01.0	Embedded teeth

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Code	Description
K01.1	Impacted teeth
K02.3	Arrested dental caries
K02.51	Dental caries on pit and fissure surface limited to enamel
K02.52	Dental caries on pit and fissure surface penetrating into dentin
K02.53	Dental caries on pit and fissure surface penetrating into pulp
K02.61	Dental caries on smooth surface limited to enamel
K02.62	Dental caries on smooth surface penetrating into dentin
K02.63	Dental caries on smooth surface penetrating into pulp
K02.7	Dental root caries
K02.9	Dental caries, unspecified
K03.0	Excessive attrition of teeth
K03.1	Abrasion of teeth
K03.2	Erosion of teeth
K03.3	Pathological resorption of teeth
K03.4	Hypercementosis
K03.5	Ankylosis of teeth
K03.7	Posteruptive color changes of dental hard tissues
K03.81	Cracked tooth
K03.89	Other specified diseases of hard tissues of teeth
K03.9	Disease of hard tissues of teeth, unspecified
K08.0	Exfoliation of teeth due to systemic causes
K08.101	Complete loss of teeth, unspecified cause, class I
K08.102	Complete loss of teeth, unspecified cause, class II
K08.103	Complete loss of teeth, unspecified cause, class III
K08.104	Complete loss of teeth, unspecified cause, class IV
K08.109	Complete loss of teeth, unspecified cause, unspecified class
K08.111	Complete loss of teeth due to trauma, class I
K08.112	Complete loss of teeth due to trauma, class II
K08.113	Complete loss of teeth due to trauma, class III
K08.114	Complete loss of teeth due to trauma, class IV

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Code	Description
K08.119	Complete loss of teeth due to trauma, unspecified class
K08.121	Complete loss of teeth due to periodontal diseases, class I
K08.122	Complete loss of teeth due to periodontal diseases, class II
K08.123	Complete loss of teeth due to periodontal diseases, class III
K08.124	Complete loss of teeth due to periodontal diseases, class IV
K08.129	Complete loss of teeth due to periodontal diseases, unspecified class
K08.131	Complete loss of teeth due to caries, class I
K08.132	Complete loss of teeth due to caries, class II
K08.133	Complete loss of teeth due to caries, class III
K08.134	Complete loss of teeth due to caries, class IV
K08.139	Complete loss of teeth due to caries, unspecified class
K08.191	Complete loss of teeth due to other specified cause, class I
K08.192	Complete loss of teeth due to other specified cause, class II
K08.193	Complete loss of teeth due to other specified cause, class III
K08.194	Complete loss of teeth due to other specified cause, class IV
K08.199	Complete loss of teeth due to other specified cause, unspecified class
K08.20	Unspecified atrophy of edentulous alveolar ridge
K08.21	Minimal atrophy of the mandible
K08.22	Moderate atrophy of the mandible
K08.23	Severe atrophy of the mandible
K08.24	Minimal atrophy of maxilla
K08.25	Moderate atrophy of the maxilla
K08.26	Severe atrophy of the maxilla
K08.3	Retained dental root
K08.401	Partial loss of teeth, unspecified cause, class I
K08.402	Partial loss of teeth, unspecified cause, class II
K08.403	Partial loss of teeth, unspecified cause, class III
K08.404	Partial loss of teeth, unspecified cause, class IV
K08.409	Partial loss of teeth, unspecified cause, unspecified class
K08.411	Partial loss of teeth due to trauma, class I

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Code	Description
K08.412	Partial loss of teeth due to trauma, class II
K08.413	Partial loss of teeth due to trauma, class III
K08.414	Partial loss of teeth due to trauma, class IV
K08.419	Partial loss of teeth due to trauma, unspecified class
K08.421	Partial loss of teeth due to periodontal diseases, class I
K08.422	Partial loss of teeth due to periodontal diseases, class II
K08.423	Partial loss of teeth due to periodontal diseases, class III
K08.424	Partial loss of teeth due to periodontal diseases, class IV
K08.429	Partial loss of teeth due to periodontal diseases, unspecified class
K08.431	Partial loss of teeth due to caries, class I
K08.432	Partial loss of teeth due to caries, class II
K08.433	Partial loss of teeth due to caries, class III
K08.434	Partial loss of teeth due to caries, class IV
K08.439	Partial loss of teeth due to caries, unspecified class
K08.491	Partial loss of teeth due to other specified cause, class I
K08.492	Partial loss of teeth due to other specified cause, class II
K08.493	Partial loss of teeth due to other specified cause, class III
K08.494	Partial loss of teeth due to other specified cause, class IV
K08.499	Partial loss of teeth due to other specified cause, unspecified class
K08.50	Unsatisfactory restoration of tooth, unspecified
K08.51	Open restoration margins of tooth
K08.52	Unrepairable overhanging of dental restorative materials
K08.530	Fractured dental restorative material without loss of material
K08.531	Fractured dental restorative material with loss of material
K08.539	Fractured dental restorative material, unspecified
K08.54	Contour of existing restoration of tooth biologically incompatible with oral health
K08.55	Allergy to existing dental restorative material
K08.56	Poor aesthetic of existing restoration of tooth
K08.59	Other unsatisfactory restoration of tooth
K08.81	Primary occlusal trauma



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Code	Description
K08.82	Secondary occlusal trauma
K08.89	Other specified disorders of teeth and supporting structures
K08.9	Disorder of teeth and supporting structures, unspecified
K09.0	Developmental odontogenic cysts
K09.1	Developmental (nonodontogenic) cysts of oral region
K11.6	Mucocele of salivary gland
K11.7	Disturbances of salivary secretion
K11.8	Other diseases of salivary glands
K11.9	Disease of salivary gland, unspecified
*K52.3	*Indeterminate colitis
*K52.831	*Collagenous colitis
*K52.832	*Lymphocytic colitis
*K52.838	*Other microscopic colitis
*K52.839	*Microscopic colitis, unspecified
K82.4	Cholesterolosis of gallbladder
L08.89	Other specified local infections of the skin and subcutaneous tissue
L11.0	Acquired keratosis follicularis
L11.1	Transient acantholytic dermatosis [Grover]
L11.8	Other specified acantholytic disorders
L11.9	Acantholytic disorder, unspecified
L20.0	Besnier's prurigo
L20.81	Atopic neurodermatitis
L20.82	Flexural eczema
L20.84	Intrinsic (allergic) eczema
L20.89	Other atopic dermatitis
L20.9	Atopic dermatitis, unspecified
L22	Diaper dermatitis
L23.0	Allergic contact dermatitis due to metals
L23.1	Allergic contact dermatitis due to adhesives
L23.2	Allergic contact dermatitis due to cosmetics



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Code	Description
L23.3	Allergic contact dermatitis due to drugs in contact with skin
L23.4	Allergic contact dermatitis due to dyes
L23.5	Allergic contact dermatitis due to other chemical products
L23.6	Allergic contact dermatitis due to food in contact with the skin
L23.7	Allergic contact dermatitis due to plants, except food
L23.81	Allergic contact dermatitis due to animal (cat) (dog) dander
L23.89	Allergic contact dermatitis due to other agents
L23.9	Allergic contact dermatitis, unspecified cause
L24.0	Irritant contact dermatitis due to detergents
L24.1	Irritant contact dermatitis due to oils and greases
L24.2	Irritant contact dermatitis due to solvents
L24.3	Irritant contact dermatitis due to cosmetics
L24.4	Irritant contact dermatitis due to drugs in contact with skin
L24.5	Irritant contact dermatitis due to other chemical products
L24.6	Irritant contact dermatitis due to food in contact with skin
L24.7	Irritant contact dermatitis due to plants, except food
L24.81	Irritant contact dermatitis due to metals
L24.89	Irritant contact dermatitis due to other agents
L24.9	Irritant contact dermatitis, unspecified cause
L25.0	Unspecified contact dermatitis due to cosmetics
L25.1	Unspecified contact dermatitis due to drugs in contact with skin
L25.2	Unspecified contact dermatitis due to dyes
L25.3	Unspecified contact dermatitis due to other chemical products
L25.4	Unspecified contact dermatitis due to food in contact with skin
L25.5	Unspecified contact dermatitis due to plants, except food
L25.8	Unspecified contact dermatitis due to other agents
L25.9	Unspecified contact dermatitis, unspecified cause
L30.0	Nummular dermatitis
L30.2	Cutaneous autosensitization
L30.8	Other specified dermatitis



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Code	Description
L30.9	Dermatitis, unspecified
L55.0	Sunburn of first degree
L55.1	Sunburn of second degree
L55.2	Sunburn of third degree
L55.9	Sunburn, unspecified
L56.0	Drug phototoxic response
L56.1	Drug photoallergic response
L56.2	Photocontact dermatitis [berloque dermatitis]
L56.3	Solar urticaria
L56.4	Polymorphous light eruption
L56.5	Disseminated superficial actinic porokeratosis (DSAP)
L56.8	Other specified acute skin changes due to ultraviolet radiation
L56.9	Acute skin change due to ultraviolet radiation, unspecified
L57.0	Actinic keratosis
L57.1	Actinic reticuloid
L57.2	Cutis rhomboidalis nuchae
L57.3	Poikiloderma of Civatte
L57.4	Cutis laxa senilis
L57.5	Actinic granuloma
L57.8	Other skin changes due to chronic exposure to nonionizing radiation
L57.9	Skin changes due to chronic exposure to nonionizing radiation, unspecified
L58.0	Acute radiodermatitis
L58.1	Chronic radiodermatitis
L58.9	Radiodermatitis, unspecified
L59.0	Erythema ab igne [dermatitis ab igne]
L59.8	Other specified disorders of the skin and subcutaneous tissue related to radiation
L59.9	Disorder of the skin and subcutaneous tissue related to radiation, unspecified
L60.9	Nail disorder, unspecified
L66.4	Folliculitis ulerythematososa reticulata
L70.0	Acne vulgaris



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Code	Description
L70.1	Acne conglobata
L70.2	Acne varioliformis
L70.3	Acne tropica
L70.4	Infantile acne
L70.5	Acne excoriee
L70.8	Other acne
L70.9	Acne, unspecified
L72.0	Epidermal cyst
L72.2	Steatocystoma multiplex
L72.3	Sebaceous cyst
L72.8	Other follicular cysts of the skin and subcutaneous tissue
L72.9	Follicular cyst of the skin and subcutaneous tissue, unspecified
L73.0	Acne keloid
L73.9	Follicular disorder, unspecified
L80	Vitiligo
L81.0	Postinflammatory hyperpigmentation
L81.1	Chloasma
L81.2	Freckles
L81.3	Cafe au lait spots
L81.4	Other melanin hyperpigmentation
L81.5	Leukoderma, not elsewhere classified
L81.6	Other disorders of diminished melanin formation
L81.7	Pigmented purpuric dermatosis
L81.8	Other specified disorders of pigmentation
L81.9	Disorder of pigmentation, unspecified
L82.0	Inflamed seborrheic keratosis
L82.1	Other seborrheic keratosis
L83	Acanthosis nigricans
L84	Corns and callosities
L85.0	Acquired ichthyosis



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Code	Description
L85.1	Acquired keratosis [keratoderma] palmaris et plantaris
L85.2	Keratosis punctata (palmaris et plantaris)
L85.3	Xerosis cutis
L85.8	Other specified epidermal thickening
L85.9	Epidermal thickening, unspecified
L86	Keratoderma in diseases classified elsewhere
L87.0	Keratosis follicularis et parafollicularis in cutem penetrans
L87.1	Reactive perforating collagenosis
L87.2	Elastosis perforans serpiginosa
L87.8	Other transepidermal elimination disorders
L87.9	Transepidermal elimination disorder, unspecified
L90.0	Lichen sclerosus et atrophicus
L90.1	Anetoderma of Schweningen-Buzzi
L90.2	Anetoderma of Jadassohn-Pellizzari
L90.3	Atrophoderma of Pasini and Pierini
L90.4	Acrodermatitis chronica atrophicans
L90.5	Scar conditions and fibrosis of skin
L90.6	Striae atrophicae
L90.8	Other atrophic disorders of skin
L90.9	Atrophic disorder of skin, unspecified
L91.0	Hypertrophic scar
L91.8	Other hypertrophic disorders of the skin
L91.9	Hypertrophic disorder of the skin, unspecified
L92.1	Necrobiosis lipoidica, not elsewhere classified
L92.2	Granuloma faciale [eosinophilic granuloma of skin]
L92.3	Foreign body granuloma of the skin and subcutaneous tissue
L92.9	Granulomatous disorder of the skin and subcutaneous tissue, unspecified
L94.0	Localized scleroderma [morphea]
L94.1	Linear scleroderma
L94.2	Calcinosis cutis

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Code	Description
L94.3	Sclerodactyly
L94.8	Other specified localized connective tissue disorders
L94.9	Localized connective tissue disorder, unspecified
L95.0	Livedoid vasculitis
L95.8	Other vasculitis limited to the skin
L95.9	Vasculitis limited to the skin, unspecified
L98.5	Mucinosis of the skin
L98.6	Other infiltrative disorders of the skin and subcutaneous tissue
L98.8	Other specified disorders of the skin and subcutaneous tissue
L99	Other disorders of skin and subcutaneous tissue in diseases classified elsewhere
M07.60	Enteropathic arthropathies, unspecified site
M07.611	Enteropathic arthropathies, right shoulder
M07.612	Enteropathic arthropathies, left shoulder
M07.619	Enteropathic arthropathies, unspecified shoulder
M07.621	Enteropathic arthropathies, right elbow
M07.622	Enteropathic arthropathies, left elbow
M07.629	Enteropathic arthropathies, unspecified elbow
M07.631	Enteropathic arthropathies, right wrist
M07.632	Enteropathic arthropathies, left wrist
M07.639	Enteropathic arthropathies, unspecified wrist
M07.641	Enteropathic arthropathies, right hand
M07.642	Enteropathic arthropathies, left hand
M07.649	Enteropathic arthropathies, unspecified hand
M07.651	Enteropathic arthropathies, right hip
M07.652	Enteropathic arthropathies, left hip
M07.659	Enteropathic arthropathies, unspecified hip
M07.661	Enteropathic arthropathies, right knee
M07.662	Enteropathic arthropathies, left knee
M07.669	Enteropathic arthropathies, unspecified knee
M07.671	Enteropathic arthropathies, right ankle and foot



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Code	Description
M07.672	Enteropathic arthropathies, left ankle and foot
M07.679	Enteropathic arthropathies, unspecified ankle and foot
M07.68	Enteropathic arthropathies, vertebrae
M07.69	Enteropathic arthropathies, multiple sites
M12.10	Kaschin-Beck disease, unspecified site
M12.111	Kaschin-Beck disease, right shoulder
M12.112	Kaschin-Beck disease, left shoulder
M12.119	Kaschin-Beck disease, unspecified shoulder
M12.121	Kaschin-Beck disease, right elbow
M12.122	Kaschin-Beck disease, left elbow
M12.129	Kaschin-Beck disease, unspecified elbow
M12.131	Kaschin-Beck disease, right wrist
M12.132	Kaschin-Beck disease, left wrist
M12.139	Kaschin-Beck disease, unspecified wrist
M12.141	Kaschin-Beck disease, right hand
M12.142	Kaschin-Beck disease, left hand
M12.149	Kaschin-Beck disease, unspecified hand
M12.151	Kaschin-Beck disease, right hip
M12.152	Kaschin-Beck disease, left hip
M12.159	Kaschin-Beck disease, unspecified hip
M12.161	Kaschin-Beck disease, right knee
M12.162	Kaschin-Beck disease, left knee
M12.169	Kaschin-Beck disease, unspecified knee
M12.171	Kaschin-Beck disease, right ankle and foot
M12.172	Kaschin-Beck disease, left ankle and foot
M12.179	Kaschin-Beck disease, unspecified ankle and foot
M12.18	Kaschin-Beck disease, vertebrae
M12.19	Kaschin-Beck disease, multiple sites
M12.50	Traumatic arthropathy, unspecified site
M12.511	Traumatic arthropathy, right shoulder

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Code	Description
M12.512	Traumatic arthropathy, left shoulder
M12.519	Traumatic arthropathy, unspecified shoulder
M12.521	Traumatic arthropathy, right elbow
M12.522	Traumatic arthropathy, left elbow
M12.529	Traumatic arthropathy, unspecified elbow
M12.531	Traumatic arthropathy, right wrist
M12.532	Traumatic arthropathy, left wrist
M12.539	Traumatic arthropathy, unspecified wrist
M12.541	Traumatic arthropathy, right hand
M12.542	Traumatic arthropathy, left hand
M12.549	Traumatic arthropathy, unspecified hand
M12.551	Traumatic arthropathy, right hip
M12.552	Traumatic arthropathy, left hip
M12.559	Traumatic arthropathy, unspecified hip
M12.561	Traumatic arthropathy, right knee
M12.562	Traumatic arthropathy, left knee
M12.569	Traumatic arthropathy, unspecified knee
M12.571	Traumatic arthropathy, right ankle and foot
M12.572	Traumatic arthropathy, left ankle and foot
M12.579	Traumatic arthropathy, unspecified ankle and foot
M12.58	Traumatic arthropathy, other specified site
M12.59	Traumatic arthropathy, multiple sites
M12.80	Other specific arthropathies, not elsewhere classified, unspecified site
M12.811	Other specific arthropathies, not elsewhere classified, right shoulder
M12.812	Other specific arthropathies, not elsewhere classified, left shoulder
M12.819	Other specific arthropathies, not elsewhere classified, unspecified shoulder
M12.821	Other specific arthropathies, not elsewhere classified, right elbow
M12.822	Other specific arthropathies, not elsewhere classified, left elbow
M12.829	Other specific arthropathies, not elsewhere classified, unspecified elbow
M12.831	Other specific arthropathies, not elsewhere classified, right wrist

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Code	Description
M12.832	Other specific arthropathies, not elsewhere classified, left wrist
M12.839	Other specific arthropathies, not elsewhere classified, unspecified wrist
M12.841	Other specific arthropathies, not elsewhere classified, right hand
M12.842	Other specific arthropathies, not elsewhere classified, left hand
M12.849	Other specific arthropathies, not elsewhere classified, unspecified hand
M12.851	Other specific arthropathies, not elsewhere classified, right hip
M12.852	Other specific arthropathies, not elsewhere classified, left hip
M12.859	Other specific arthropathies, not elsewhere classified, unspecified hip
M12.861	Other specific arthropathies, not elsewhere classified, right knee
M12.862	Other specific arthropathies, not elsewhere classified, left knee
M12.869	Other specific arthropathies, not elsewhere classified, unspecified knee
M12.871	Other specific arthropathies, not elsewhere classified, right ankle and foot
M12.872	Other specific arthropathies, not elsewhere classified, left ankle and foot
M12.879	Other specific arthropathies, not elsewhere classified, unspecified ankle and foot
M12.88	Other specific arthropathies, not elsewhere classified, other specified site
M12.89	Other specific arthropathies, not elsewhere classified, multiple sites
M12.9	Arthropathy, unspecified
M13.0	Polyarthritis, unspecified
M13.10	Monoarthritis, not elsewhere classified, unspecified site
M13.111	Monoarthritis, not elsewhere classified, right shoulder
M13.112	Monoarthritis, not elsewhere classified, left shoulder
M13.119	Monoarthritis, not elsewhere classified, unspecified shoulder
M13.121	Monoarthritis, not elsewhere classified, right elbow
M13.122	Monoarthritis, not elsewhere classified, left elbow
M13.129	Monoarthritis, not elsewhere classified, unspecified elbow
M13.131	Monoarthritis, not elsewhere classified, right wrist
M13.132	Monoarthritis, not elsewhere classified, left wrist
M13.139	Monoarthritis, not elsewhere classified, unspecified wrist
M13.141	Monoarthritis, not elsewhere classified, right hand
M13.142	Monoarthritis, not elsewhere classified, left hand

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Code	Description
M13.149	Monoarthritis, not elsewhere classified, unspecified hand
M13.151	Monoarthritis, not elsewhere classified, right hip
M13.152	Monoarthritis, not elsewhere classified, left hip
M13.159	Monoarthritis, not elsewhere classified, unspecified hip
M13.161	Monoarthritis, not elsewhere classified, right knee
M13.162	Monoarthritis, not elsewhere classified, left knee
M13.169	Monoarthritis, not elsewhere classified, unspecified knee
M13.171	Monoarthritis, not elsewhere classified, right ankle and foot
M13.172	Monoarthritis, not elsewhere classified, left ankle and foot
M13.179	Monoarthritis, not elsewhere classified, unspecified ankle and foot
M13.80	Other specified arthritis, unspecified site
M13.811	Other specified arthritis, right shoulder
M13.812	Other specified arthritis, left shoulder
M13.819	Other specified arthritis, unspecified shoulder
M13.821	Other specified arthritis, right elbow
M13.822	Other specified arthritis, left elbow
M13.829	Other specified arthritis, unspecified elbow
M13.831	Other specified arthritis, right wrist
M13.832	Other specified arthritis, left wrist
M13.839	Other specified arthritis, unspecified wrist
M13.841	Other specified arthritis, right hand
M13.842	Other specified arthritis, left hand
M13.849	Other specified arthritis, unspecified hand
M13.851	Other specified arthritis, right hip
M13.852	Other specified arthritis, left hip
M13.859	Other specified arthritis, unspecified hip
M13.861	Other specified arthritis, right knee
M13.862	Other specified arthritis, left knee
M13.869	Other specified arthritis, unspecified knee
M13.871	Other specified arthritis, right ankle and foot



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Code	Description
M13.872	Other specified arthritis, left ankle and foot
M13.879	Other specified arthritis, unspecified ankle and foot
M13.88	Other specified arthritis, other site
M13.89	Other specified arthritis, multiple sites
M15.0	Primary generalized (osteo)arthritis
M15.1	Heberden's nodes (with arthropathy)
M15.2	Bouchard's nodes (with arthropathy)
M15.3	Secondary multiple arthritis
M15.4	Erosive (osteo)arthritis
M15.8	Other polyosteoarthritis
M15.9	Polyosteoarthritis, unspecified
M16.0	Bilateral primary osteoarthritis of hip
M16.10	Unilateral primary osteoarthritis, unspecified hip
M16.11	Unilateral primary osteoarthritis, right hip
M16.12	Unilateral primary osteoarthritis, left hip
M16.2	Bilateral osteoarthritis resulting from hip dysplasia
M16.30	Unilateral osteoarthritis resulting from hip dysplasia, unspecified hip
M16.31	Unilateral osteoarthritis resulting from hip dysplasia, right hip
M16.32	Unilateral osteoarthritis resulting from hip dysplasia, left hip
M16.4	Bilateral post-traumatic osteoarthritis of hip
M16.50	Unilateral post-traumatic osteoarthritis, unspecified hip
M16.51	Unilateral post-traumatic osteoarthritis, right hip
M16.52	Unilateral post-traumatic osteoarthritis, left hip
M16.6	Other bilateral secondary osteoarthritis of hip
M16.7	Other unilateral secondary osteoarthritis of hip
M16.9	Osteoarthritis of hip, unspecified
M17.0	Bilateral primary osteoarthritis of knee
M17.10	Unilateral primary osteoarthritis, unspecified knee
M17.11	Unilateral primary osteoarthritis, right knee
M17.12	Unilateral primary osteoarthritis, left knee

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Code	Description
M17.2	Bilateral post-traumatic osteoarthritis of knee
M17.30	Unilateral post-traumatic osteoarthritis, unspecified knee
M17.31	Unilateral post-traumatic osteoarthritis, right knee
M17.32	Unilateral post-traumatic osteoarthritis, left knee
M17.4	Other bilateral secondary osteoarthritis of knee
M17.5	Other unilateral secondary osteoarthritis of knee
M17.9	Osteoarthritis of knee, unspecified
M18.0	Bilateral primary osteoarthritis of first carpometacarpal joints
M18.10	Unilateral primary osteoarthritis of first carpometacarpal joint, unspecified hand
M18.11	Unilateral primary osteoarthritis of first carpometacarpal joint, right hand
M18.12	Unilateral primary osteoarthritis of first carpometacarpal joint, left hand
M18.2	Bilateral post-traumatic osteoarthritis of first carpometacarpal joints
M18.30	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, unspecified hand
M18.31	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, right hand
M18.32	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, left hand
M18.4	Other bilateral secondary osteoarthritis of first carpometacarpal joints
M18.50	Other unilateral secondary osteoarthritis of first carpometacarpal joint, unspecified hand
M18.51	Other unilateral secondary osteoarthritis of first carpometacarpal joint, right hand
M18.52	Other unilateral secondary osteoarthritis of first carpometacarpal joint, left hand
M18.9	Osteoarthritis of first carpometacarpal joint, unspecified
M19.011	Primary osteoarthritis, right shoulder
M19.012	Primary osteoarthritis, left shoulder
M19.019	Primary osteoarthritis, unspecified shoulder
M19.021	Primary osteoarthritis, right elbow
M19.022	Primary osteoarthritis, left elbow
M19.029	Primary osteoarthritis, unspecified elbow
M19.031	Primary osteoarthritis, right wrist
M19.032	Primary osteoarthritis, left wrist
M19.039	Primary osteoarthritis, unspecified wrist
M19.041	Primary osteoarthritis, right hand

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Code	Description
M19.042	Primary osteoarthritis, left hand
M19.049	Primary osteoarthritis, unspecified hand
M19.071	Primary osteoarthritis, right ankle and foot
M19.072	Primary osteoarthritis, left ankle and foot
M19.079	Primary osteoarthritis, unspecified ankle and foot
M19.111	Post-traumatic osteoarthritis, right shoulder
M19.112	Post-traumatic osteoarthritis, left shoulder
M19.119	Post-traumatic osteoarthritis, unspecified shoulder
M19.121	Post-traumatic osteoarthritis, right elbow
M19.122	Post-traumatic osteoarthritis, left elbow
M19.129	Post-traumatic osteoarthritis, unspecified elbow
M19.131	Post-traumatic osteoarthritis, right wrist
M19.132	Post-traumatic osteoarthritis, left wrist
M19.139	Post-traumatic osteoarthritis, unspecified wrist
M19.141	Post-traumatic osteoarthritis, right hand
M19.142	Post-traumatic osteoarthritis, left hand
M19.149	Post-traumatic osteoarthritis, unspecified hand
M19.171	Post-traumatic osteoarthritis, right ankle and foot
M19.172	Post-traumatic osteoarthritis, left ankle and foot
M19.179	Post-traumatic osteoarthritis, unspecified ankle and foot
M19.211	Secondary osteoarthritis, right shoulder
M19.212	Secondary osteoarthritis, left shoulder
M19.219	Secondary osteoarthritis, unspecified shoulder
M19.221	Secondary osteoarthritis, right elbow
M19.222	Secondary osteoarthritis, left elbow
M19.229	Secondary osteoarthritis, unspecified elbow
M19.231	Secondary osteoarthritis, right wrist
M19.232	Secondary osteoarthritis, left wrist
M19.239	Secondary osteoarthritis, unspecified wrist
M19.241	Secondary osteoarthritis, right hand

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Code	Description
M19.242	Secondary osteoarthritis, left hand
M19.249	Secondary osteoarthritis, unspecified hand
M19.271	Secondary osteoarthritis, right ankle and foot
M19.272	Secondary osteoarthritis, left ankle and foot
M19.279	Secondary osteoarthritis, unspecified ankle and foot
M19.90	Unspecified osteoarthritis, unspecified site
M19.91	Primary osteoarthritis, unspecified site
M19.92	Post-traumatic osteoarthritis, unspecified site
M19.93	Secondary osteoarthritis, unspecified site
M20.001	Unspecified deformity of right finger(s)
M20.002	Unspecified deformity of left finger(s)
M20.009	Unspecified deformity of unspecified finger(s)
M20.011	Mallet finger of right finger(s)
M20.012	Mallet finger of left finger(s)
M20.019	Mallet finger of unspecified finger(s)
M20.021	Boutonniere deformity of right finger(s)
M20.022	Boutonniere deformity of left finger(s)
M20.029	Boutonniere deformity of unspecified finger(s)
M20.031	Swan-neck deformity of right finger(s)
M20.032	Swan-neck deformity of left finger(s)
M20.039	Swan-neck deformity of unspecified finger(s)
M20.091	Other deformity of right finger(s)
M20.092	Other deformity of left finger(s)
M20.099	Other deformity of finger(s), unspecified finger(s)
M20.10	Hallux valgus (acquired), unspecified foot
M20.11	Hallux valgus (acquired), right foot
M20.12	Hallux valgus (acquired), left foot
M20.20	Hallux rigidus, unspecified foot
M20.21	Hallux rigidus, right foot
M20.22	Hallux rigidus, left foot

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Code	Description
M20.30	Hallux varus (acquired), unspecified foot
M20.31	Hallux varus (acquired), right foot
M20.32	Hallux varus (acquired), left foot
M20.40	Other hammer toe(s) (acquired), unspecified foot
M20.41	Other hammer toe(s) (acquired), right foot
M20.42	Other hammer toe(s) (acquired), left foot
M20.5X1	Other deformities of toe(s) (acquired), right foot
M20.5X2	Other deformities of toe(s) (acquired), left foot
M20.5X9	Other deformities of toe(s) (acquired), unspecified foot
M20.60	Acquired deformities of toe(s), unspecified, unspecified foot
M20.61	Acquired deformities of toe(s), unspecified, right foot
M20.62	Acquired deformities of toe(s), unspecified, left foot
M21.00	Valgus deformity, not elsewhere classified, unspecified site
M21.021	Valgus deformity, not elsewhere classified, right elbow
M21.022	Valgus deformity, not elsewhere classified, left elbow
M21.029	Valgus deformity, not elsewhere classified, unspecified elbow
M21.051	Valgus deformity, not elsewhere classified, right hip
M21.052	Valgus deformity, not elsewhere classified, left hip
M21.059	Valgus deformity, not elsewhere classified, unspecified hip
M21.061	Valgus deformity, not elsewhere classified, right knee
M21.062	Valgus deformity, not elsewhere classified, left knee
M21.069	Valgus deformity, not elsewhere classified, unspecified knee
M21.071	Valgus deformity, not elsewhere classified, right ankle
M21.072	Valgus deformity, not elsewhere classified, left ankle
M21.079	Valgus deformity, not elsewhere classified, unspecified ankle
M21.10	Varus deformity, not elsewhere classified, unspecified site
M21.121	Varus deformity, not elsewhere classified, right elbow
M21.122	Varus deformity, not elsewhere classified, left elbow
M21.129	Varus deformity, not elsewhere classified, unspecified elbow
M21.151	Varus deformity, not elsewhere classified, right hip



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Code	Description
M21.152	Varus deformity, not elsewhere classified, left hip
M21.159	Varus deformity, not elsewhere classified, unspecified
M21.161	Varus deformity, not elsewhere classified, right knee
M21.162	Varus deformity, not elsewhere classified, left knee
M21.169	Varus deformity, not elsewhere classified, unspecified knee
M21.171	Varus deformity, not elsewhere classified, right ankle
M21.172	Varus deformity, not elsewhere classified, left ankle
M21.179	Varus deformity, not elsewhere classified, unspecified ankle
M21.20	Flexion deformity, unspecified site
M21.211	Flexion deformity, right shoulder
M21.212	Flexion deformity, left shoulder
M21.219	Flexion deformity, unspecified shoulder
M21.221	Flexion deformity, right elbow
M21.222	Flexion deformity, left elbow
M21.229	Flexion deformity, unspecified elbow
M21.231	Flexion deformity, right wrist
M21.232	Flexion deformity, left wrist
M21.239	Flexion deformity, unspecified wrist
M21.241	Flexion deformity, right finger joints
M21.242	Flexion deformity, left finger joints
M21.249	Flexion deformity, unspecified finger joints
M21.251	Flexion deformity, right hip
M21.252	Flexion deformity, left hip
M21.259	Flexion deformity, unspecified hip
M21.261	Flexion deformity, right knee
M21.262	Flexion deformity, left knee
M21.269	Flexion deformity, unspecified knee
M21.271	Flexion deformity, right ankle and toes
M21.272	Flexion deformity, left ankle and toes
M21.279	Flexion deformity, unspecified ankle and toes

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Code	Description
M21.331	Wrist drop, right wrist
M21.332	Wrist drop, left wrist
M21.339	Wrist drop, unspecified wrist
M21.371	Foot drop, right foot
M21.372	Foot drop, left foot
M21.379	Foot drop, unspecified foot
M21.40	Flat foot [pes planus] (acquired), unspecified foot
M21.41	Flat foot [pes planus] (acquired), right foot
M21.42	Flat foot [pes planus] (acquired), left foot
M21.511	Acquired clawhand, right hand
M21.512	Acquired clawhand, left hand
M21.519	Acquired clawhand, unspecified hand
M21.521	Acquired clubhand, right hand
M21.522	Acquired clubhand, left hand
M21.529	Acquired clubhand, unspecified hand
M21.531	Acquired clawfoot, right foot
M21.532	Acquired clawfoot, left foot
M21.539	Acquired clawfoot, unspecified foot
M21.541	Acquired clubfoot, right foot
M21.542	Acquired clubfoot, left foot
M21.549	Acquired clubfoot, unspecified foot
M21.6X1	Other acquired deformities of right foot
M21.6X2	Other acquired deformities of left foot
M21.6X9	Other acquired deformities of unspecified foot
M21.70	Unequal limb length (acquired), unspecified site
M21.721	Unequal limb length (acquired), right humerus
M21.722	Unequal limb length (acquired), left humerus
M21.729	Unequal limb length (acquired), unspecified humerus
M21.731	Unequal limb length (acquired), right ulna
M21.732	Unequal limb length (acquired), left ulna



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Code	Description
M21.733	Unequal limb length (acquired), right radius
M21.734	Unequal limb length (acquired), left radius
M21.739	Unequal limb length (acquired), unspecified ulna and radius
M21.751	Unequal limb length (acquired), right femur
M21.752	Unequal limb length (acquired), left femur
M21.759	Unequal limb length (acquired), unspecified femur
M21.761	Unequal limb length (acquired), right tibia
M21.762	Unequal limb length (acquired), left tibia
M21.763	Unequal limb length (acquired), right fibula
M21.764	Unequal limb length (acquired), left fibula
M21.769	Unequal limb length (acquired), unspecified tibia and fibula
M21.80	Other specified acquired deformities of unspecified limb
M21.821	Other specified acquired deformities of right upper arm
M21.822	Other specified acquired deformities of left upper arm
M21.829	Other specified acquired deformities of unspecified upper arm
M21.831	Other specified acquired deformities of right forearm
M21.832	Other specified acquired deformities of left forearm
M21.839	Other specified acquired deformities of unspecified forearm
M21.851	Other specified acquired deformities of right thigh
M21.852	Other specified acquired deformities of left thigh
M21.859	Other specified acquired deformities of unspecified thigh
M21.861	Other specified acquired deformities of right lower leg
M21.862	Other specified acquired deformities of left lower leg
M21.869	Other specified acquired deformities of unspecified lower leg
M21.90	Unspecified acquired deformity of unspecified limb
M21.921	Unspecified acquired deformity of right upper arm
M21.922	Unspecified acquired deformity of left upper arm
M21.929	Unspecified acquired deformity of unspecified upper arm
M21.931	Unspecified acquired deformity of right forearm
M21.932	Unspecified acquired deformity of left forearm

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Code	Description
M21.939	Unspecified acquired deformity of unspecified forearm
M21.941	Unspecified acquired deformity of hand, right hand
M21.942	Unspecified acquired deformity of hand, left hand
M21.949	Unspecified acquired deformity of hand, unspecified hand
M21.951	Unspecified acquired deformity of right thigh
M21.952	Unspecified acquired deformity of left thigh
M21.959	Unspecified acquired deformity of unspecified thigh
M21.961	Unspecified acquired deformity of right lower leg
M21.962	Unspecified acquired deformity of left lower leg
M21.969	Unspecified acquired deformity of unspecified lower leg
M22.00	Recurrent dislocation of patella, unspecified knee
M22.01	Recurrent dislocation of patella, right knee
M22.02	Recurrent dislocation of patella, left knee
M22.10	Recurrent subluxation of patella, unspecified knee
M22.11	Recurrent subluxation of patella, right knee
M22.12	Recurrent subluxation of patella, left knee
M23.50	Chronic instability of knee, unspecified knee
M23.8X9	Other internal derangements of unspecified knee
M24.00	Loose body in unspecified joint
M24.011	Loose body in right shoulder
M24.012	Loose body in left shoulder
M24.019	Loose body in unspecified shoulder
M24.021	Loose body in right elbow
M24.022	Loose body in left elbow
M24.029	Loose body in unspecified elbow
M24.031	Loose body in right wrist
M24.032	Loose body in left wrist
M24.039	Loose body in unspecified wrist
M24.041	Loose body in right finger joint(s)
M24.042	Loose body in left finger joint(s)

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Code	Description
M24.049	Loose body in unspecified finger joint(s)
M24.051	Loose body in right hip
M24.052	Loose body in left hip
M24.059	Loose body in unspecified hip
M24.071	Loose body in right ankle
M24.072	Loose body in left ankle
M24.073	Loose body in unspecified ankle
M24.074	Loose body in right toe joint(s)
M24.075	Loose body in left toe joint(s)
M24.076	Loose body in unspecified toe joints
M24.08	Loose body, other site
M24.10	Other articular cartilage disorders, unspecified site
M24.111	Other articular cartilage disorders, right shoulder
M24.112	Other articular cartilage disorders, left shoulder
M24.119	Other articular cartilage disorders, unspecified shoulder
M24.121	Other articular cartilage disorders, right elbow
M24.122	Other articular cartilage disorders, left elbow
M24.129	Other articular cartilage disorders, unspecified elbow
M24.131	Other articular cartilage disorders, right wrist
M24.132	Other articular cartilage disorders, left wrist
M24.139	Other articular cartilage disorders, unspecified wrist
M24.141	Other articular cartilage disorders, right hand
M24.142	Other articular cartilage disorders, left hand
M24.149	Other articular cartilage disorders, unspecified hand
M24.151	Other articular cartilage disorders, right hip
M24.152	Other articular cartilage disorders, left hip
M24.159	Other articular cartilage disorders, unspecified hip
M24.171	Other articular cartilage disorders, right ankle
M24.172	Other articular cartilage disorders, left ankle
M24.173	Other articular cartilage disorders, unspecified ankle

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Code	Description
M24.174	Other articular cartilage disorders, right foot
M24.175	Other articular cartilage disorders, left foot
M24.176	Other articular cartilage disorders, unspecified foot
M24.20	Disorder of ligament, unspecified site
M24.211	Disorder of ligament, right shoulder
M24.212	Disorder of ligament, left shoulder
M24.219	Disorder of ligament, unspecified shoulder
M24.221	Disorder of ligament, right elbow
M24.222	Disorder of ligament, left elbow
M24.229	Disorder of ligament, unspecified elbow
M24.231	Disorder of ligament, right wrist
M24.232	Disorder of ligament, left wrist
M24.239	Disorder of ligament, unspecified wrist
M24.241	Disorder of ligament, right hand
M24.242	Disorder of ligament, left hand
M24.249	Disorder of ligament, unspecified hand
M24.251	Disorder of ligament, right hip
M24.252	Disorder of ligament, left hip
M24.259	Disorder of ligament, unspecified hip
M24.271	Disorder of ligament, right ankle
M24.272	Disorder of ligament, left ankle
M24.273	Disorder of ligament, unspecified ankle
M24.274	Disorder of ligament, right foot
M24.275	Disorder of ligament, left foot
M24.276	Disorder of ligament, unspecified foot
M24.28	Disorder of ligament, vertebrae
M24.30	Pathological dislocation of unspecified joint, not elsewhere classified
M24.311	Pathological dislocation of right shoulder, not elsewhere classified
M24.312	Pathological dislocation of left shoulder, not elsewhere classified
M24.319	Pathological dislocation of unspecified shoulder, not elsewhere classified



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Code	Description
M24.321	Pathological dislocation of right elbow, not elsewhere classified
M24.322	Pathological dislocation of left elbow, not elsewhere classified
M24.329	Pathological dislocation of unspecified elbow, not elsewhere classified
M24.331	Pathological dislocation of right wrist, not elsewhere classified
M24.332	Pathological dislocation of left wrist, not elsewhere classified
M24.339	Pathological dislocation of unspecified wrist, not elsewhere classified
M24.341	Pathological dislocation of right hand, not elsewhere classified
M24.342	Pathological dislocation of left hand, not elsewhere classified
M24.349	Pathological dislocation of unspecified hand, not elsewhere classified
M24.351	Pathological dislocation of right hip, not elsewhere classified
M24.352	Pathological dislocation of left hip, not elsewhere classified
M24.359	Pathological dislocation of unspecified hip, not elsewhere classified
M24.361	Pathological dislocation of right knee, not elsewhere classified
M24.362	Pathological dislocation of left knee, not elsewhere classified
M24.369	Pathological dislocation of unspecified knee, not elsewhere classified
M24.371	Pathological dislocation of right ankle, not elsewhere classified
M24.372	Pathological dislocation of left ankle, not elsewhere classified
M24.373	Pathological dislocation of unspecified ankle, not elsewhere classified
M24.374	Pathological dislocation of right foot, not elsewhere classified
M24.375	Pathological dislocation of left foot, not elsewhere classified
M24.376	Pathological dislocation of unspecified foot, not elsewhere classified
M24.40	Recurrent dislocation, unspecified joint
M24.411	Recurrent dislocation, right shoulder
M24.412	Recurrent dislocation, left shoulder
M24.419	Recurrent dislocation, unspecified shoulder
M24.421	Recurrent dislocation, right elbow
M24.422	Recurrent dislocation, left elbow
M24.429	Recurrent dislocation, unspecified elbow
M24.431	Recurrent dislocation, right wrist
M24.432	Recurrent dislocation, left wrist



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Code	Description
M24.439	Recurrent dislocation, unspecified wrist
M24.441	Recurrent dislocation, right hand
M24.442	Recurrent dislocation, left hand
M24.443	Recurrent dislocation, unspecified hand
M24.444	Recurrent dislocation, right finger
M24.445	Recurrent dislocation, left finger
M24.446	Recurrent dislocation, unspecified finger
M24.451	Recurrent dislocation, right hip
M24.452	Recurrent dislocation, left hip
M24.459	Recurrent dislocation, unspecified hip
M24.461	Recurrent dislocation, right knee
M24.462	Recurrent dislocation, left knee
M24.469	Recurrent dislocation, unspecified knee
M24.471	Recurrent dislocation, right ankle
M24.472	Recurrent dislocation, left ankle
M24.473	Recurrent dislocation, unspecified ankle
M24.474	Recurrent dislocation, right foot
M24.475	Recurrent dislocation, left foot
M24.476	Recurrent dislocation, unspecified foot
M24.477	Recurrent dislocation, right toe(s)
M24.478	Recurrent dislocation, left toe(s)
M24.479	Recurrent dislocation, unspecified toe(s)
M24.50	Contracture, unspecified joint
M24.511	Contracture, right shoulder
M24.512	Contracture, left shoulder
M24.519	Contracture, unspecified shoulder
M24.521	Contracture, right elbow
M24.522	Contracture, left elbow
M24.529	Contracture, unspecified elbow
M24.531	Contracture, right wrist



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Code	Description
M24.532	Contracture, left wrist
M24.539	Contracture, unspecified wrist
M24.541	Contracture, right hand
M24.542	Contracture, left hand
M24.549	Contracture, unspecified hand
M24.551	Contracture, right hip
M24.552	Contracture, left hip
M24.559	Contracture, unspecified hip
M24.561	Contracture, right knee
M24.562	Contracture, left knee
M24.569	Contracture, unspecified knee
M24.571	Contracture, right ankle
M24.572	Contracture, left ankle
M24.573	Contracture, unspecified ankle
M24.574	Contracture, right foot
M24.575	Contracture, left foot
M24.576	Contracture, unspecified foot
M24.60	Ankylosis, unspecified joint
M24.611	Ankylosis, right shoulder
M24.612	Ankylosis, left shoulder
M24.619	Ankylosis, unspecified shoulder
M24.621	Ankylosis, right elbow
M24.622	Ankylosis, left elbow
M24.629	Ankylosis, unspecified elbow
M24.631	Ankylosis, right wrist
M24.632	Ankylosis, left wrist
M24.639	Ankylosis, unspecified wrist
M24.641	Ankylosis, right hand
M24.642	Ankylosis, left hand
M24.649	Ankylosis, unspecified hand

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Code	Description
M24.651	Ankylosis, right hip
M24.652	Ankylosis, left hip
M24.659	Ankylosis, unspecified hip
M24.661	Ankylosis, right knee
M24.662	Ankylosis, left knee
M24.669	Ankylosis, unspecified knee
M24.671	Ankylosis, right ankle
M24.672	Ankylosis, left ankle
M24.673	Ankylosis, unspecified ankle
M24.674	Ankylosis, right foot
M24.675	Ankylosis, left foot
M24.676	Ankylosis, unspecified foot
M24.7	Protrusio acetabuli
M24.80	Other specific joint derangements of unspecified joint, not elsewhere classified
M24.811	Other specific joint derangements of right shoulder, not elsewhere classified
M24.812	Other specific joint derangements of left shoulder, not elsewhere classified
M24.819	Other specific joint derangements of unspecified shoulder, not elsewhere classified
M24.821	Other specific joint derangements of right elbow, not elsewhere classified
M24.822	Other specific joint derangements of left elbow, not elsewhere classified
M24.829	Other specific joint derangements of unspecified elbow, not elsewhere classified
M24.831	Other specific joint derangements of right wrist, not elsewhere classified
M24.832	Other specific joint derangements of left wrist, not elsewhere classified
M24.839	Other specific joint derangements of unspecified wrist, not elsewhere classified
M24.841	Other specific joint derangements of right hand, not elsewhere classified
M24.842	Other specific joint derangements of left hand, not elsewhere classified
M24.849	Other specific joint derangements of unspecified hand, not elsewhere classified
M24.851	Other specific joint derangements of right hip, not elsewhere classified
M24.852	Other specific joint derangements of left hip, not elsewhere classified
M24.859	Other specific joint derangements of unspecified hip, not elsewhere classified
M24.871	Other specific joint derangements of right ankle, not elsewhere classified



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Code	Description
M24.872	Other specific joint derangements of left ankle, not elsewhere classified
M24.873	Other specific joint derangements of unspecified ankle, not elsewhere classified
M24.874	Other specific joint derangements of right foot, not elsewhere classified
M24.875	Other specific joint derangements left foot, not elsewhere classified
M24.876	Other specific joint derangements of unspecified foot, not elsewhere classified
M24.9	Joint derangement, unspecified
M25.20	Flail joint, unspecified joint
M25.211	Flail joint, right shoulder
M25.212	Flail joint, left shoulder
M25.219	Flail joint, unspecified shoulder
M25.221	Flail joint, right elbow
M25.222	Flail joint, left elbow
M25.229	Flail joint, unspecified elbow
M25.231	Flail joint, right wrist
M25.232	Flail joint, left wrist
M25.239	Flail joint, unspecified wrist
M25.241	Flail joint, right hand
M25.242	Flail joint, left hand
M25.249	Flail joint, unspecified hand
M25.251	Flail joint, right hip
M25.252	Flail joint, left hip
M25.259	Flail joint, unspecified hip
M25.261	Flail joint, right knee
M25.262	Flail joint, left knee
M25.269	Flail joint, unspecified knee
M25.271	Flail joint, right ankle and foot
M25.272	Flail joint, left ankle and foot
M25.279	Flail joint, unspecified ankle and foot
M25.28	Flail joint, other site
M25.30	Other instability, unspecified joint



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Code	Description
M25.311	Other instability, right shoulder
M25.312	Other instability, left shoulder
M25.319	Other instability, unspecified shoulder
M25.321	Other instability, right elbow
M25.322	Other instability, left elbow
M25.329	Other instability, unspecified elbow
M25.331	Other instability, right wrist
M25.332	Other instability, left wrist
M25.339	Other instability, unspecified wrist
M25.341	Other instability, right hand
M25.342	Other instability, left hand
M25.349	Other instability, unspecified hand
M25.351	Other instability, right hip
M25.352	Other instability, left hip
M25.359	Other instability, unspecified hip
M25.361	Other instability, right knee
M25.362	Other instability, left knee
M25.369	Other instability, unspecified knee
M25.371	Other instability, right ankle
M25.372	Other instability, left ankle
M25.373	Other instability, unspecified ankle
M25.374	Other instability, right foot
M25.375	Other instability, left foot
M25.376	Other instability, unspecified foot
M25.70	Osteophyte, unspecified joint
M25.711	Osteophyte, right shoulder
M25.712	Osteophyte, left shoulder
M25.719	Osteophyte, unspecified shoulder
M25.721	Osteophyte, right elbow
M25.722	Osteophyte, left elbow



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Code	Description
M25.729	Osteophyte, unspecified elbow
M25.731	Osteophyte, right wrist
M25.732	Osteophyte, left wrist
M25.739	Osteophyte, unspecified wrist
M25.741	Osteophyte, right hand
M25.742	Osteophyte, left hand
M25.749	Osteophyte, unspecified hand
M25.751	Osteophyte, right hip
M25.752	Osteophyte, left hip
M25.759	Osteophyte, unspecified hip
M25.761	Osteophyte, right knee
M25.762	Osteophyte, left knee
M25.769	Osteophyte, unspecified knee
M25.771	Osteophyte, right ankle
M25.772	Osteophyte, left ankle
M25.773	Osteophyte, unspecified ankle
M25.774	Osteophyte, right foot
M25.775	Osteophyte, left foot
M25.776	Osteophyte, unspecified foot
M26.00	Unspecified anomaly of jaw size
M26.01	Maxillary hyperplasia
M26.02	Maxillary hypoplasia
M26.03	Mandibular hyperplasia
M26.04	Mandibular hypoplasia
M26.05	Macrogenia
M26.06	Microgenia
M26.07	Excessive tuberosity of jaw
M26.09	Other specified anomalies of jaw size
M26.10	Unspecified anomaly of jaw-cranial base relationship
M26.11	Maxillary asymmetry



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Code	Description
M26.12	Other jaw asymmetry
M26.19	Other specified anomalies of jaw-cranial base relationship
M26.20	Unspecified anomaly of dental arch relationship
M26.211	Malocclusion, Angle's class I
M26.212	Malocclusion, Angle's class II
M26.213	Malocclusion, Angle's class III
M26.219	Malocclusion, Angle's class, unspecified
M26.220	Open anterior occlusal relationship
M26.221	Open posterior occlusal relationship
M26.23	Excessive horizontal overlap
M26.24	Reverse articulation
M26.25	Anomalies of interarch distance
M26.29	Other anomalies of dental arch relationship
M26.30	Unspecified anomaly of tooth position of fully erupted tooth or teeth
M26.31	Crowding of fully erupted teeth
M26.32	Excessive spacing of fully erupted teeth
M26.33	Horizontal displacement of fully erupted tooth or teeth
M26.34	Vertical displacement of fully erupted tooth or teeth
M26.35	Rotation of fully erupted tooth or teeth
M26.36	Insufficient interocclusal distance of fully erupted teeth (ridge)
M26.37	Excessive interocclusal distance of fully erupted teeth
M26.39	Other anomalies of tooth position of fully erupted tooth or teeth
M26.4	Malocclusion, unspecified
M26.50	Dentofacial functional abnormalities, unspecified
M26.51	Abnormal jaw closure
M26.52	Limited mandibular range of motion
M26.53	Deviation in opening and closing of the mandible
M26.54	Insufficient anterior guidance
M26.55	Centric occlusion maximum intercuspation discrepancy
M26.56	Non-working side interference



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Code	Description
M26.57	Lack of posterior occlusal support
M26.59	Other dentofacial functional abnormalities
M26.601	Right temporomandibular joint disorder, unspecified
M26.602	Left temporomandibular joint disorder, unspecified
M26.603	Bilateral temporomandibular joint disorder, unspecified
M26.609	Unspecified temporomandibular joint disorder, unspecified side
M26.611	Adhesions and ankylosis of right temporomandibular joint
M26.612	Adhesions and ankylosis of left temporomandibular joint
M26.613	Adhesions and ankylosis of bilateral temporomandibular joint
M26.619	Adhesions and ankylosis of temporomandibular joint, unspecified side
M26.621	Arthralgia of right temporomandibular joint
M26.622	Arthralgia of left temporomandibular joint
M26.623	Arthralgia of bilateral temporomandibular joint
M26.629	Arthralgia of temporomandibular joint, unspecified side
M26.631	Articular disc disorder of right temporomandibular joint
M26.632	Articular disc disorder of left temporomandibular joint
M26.633	Articular disc disorder of bilateral temporomandibular joint
M26.639	Articular disc disorder of temporomandibular joint, unspecified side
M26.69	Other specified disorders of temporomandibular joint
M26.70	Unspecified alveolar anomaly
M26.71	Alveolar maxillary hyperplasia
M26.72	Alveolar mandibular hyperplasia
M26.73	Alveolar maxillary hypoplasia
M26.74	Alveolar mandibular hypoplasia
M26.79	Other specified alveolar anomalies
M26.81	Anterior soft tissue impingement
M26.82	Posterior soft tissue impingement
M26.89	Other dentofacial anomalies
M26.9	Dentofacial anomaly, unspecified
M27.1	Giant cell granuloma, central



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Code	Description
M27.40	Unspecified cyst of jaw
M27.49	Other cysts of jaw
M27.51	Perforation of root canal space due to endodontic treatment
M27.52	Endodontic overfill
M27.53	Endodontic underfill
M27.59	Other periradicular pathology associated with previous endodontic treatment
M27.61	Osseointegration failure of dental implant
M27.62	Post-osseointegration biological failure of dental implant
M27.63	Post-osseointegration mechanical failure of dental implant
M35.7	Hypermobility syndrome
M40.00	Postural kyphosis, site unspecified
M40.03	Postural kyphosis, cervicothoracic region
M40.04	Postural kyphosis, thoracic region
M40.05	Postural kyphosis, thoracolumbar region
M40.10	Other secondary kyphosis, site unspecified
M40.12	Other secondary kyphosis, cervical region
M40.13	Other secondary kyphosis, cervicothoracic region
M40.14	Other secondary kyphosis, thoracic region
M40.15	Other secondary kyphosis, thoracolumbar region
M40.202	Unspecified kyphosis, cervical region
M40.203	Unspecified kyphosis, cervicothoracic region
M40.204	Unspecified kyphosis, thoracic region
M40.205	Unspecified kyphosis, thoracolumbar region
M40.209	Unspecified kyphosis, site unspecified
M40.292	Other kyphosis, cervical region
M40.293	Other kyphosis, cervicothoracic region
M40.294	Other kyphosis, thoracic region
M40.295	Other kyphosis, thoracolumbar region
M40.299	Other kyphosis, site unspecified
M40.30	Flatback syndrome, site unspecified

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Code	Description
M40.35	Flatback syndrome, thoracolumbar region
M40.36	Flatback syndrome, lumbar region
M40.37	Flatback syndrome, lumbosacral region
M40.40	Postural lordosis, site unspecified
M40.45	Postural lordosis, thoracolumbar region
M40.46	Postural lordosis, lumbar region
M40.47	Postural lordosis, lumbosacral region
M40.50	Lordosis, unspecified, site unspecified
M40.55	Lordosis, unspecified, thoracolumbar region
M40.56	Lordosis, unspecified, lumbar region
M40.57	Lordosis, unspecified, lumbosacral region
M41.00	Infantile idiopathic scoliosis, site unspecified
M41.02	Infantile idiopathic scoliosis, cervical region
M41.03	Infantile idiopathic scoliosis, cervicothoracic region
M41.04	Infantile idiopathic scoliosis, thoracic region
M41.05	Infantile idiopathic scoliosis, thoracolumbar region
M41.06	Infantile idiopathic scoliosis, lumbar region
M41.07	Infantile idiopathic scoliosis, lumbosacral region
M41.08	Infantile idiopathic scoliosis, sacral and sacrococcygeal region
M41.112	Juvenile idiopathic scoliosis, cervical region
M41.113	Juvenile idiopathic scoliosis, cervicothoracic region
M41.114	Juvenile idiopathic scoliosis, thoracic region
M41.115	Juvenile idiopathic scoliosis, thoracolumbar region
M41.116	Juvenile idiopathic scoliosis, lumbar region
M41.117	Juvenile idiopathic scoliosis, lumbosacral region
M41.119	Juvenile idiopathic scoliosis, site unspecified
M41.122	Adolescent idiopathic scoliosis, cervical region
M41.123	Adolescent idiopathic scoliosis, cervicothoracic region
M41.124	Adolescent idiopathic scoliosis, thoracic region
M41.125	Adolescent idiopathic scoliosis, thoracolumbar region

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Code	Description
M41.126	Adolescent idiopathic scoliosis, lumbar region
M41.127	Adolescent idiopathic scoliosis, lumbosacral region
M41.129	Adolescent idiopathic scoliosis, site unspecified
M41.20	Other idiopathic scoliosis, site unspecified
M41.22	Other idiopathic scoliosis, cervical region
M41.23	Other idiopathic scoliosis, cervicothoracic region
M41.24	Other idiopathic scoliosis, thoracic region
M41.25	Other idiopathic scoliosis, thoracolumbar region
M41.26	Other idiopathic scoliosis, lumbar region
M41.27	Other idiopathic scoliosis, lumbosacral region
M41.30	Thoracogenic scoliosis, site unspecified
M41.34	Thoracogenic scoliosis, thoracic region
M41.35	Thoracogenic scoliosis, thoracolumbar region
M41.40	Neuromuscular scoliosis, site unspecified
M41.41	Neuromuscular scoliosis, occipito-atlanto-axial region
M41.42	Neuromuscular scoliosis, cervical region
M41.43	Neuromuscular scoliosis, cervicothoracic region
M41.44	Neuromuscular scoliosis, thoracic region
M41.45	Neuromuscular scoliosis, thoracolumbar region
M41.46	Neuromuscular scoliosis, lumbar region
M41.47	Neuromuscular scoliosis, lumbosacral region
M41.50	Other secondary scoliosis, site unspecified
M41.52	Other secondary scoliosis, cervical region
M41.53	Other secondary scoliosis, cervicothoracic region
M41.54	Other secondary scoliosis, thoracic region
M41.55	Other secondary scoliosis, thoracolumbar region
M41.56	Other secondary scoliosis, lumbar region
M41.57	Other secondary scoliosis, lumbosacral region
M41.80	Other forms of scoliosis, site unspecified
M41.82	Other forms of scoliosis, cervical region

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Code	Description
M41.83	Other forms of scoliosis, cervicothoracic region
M41.84	Other forms of scoliosis, thoracic region
M41.85	Other forms of scoliosis, thoracolumbar region
M41.86	Other forms of scoliosis, lumbar region
M41.87	Other forms of scoliosis, lumbosacral region
M41.9	Scoliosis, unspecified
M42.00	Juvenile osteochondrosis of spine, site unspecified
M42.01	Juvenile osteochondrosis of spine, occipito-atlanto-axial region
M42.02	Juvenile osteochondrosis of spine, cervical region
M42.03	Juvenile osteochondrosis of spine, cervicothoracic region
M42.04	Juvenile osteochondrosis of spine, thoracic region
M42.05	Juvenile osteochondrosis of spine, thoracolumbar region
M42.06	Juvenile osteochondrosis of spine, lumbar region
M42.07	Juvenile osteochondrosis of spine, lumbosacral region
M42.08	Juvenile osteochondrosis of spine, sacral and sacrococcygeal region
M42.09	Juvenile osteochondrosis of spine, multiple sites in spine
M42.10	Adult osteochondrosis of spine, site unspecified
M42.11	Adult osteochondrosis of spine, occipito-atlanto-axial region
M42.12	Adult osteochondrosis of spine, cervical region
M42.13	Adult osteochondrosis of spine, cervicothoracic region
M42.14	Adult osteochondrosis of spine, thoracic region
M42.15	Adult osteochondrosis of spine, thoracolumbar region
M42.16	Adult osteochondrosis of spine, lumbar region
M42.17	Adult osteochondrosis of spine, lumbosacral region
M42.18	Adult osteochondrosis of spine, sacral and sacrococcygeal region
M42.19	Adult osteochondrosis of spine, multiple sites in spine
M42.9	Spinal osteochondrosis, unspecified
M43.00	Spondylolysis, site unspecified
M43.01	Spondylolysis, occipito-atlanto-axial region
M43.02	Spondylolysis, cervical region

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Code	Description
M43.03	Spondylolysis, cervicothoracic region
M43.04	Spondylolysis, thoracic region
M43.05	Spondylolysis, thoracolumbar region
M43.06	Spondylolysis, lumbar region
M43.07	Spondylolysis, lumbosacral region
M43.08	Spondylolysis, sacral and sacrococcygeal region
M43.09	Spondylolysis, multiple sites in spine
M43.10	Spondylolisthesis, site unspecified
M43.11	Spondylolisthesis, occipito-atlanto-axial region
M43.12	Spondylolisthesis, cervical region
M43.13	Spondylolisthesis, cervicothoracic region
M43.14	Spondylolisthesis, thoracic region
M43.15	Spondylolisthesis, thoracolumbar region
M43.16	Spondylolisthesis, lumbar region
M43.17	Spondylolisthesis, lumbosacral region
M43.18	Spondylolisthesis, sacral and sacrococcygeal region
M43.19	Spondylolisthesis, multiple sites in spine
M43.3	Recurrent atlantoaxial dislocation with myelopathy
M43.4	Other recurrent atlantoaxial dislocation
M43.5X2	Other recurrent vertebral dislocation, cervical region
M43.5X3	Other recurrent vertebral dislocation, cervicothoracic region
M43.5X4	Other recurrent vertebral dislocation, thoracic region
M43.5X5	Other recurrent vertebral dislocation, thoracolumbar region
M43.5X6	Other recurrent vertebral dislocation, lumbar region
M43.5X7	Other recurrent vertebral dislocation, lumbosacral region
M43.5X8	Other recurrent vertebral dislocation, sacral and sacrococcygeal region
M43.5X9	Other recurrent vertebral dislocation, site unspecified
M43.8X1	Other specified deforming dorsopathies, occipito-atlanto-axial region
M43.8X2	Other specified deforming dorsopathies, cervical region
M43.8X3	Other specified deforming dorsopathies, cervicothoracic region

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Code	Description
M43.8X4	Other specified deforming dorsopathies, thoracic region
M43.8X5	Other specified deforming dorsopathies, thoracolumbar region
M43.8X6	Other specified deforming dorsopathies, lumbar region
M43.8X7	Other specified deforming dorsopathies, lumbosacral region
M43.8X8	Other specified deforming dorsopathies, sacral and sacrococcygeal region
M43.8X9	Other specified deforming dorsopathies, site unspecified
M43.9	Deforming dorsopathy, unspecified
M48.40XD	Fatigue fracture of vertebra, site unspecified, subsequent encounter for fracture with routine healing
M48.40XG	Fatigue fracture of vertebra, site unspecified, subsequent encounter for fracture with delayed healing
M48.40XS	Fatigue fracture of vertebra, site unspecified, sequela of fracture
M48.41XD	Fatigue fracture of vertebra, occipito-atlanto-axial region, subsequent encounter for fracture with routine healing
M48.41XG	Fatigue fracture of vertebra, occipito-atlanto-axial region, subsequent encounter for fracture with delayed healing
M48.41XS	Fatigue fracture of vertebra, occipito-atlanto-axial region, sequela of fracture
M48.42XD	Fatigue fracture of vertebra, cervical region, subsequent encounter for fracture with routine healing
M48.42XG	Fatigue fracture of vertebra, cervical region, subsequent encounter for fracture with delayed healing
M48.42XS	Fatigue fracture of vertebra, cervical region, sequela of fracture
M48.43XD	Fatigue fracture of vertebra, cervicothoracic region, subsequent encounter for fracture with routine healing
M48.43XG	Fatigue fracture of vertebra, cervicothoracic region, subsequent encounter for fracture with delayed healing
M48.43XS	Fatigue fracture of vertebra, cervicothoracic region, sequela of fracture
M48.44XD	Fatigue fracture of vertebra, thoracic region, subsequent encounter for fracture with routine healing
M48.44XG	Fatigue fracture of vertebra, thoracic region, subsequent encounter for fracture with delayed healing
M48.44XS	Fatigue fracture of vertebra, thoracic region, sequela of fracture
M48.45XD	Fatigue fracture of vertebra, thoracolumbar region, subsequent encounter for fracture with routine healing

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Code	Description
M48.45XG	Fatigue fracture of vertebra, thoracolumbar region, subsequent encounter for fracture with delayed healing
M48.45XS	Fatigue fracture of vertebra, thoracolumbar region, sequela of fracture
M48.46XD	Fatigue fracture of vertebra, lumbar region, subsequent encounter for fracture with routine healing
M48.46XG	Fatigue fracture of vertebra, lumbar region, subsequent encounter for fracture with delayed healing
M48.46XS	Fatigue fracture of vertebra, lumbar region, sequela of fracture
M48.47XD	Fatigue fracture of vertebra, lumbosacral region, subsequent encounter for fracture with routine healing
M48.47XG	Fatigue fracture of vertebra, lumbosacral region, subsequent encounter for fracture with delayed healing
M48.47XS	Fatigue fracture of vertebra, lumbosacral region, sequela of fracture
M48.48XD	Fatigue fracture of vertebra, sacral and sacrococcygeal region, subsequent encounter for fracture with routine healing
M48.48XG	Fatigue fracture of vertebra, sacral and sacrococcygeal region, subsequent encounter for fracture with delayed healing
M48.48XS	Fatigue fracture of vertebra, sacral and sacrococcygeal region, sequela of fracture
M48.50XD	Collapsed vertebra, not elsewhere classified, site unspecified, subsequent encounter for fracture with routine healing
M48.50XG	Collapsed vertebra, not elsewhere classified, site unspecified, subsequent encounter for fracture with delayed healing
M48.50XS	Collapsed vertebra, not elsewhere classified, site unspecified, sequela of fracture
M48.51XD	Collapsed vertebra, not elsewhere classified, occipito-atlanto-axial region, subsequent encounter for fracture with routine healing
M48.51XG	Collapsed vertebra, not elsewhere classified, occipito-atlanto-axial region, subsequent encounter for fracture with delayed healing
M48.51XS	Collapsed vertebra, not elsewhere classified, occipito-atlanto-axial region, sequela of fracture
M48.52XD	Collapsed vertebra, not elsewhere classified, cervical region, subsequent encounter for fracture with routine healing
M48.52XG	Collapsed vertebra, not elsewhere classified, cervical region, subsequent encounter for fracture with delayed healing
M48.52XS	Collapsed vertebra, not elsewhere classified, cervical region, sequela of fracture



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Code	Description
M48.53XD	Collapsed vertebra, not elsewhere classified, cervicothoracic region, subsequent encounter for fracture with routine healing
M48.53XG	Collapsed vertebra, not elsewhere classified, cervicothoracic region, subsequent encounter for fracture with delayed healing
M48.53XS	Collapsed vertebra, not elsewhere classified, cervicothoracic region, sequela of fracture
M48.54XD	Collapsed vertebra, not elsewhere classified, thoracic region, subsequent encounter for fracture with routine healing
M48.54XG	Collapsed vertebra, not elsewhere classified, thoracic region, subsequent encounter for fracture with delayed healing
M48.54XS	Collapsed vertebra, not elsewhere classified, thoracic region, sequela of fracture
M48.55XD	Collapsed vertebra, not elsewhere classified, thoracolumbar region, subsequent encounter for fracture with routine healing
M48.55XG	Collapsed vertebra, not elsewhere classified, thoracolumbar region, subsequent encounter for fracture with delayed healing
M48.55XS	Collapsed vertebra, not elsewhere classified, thoracolumbar region, sequela of fracture
M48.56XD	Collapsed vertebra, not elsewhere classified, lumbar region, subsequent encounter for fracture with routine healing
M48.56XG	Collapsed vertebra, not elsewhere classified, lumbar region, subsequent encounter for fracture with delayed healing
M48.56XS	Collapsed vertebra, not elsewhere classified, lumbar region, sequela of fracture
M48.57XD	Collapsed vertebra, not elsewhere classified, lumbosacral region, subsequent encounter for fracture with routine healing
M48.57XG	Collapsed vertebra, not elsewhere classified, lumbosacral region, subsequent encounter for fracture with delayed healing
M48.57XS	Collapsed vertebra, not elsewhere classified, lumbosacral region, sequela of fracture
M48.58XD	Collapsed vertebra, not elsewhere classified, sacral and sacrococcygeal region, subsequent encounter for fracture with routine healing
M48.58XG	Collapsed vertebra, not elsewhere classified, sacral and sacrococcygeal region, subsequent encounter for fracture with delayed healing
M48.58XS	Collapsed vertebra, not elsewhere classified, sacral and sacrococcygeal region, sequela of fracture
*M50.020	*Cervical disc disorder with myelopathy, mid-cervical region, unspecified level
*M50.021	*Cervical disc disorder at C4-C5 level with myelopathy
*M50.022	*Cervical disc disorder at C5-C6 level with myelopathy
*M50.023	*Cervical disc disorder at C6-C7 level with myelopathy

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Code	Description
M53.2X1	Spinal instabilities, occipito-atlanto-axial region
M53.2X2	Spinal instabilities, cervical region
M53.2X3	Spinal instabilities, cervicothoracic region
M53.2X4	Spinal instabilities, thoracic region
M53.2X5	Spinal instabilities, thoracolumbar region
M53.2X6	Spinal instabilities, lumbar region
M53.2X9	Spinal instabilities, site unspecified
M60.10	Interstitial myositis of unspecified site
M60.111	Interstitial myositis, right shoulder
M60.112	Interstitial myositis, left shoulder
M60.119	Interstitial myositis, unspecified shoulder
M60.121	Interstitial myositis, right upper arm
M60.122	Interstitial myositis, left upper arm
M60.129	Interstitial myositis, unspecified upper arm
M60.131	Interstitial myositis, right forearm
M60.132	Interstitial myositis, left forearm
M60.139	Interstitial myositis, unspecified forearm
M60.141	Interstitial myositis, right hand
M60.142	Interstitial myositis, left hand
M60.149	Interstitial myositis, unspecified hand
M60.151	Interstitial myositis, right thigh
M60.152	Interstitial myositis, left thigh
M60.159	Interstitial myositis, unspecified thigh
M60.161	Interstitial myositis, right lower leg
M60.162	Interstitial myositis, left lower leg
M60.169	Interstitial myositis, unspecified lower leg
M60.171	Interstitial myositis, right ankle and foot
M60.172	Interstitial myositis, left ankle and foot
M60.179	Interstitial myositis, unspecified ankle and foot
M60.18	Interstitial myositis, other site



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Code	Description
M60.19	Interstitial myositis, multiple sites
M60.20	Foreign body granuloma of soft tissue, not elsewhere classified, unspecified site
M60.211	Foreign body granuloma of soft tissue, not elsewhere classified, right shoulder
M60.212	Foreign body granuloma of soft tissue, not elsewhere classified, left shoulder
M60.219	Foreign body granuloma of soft tissue, not elsewhere classified, unspecified shoulder
M60.221	Foreign body granuloma of soft tissue, not elsewhere classified, right upper arm
M60.222	Foreign body granuloma of soft tissue, not elsewhere classified, left upper arm
M60.229	Foreign body granuloma of soft tissue, not elsewhere classified, unspecified upper arm
M60.231	Foreign body granuloma of soft tissue, not elsewhere classified, right forearm
M60.232	Foreign body granuloma of soft tissue, not elsewhere classified, left forearm
M60.239	Foreign body granuloma of soft tissue, not elsewhere classified, unspecified forearm
M60.241	Foreign body granuloma of soft tissue, not elsewhere classified, right hand
M60.242	Foreign body granuloma of soft tissue, not elsewhere classified, left hand
M60.249	Foreign body granuloma of soft tissue, not elsewhere classified, unspecified hand
M60.251	Foreign body granuloma of soft tissue, not elsewhere classified, right thigh
M60.252	Foreign body granuloma of soft tissue, not elsewhere classified, left thigh
M60.259	Foreign body granuloma of soft tissue, not elsewhere classified, unspecified thigh
M60.261	Foreign body granuloma of soft tissue, not elsewhere classified, right lower leg
M60.262	Foreign body granuloma of soft tissue, not elsewhere classified, left lower leg
M60.269	Foreign body granuloma of soft tissue, not elsewhere classified, unspecified lower leg
M60.271	Foreign body granuloma of soft tissue, not elsewhere classified, right ankle and foot
M60.272	Foreign body granuloma of soft tissue, not elsewhere classified, left ankle and foot
M60.279	Foreign body granuloma of soft tissue, not elsewhere classified, unspecified ankle and foot
M60.28	Foreign body granuloma of soft tissue, not elsewhere classified, other site
M61.00	Myositis ossificans traumatica, unspecified site
M61.011	Myositis ossificans traumatica, right shoulder
M61.012	Myositis ossificans traumatica, left shoulder
M61.019	Myositis ossificans traumatica, unspecified shoulder
M61.021	Myositis ossificans traumatica, right upper arm
M61.022	Myositis ossificans traumatica, left upper arm



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Code	Description
M61.029	Myositis ossificans traumatica, unspecified upper arm
M61.031	Myositis ossificans traumatica, right forearm
M61.032	Myositis ossificans traumatica, left forearm
M61.039	Myositis ossificans traumatica, unspecified forearm
M61.041	Myositis ossificans traumatica, right hand
M61.042	Myositis ossificans traumatica, left hand
M61.049	Myositis ossificans traumatica, unspecified hand
M61.051	Myositis ossificans traumatica, right thigh
M61.052	Myositis ossificans traumatica, left thigh
M61.059	Myositis ossificans traumatica, unspecified thigh
M61.061	Myositis ossificans traumatica, right lower leg
M61.062	Myositis ossificans traumatica, left lower leg
M61.069	Myositis ossificans traumatica, unspecified lower leg
M61.071	Myositis ossificans traumatica, right ankle and foot
M61.072	Myositis ossificans traumatica, left ankle and foot
M61.079	Myositis ossificans traumatica, unspecified ankle and foot
M61.08	Myositis ossificans traumatica, other site
M61.09	Myositis ossificans traumatica, multiple sites
M61.10	Myositis ossificans progressiva, unspecified site
M61.111	Myositis ossificans progressiva, right shoulder
M61.112	Myositis ossificans progressiva, left shoulder
M61.119	Myositis ossificans progressiva, unspecified shoulder
M61.121	Myositis ossificans progressiva, right upper arm
M61.122	Myositis ossificans progressiva, left upper arm
M61.129	Myositis ossificans progressiva, unspecified arm
M61.131	Myositis ossificans progressiva, right forearm
M61.132	Myositis ossificans progressiva, left forearm
M61.139	Myositis ossificans progressiva, unspecified forearm
M61.141	Myositis ossificans progressiva, right hand
M61.142	Myositis ossificans progressiva, left hand



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Code	Description
M61.143	Myositis ossificans progressiva, unspecified hand
M61.144	Myositis ossificans progressiva, right finger(s)
M61.145	Myositis ossificans progressiva, left finger(s)
M61.146	Myositis ossificans progressiva, unspecified finger(s)
M61.151	Myositis ossificans progressiva, right thigh
M61.152	Myositis ossificans progressiva, left thigh
M61.159	Myositis ossificans progressiva, unspecified thigh
M61.161	Myositis ossificans progressiva, right lower leg
M61.162	Myositis ossificans progressiva, left lower leg
M61.169	Myositis ossificans progressiva, unspecified lower leg
M61.171	Myositis ossificans progressiva, right ankle
M61.172	Myositis ossificans progressiva, left ankle
M61.173	Myositis ossificans progressiva, unspecified ankle
M61.174	Myositis ossificans progressiva, right foot
M61.175	Myositis ossificans progressiva, left foot
M61.176	Myositis ossificans progressiva, unspecified foot
M61.177	Myositis ossificans progressiva, right toe(s)
M61.178	Myositis ossificans progressiva, left toe(s)
M61.179	Myositis ossificans progressiva, unspecified toe(s)
M61.18	Myositis ossificans progressiva, other site
M61.19	Myositis ossificans progressiva, multiple sites
M61.20	Paralytic calcification and ossification of muscle, unspecified site
M61.211	Paralytic calcification and ossification of muscle, right shoulder
M61.212	Paralytic calcification and ossification of muscle, left shoulder
M61.219	Paralytic calcification and ossification of muscle, unspecified shoulder
M61.221	Paralytic calcification and ossification of muscle, right upper arm
M61.222	Paralytic calcification and ossification of muscle, left upper arm
M61.229	Paralytic calcification and ossification of muscle, unspecified upper arm
M61.231	Paralytic calcification and ossification of muscle, right forearm
M61.232	Paralytic calcification and ossification of muscle, left forearm

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Code	Description
M61.239	Paralytic calcification and ossification of muscle, unspecified forearm
M61.241	Paralytic calcification and ossification of muscle, right hand
M61.242	Paralytic calcification and ossification of muscle, left hand
M61.249	Paralytic calcification and ossification of muscle, unspecified hand
M61.251	Paralytic calcification and ossification of muscle, right thigh
M61.252	Paralytic calcification and ossification of muscle, left thigh
M61.259	Paralytic calcification and ossification of muscle, unspecified thigh
M61.261	Paralytic calcification and ossification of muscle, right lower leg
M61.262	Paralytic calcification and ossification of muscle, left lower leg
M61.269	Paralytic calcification and ossification of muscle, unspecified lower leg
M61.271	Paralytic calcification and ossification of muscle, right ankle and foot
M61.272	Paralytic calcification and ossification of muscle, left ankle and foot
M61.279	Paralytic calcification and ossification of muscle, unspecified ankle and foot
M61.28	Paralytic calcification and ossification of muscle, other site
M61.29	Paralytic calcification and ossification of muscle, multiple sites
M61.30	Calcification and ossification of muscles associated with burns, unspecified site
M61.311	Calcification and ossification of muscles associated with burns, right shoulder
M61.312	Calcification and ossification of muscles associated with burns, left shoulder
M61.319	Calcification and ossification of muscles associated with burns, unspecified shoulder
M61.321	Calcification and ossification of muscles associated with burns, right upper arm
M61.322	Calcification and ossification of muscles associated with burns, left upper arm
M61.329	Calcification and ossification of muscles associated with burns, unspecified upper arm
M61.331	Calcification and ossification of muscles associated with burns, right forearm
M61.332	Calcification and ossification of muscles associated with burns, left forearm
M61.339	Calcification and ossification of muscles associated with burns, unspecified forearm
M61.341	Calcification and ossification of muscles associated with burns, right hand
M61.342	Calcification and ossification of muscles associated with burns, left hand
M61.349	Calcification and ossification of muscles associated with burns, unspecified hand
M61.351	Calcification and ossification of muscles associated with burns, right thigh
M61.352	Calcification and ossification of muscles associated with burns, left thigh

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Code	Description
M61.359	Calcification and ossification of muscles associated with burns, unspecified thigh
M61.361	Calcification and ossification of muscles associated with burns, right lower leg
M61.362	Calcification and ossification of muscles associated with burns, left lower leg
M61.369	Calcification and ossification of muscles associated with burns, unspecified lower leg
M61.371	Calcification and ossification of muscles associated with burns, right ankle and foot
M61.372	Calcification and ossification of muscles associated with burns, left ankle and foot
M61.379	Calcification and ossification of muscles associated with burns, unspecified ankle and foot
M61.38	Calcification and ossification of muscles associated with burns, other site
M61.39	Calcification and ossification of muscles associated with burns, multiple sites
M61.40	Other calcification of muscle, unspecified site
M61.411	Other calcification of muscle, right shoulder
M61.412	Other calcification of muscle, left shoulder
M61.419	Other calcification of muscle, unspecified shoulder
M61.421	Other calcification of muscle, right upper arm
M61.422	Other calcification of muscle, left upper arm
M61.429	Other calcification of muscle, unspecified upper arm
M61.431	Other calcification of muscle, right forearm
M61.432	Other calcification of muscle, left forearm
M61.439	Other calcification of muscle, unspecified forearm
M61.441	Other calcification of muscle, right hand
M61.442	Other calcification of muscle, left hand
M61.449	Other calcification of muscle, unspecified hand
M61.451	Other calcification of muscle, right thigh
M61.452	Other calcification of muscle, left thigh
M61.459	Other calcification of muscle, unspecified thigh
M61.461	Other calcification of muscle, right lower leg
M61.462	Other calcification of muscle, left lower leg
M61.469	Other calcification of muscle, unspecified lower leg
M61.471	Other calcification of muscle, right ankle and foot
M61.472	Other calcification of muscle, left ankle and foot



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Code	Description
M61.479	Other calcification of muscle, unspecified ankle and foot
M61.48	Other calcification of muscle, other site
M61.49	Other calcification of muscle, multiple sites
M61.50	Other ossification of muscle, unspecified site
M61.511	Other ossification of muscle, right shoulder
M61.512	Other ossification of muscle, left shoulder
M61.519	Other ossification of muscle, unspecified shoulder
M61.521	Other ossification of muscle, right upper arm
M61.522	Other ossification of muscle, left upper arm
M61.529	Other ossification of muscle, unspecified upper arm
M61.531	Other ossification of muscle, right forearm
M61.532	Other ossification of muscle, left forearm
M61.539	Other ossification of muscle, unspecified forearm
M61.541	Other ossification of muscle, right hand
M61.542	Other ossification of muscle, left hand
M61.549	Other ossification of muscle, unspecified hand
M61.551	Other ossification of muscle, right thigh
M61.552	Other ossification of muscle, left thigh
M61.559	Other ossification of muscle, unspecified thigh
M61.561	Other ossification of muscle, right lower leg
M61.562	Other ossification of muscle, left lower leg
M61.569	Other ossification of muscle, unspecified lower leg
M61.571	Other ossification of muscle, right ankle and foot
M61.572	Other ossification of muscle, left ankle and foot
M61.579	Other ossification of muscle, unspecified ankle and foot
M61.58	Other ossification of muscle, other site
M61.59	Other ossification of muscle, multiple sites
M61.9	Calcification and ossification of muscle, unspecified
M62.00	Separation of muscle (nontraumatic), unspecified site
M62.011	Separation of muscle (nontraumatic), right shoulder



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Code	Description
M62.012	Separation of muscle (nontraumatic), left shoulder
M62.019	Separation of muscle (nontraumatic), unspecified shoulder
M62.021	Separation of muscle (nontraumatic), right upper arm
M62.022	Separation of muscle (nontraumatic), left upper arm
M62.029	Separation of muscle (nontraumatic), unspecified upper arm
M62.031	Separation of muscle (nontraumatic), right forearm
M62.032	Separation of muscle (nontraumatic), left forearm
M62.039	Separation of muscle (nontraumatic), unspecified forearm
M62.041	Separation of muscle (nontraumatic), right hand
M62.042	Separation of muscle (nontraumatic), left hand
M62.049	Separation of muscle (nontraumatic), unspecified hand
M62.051	Separation of muscle (nontraumatic), right thigh
M62.052	Separation of muscle (nontraumatic), left thigh
M62.059	Separation of muscle (nontraumatic), unspecified thigh
M62.061	Separation of muscle (nontraumatic), right lower leg
M62.062	Separation of muscle (nontraumatic), left lower leg
M62.069	Separation of muscle (nontraumatic), unspecified lower leg
M62.071	Separation of muscle (nontraumatic), right ankle and foot
M62.072	Separation of muscle (nontraumatic), left ankle and foot
M62.079	Separation of muscle (nontraumatic), unspecified ankle and foot
M62.08	Separation of muscle (nontraumatic), other site
M62.10	Other rupture of muscle (nontraumatic), unspecified site
M62.111	Other rupture of muscle (nontraumatic), right shoulder
M62.112	Other rupture of muscle (nontraumatic), left shoulder
M62.119	Other rupture of muscle (nontraumatic), unspecified shoulder
M62.121	Other rupture of muscle (nontraumatic), right upper arm
M62.122	Other rupture of muscle (nontraumatic), left upper arm
M62.129	Other rupture of muscle (nontraumatic), unspecified upper arm
M62.131	Other rupture of muscle (nontraumatic), right forearm
M62.132	Other rupture of muscle (nontraumatic), left forearm

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Code	Description
M62.139	Other rupture of muscle (nontraumatic), unspecified forearm
M62.141	Other rupture of muscle (nontraumatic), right hand
M62.142	Other rupture of muscle (nontraumatic), left hand
M62.149	Other rupture of muscle (nontraumatic), unspecified hand
M62.151	Other rupture of muscle (nontraumatic), right thigh
M62.152	Other rupture of muscle (nontraumatic), left thigh
M62.159	Other rupture of muscle (nontraumatic), unspecified thigh
M62.161	Other rupture of muscle (nontraumatic), right lower leg
M62.162	Other rupture of muscle (nontraumatic), left lower leg
M62.169	Other rupture of muscle (nontraumatic), unspecified lower leg
M62.171	Other rupture of muscle (nontraumatic), right ankle and foot
M62.172	Other rupture of muscle (nontraumatic), left ankle and foot
M62.179	Other rupture of muscle (nontraumatic), unspecified ankle and foot
M62.18	Other rupture of muscle (nontraumatic), other site
M62.3	Immobility syndrome (paraplegic)
M62.40	Contracture of muscle, unspecified site
M62.411	Contracture of muscle, right shoulder
M62.412	Contracture of muscle, left shoulder
M62.419	Contracture of muscle, unspecified shoulder
M62.421	Contracture of muscle, right upper arm
M62.422	Contracture of muscle, left upper arm
M62.429	Contracture of muscle, unspecified upper arm
M62.431	Contracture of muscle, right forearm
M62.432	Contracture of muscle, left forearm
M62.439	Contracture of muscle, unspecified forearm
M62.441	Contracture of muscle, right hand
M62.442	Contracture of muscle, left hand
M62.449	Contracture of muscle, unspecified hand
M62.451	Contracture of muscle, right thigh
M62.452	Contracture of muscle, left thigh

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Code	Description
M62.459	Contracture of muscle, unspecified thigh
M62.461	Contracture of muscle, right lower leg
M62.462	Contracture of muscle, left lower leg
M62.469	Contracture of muscle, unspecified lower leg
M62.471	Contracture of muscle, right ankle and foot
M62.472	Contracture of muscle, left ankle and foot
M62.479	Contracture of muscle, unspecified ankle and foot
M62.48	Contracture of muscle, other site
M62.49	Contracture of muscle, multiple sites
M62.50	Muscle wasting and atrophy, not elsewhere classified, unspecified site
M62.511	Muscle wasting and atrophy, not elsewhere classified, right shoulder
M62.512	Muscle wasting and atrophy, not elsewhere classified, left shoulder
M62.519	Muscle wasting and atrophy, not elsewhere classified, unspecified shoulder
M62.521	Muscle wasting and atrophy, not elsewhere classified, right upper arm
M62.522	Muscle wasting and atrophy, not elsewhere classified, left upper arm
M62.529	Muscle wasting and atrophy, not elsewhere classified, unspecified upper arm
M62.531	Muscle wasting and atrophy, not elsewhere classified, right forearm
M62.532	Muscle wasting and atrophy, not elsewhere classified, left forearm
M62.539	Muscle wasting and atrophy, not elsewhere classified, unspecified forearm
M62.541	Muscle wasting and atrophy, not elsewhere classified, right hand
M62.542	Muscle wasting and atrophy, not elsewhere classified, left hand
M62.549	Muscle wasting and atrophy, not elsewhere classified, unspecified hand
M62.551	Muscle wasting and atrophy, not elsewhere classified, right thigh
M62.552	Muscle wasting and atrophy, not elsewhere classified, left thigh
M62.559	Muscle wasting and atrophy, not elsewhere classified, unspecified thigh
M62.561	Muscle wasting and atrophy, not elsewhere classified, right lower leg
M62.562	Muscle wasting and atrophy, not elsewhere classified, left lower leg
M62.569	Muscle wasting and atrophy, not elsewhere classified, unspecified lower leg
M62.571	Muscle wasting and atrophy, not elsewhere classified, right ankle and foot
M62.572	Muscle wasting and atrophy, not elsewhere classified, left ankle and foot

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Code	Description
M62.579	Muscle wasting and atrophy, not elsewhere classified, unspecified ankle and foot
M62.58	Muscle wasting and atrophy, not elsewhere classified, other site
M62.59	Muscle wasting and atrophy, not elsewhere classified, multiple sites
M62.831	Muscle spasm of calf
M62.838	Other muscle spasm
M62.89	Other specified disorders of muscle
M65.00	Abscess of tendon sheath, unspecified site
M65.011	Abscess of tendon sheath, right shoulder
M65.012	Abscess of tendon sheath, left shoulder
M65.019	Abscess of tendon sheath, unspecified shoulder
M65.021	Abscess of tendon sheath, right upper arm
M65.022	Abscess of tendon sheath, left upper arm
M65.029	Abscess of tendon sheath, unspecified upper arm
M65.031	Abscess of tendon sheath, right forearm
M65.032	Abscess of tendon sheath, left forearm
M65.039	Abscess of tendon sheath, unspecified forearm
M65.041	Abscess of tendon sheath, right hand
M65.042	Abscess of tendon sheath, left hand
M65.049	Abscess of tendon sheath, unspecified hand
M65.051	Abscess of tendon sheath, right thigh
M65.052	Abscess of tendon sheath, left thigh
M65.059	Abscess of tendon sheath, unspecified thigh
M65.061	Abscess of tendon sheath, right lower leg
M65.062	Abscess of tendon sheath, left lower leg
M65.069	Abscess of tendon sheath, unspecified lower leg
M65.071	Abscess of tendon sheath, right ankle and foot
M65.072	Abscess of tendon sheath, left ankle and foot
M65.079	Abscess of tendon sheath, unspecified ankle and foot
M65.08	Abscess of tendon sheath, other site
M65.10	Other infective (teno)synovitis, unspecified site

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Code	Description
M65.111	Other infective (teno)synovitis, right shoulder
M65.112	Other infective (teno)synovitis, left shoulder
M65.119	Other infective (teno)synovitis, unspecified shoulder
M65.121	Other infective (teno)synovitis, right elbow
M65.122	Other infective (teno)synovitis, left elbow
M65.129	Other infective (teno)synovitis, unspecified elbow
M65.131	Other infective (teno)synovitis, right wrist
M65.132	Other infective (teno)synovitis, left wrist
M65.139	Other infective (teno)synovitis, unspecified wrist
M65.141	Other infective (teno)synovitis, right hand
M65.142	Other infective (teno)synovitis, left hand
M65.149	Other infective (teno)synovitis, unspecified hand
M65.151	Other infective (teno)synovitis, right hip
M65.152	Other infective (teno)synovitis, left hip
M65.159	Other infective (teno)synovitis, unspecified hip
M65.161	Other infective (teno)synovitis, right knee
M65.162	Other infective (teno)synovitis, left knee
M65.169	Other infective (teno)synovitis, unspecified knee
M65.171	Other infective (teno)synovitis, right ankle and foot
M65.172	Other infective (teno)synovitis, left ankle and foot
M65.179	Other infective (teno)synovitis, unspecified ankle and foot
M65.18	Other infective (teno)synovitis, other site
M65.19	Other infective (teno)synovitis, multiple sites
M65.20	Calcific tendinitis, unspecified site
M65.221	Calcific tendinitis, right upper arm
M65.222	Calcific tendinitis, left upper arm
M65.229	Calcific tendinitis, unspecified upper arm
M65.231	Calcific tendinitis, right forearm
M65.232	Calcific tendinitis, left forearm
M65.239	Calcific tendinitis, unspecified forearm

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Code	Description
M65.241	Calcific tendinitis, right hand
M65.242	Calcific tendinitis, left hand
M65.249	Calcific tendinitis, unspecified hand
M65.251	Calcific tendinitis, right thigh
M65.252	Calcific tendinitis, left thigh
M65.259	Calcific tendinitis, unspecified thigh
M65.261	Calcific tendinitis, right lower leg
M65.262	Calcific tendinitis, left lower leg
M65.269	Calcific tendinitis, unspecified lower leg
M65.271	Calcific tendinitis, right ankle and foot
M65.272	Calcific tendinitis, left ankle and foot
M65.279	Calcific tendinitis, unspecified ankle and foot
M65.28	Calcific tendinitis, other site
M65.29	Calcific tendinitis, multiple sites
M65.30	Trigger finger, unspecified finger
M65.311	Trigger thumb, right thumb
M65.312	Trigger thumb, left thumb
M65.319	Trigger thumb, unspecified thumb
M65.321	Trigger finger, right index finger
M65.322	Trigger finger, left index finger
M65.329	Trigger finger, unspecified index finger
M65.331	Trigger finger, right middle finger
M65.332	Trigger finger, left middle finger
M65.339	Trigger finger, unspecified middle finger
M65.341	Trigger finger, right ring finger
M65.342	Trigger finger, left ring finger
M65.349	Trigger finger, unspecified ring finger
M65.351	Trigger finger, right little finger
M65.352	Trigger finger, left little finger
M65.359	Trigger finger, unspecified little finger



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Code	Description
M65.4	Radial styloid tenosynovitis [de Quervain]
M65.80	Other synovitis and tenosynovitis, unspecified site
M65.811	Other synovitis and tenosynovitis, right shoulder
M65.812	Other synovitis and tenosynovitis, left shoulder
M65.819	Other synovitis and tenosynovitis, unspecified shoulder
M65.821	Other synovitis and tenosynovitis, right upper arm
M65.822	Other synovitis and tenosynovitis, left upper arm
M65.829	Other synovitis and tenosynovitis, unspecified upper arm
M65.831	Other synovitis and tenosynovitis, right forearm
M65.832	Other synovitis and tenosynovitis, left forearm
M65.839	Other synovitis and tenosynovitis, unspecified forearm
M65.841	Other synovitis and tenosynovitis, right hand
M65.842	Other synovitis and tenosynovitis, left hand
M65.849	Other synovitis and tenosynovitis, unspecified hand
M65.851	Other synovitis and tenosynovitis, right thigh
M65.852	Other synovitis and tenosynovitis, left thigh
M65.859	Other synovitis and tenosynovitis, unspecified thigh
M65.861	Other synovitis and tenosynovitis, right lower leg
M65.862	Other synovitis and tenosynovitis, left lower leg
M65.869	Other synovitis and tenosynovitis, unspecified lower leg
M65.871	Other synovitis and tenosynovitis, right ankle and foot
M65.872	Other synovitis and tenosynovitis, left ankle and foot
M65.879	Other synovitis and tenosynovitis, unspecified ankle and foot
M65.88	Other synovitis and tenosynovitis, other site
M65.89	Other synovitis and tenosynovitis, multiple sites
M65.9	Synovitis and tenosynovitis, unspecified
M66.0	Rupture of popliteal cyst
M66.10	Rupture of synovium, unspecified joint
M66.111	Rupture of synovium, right shoulder
M66.112	Rupture of synovium, left shoulder



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Code	Description
M66.119	Rupture of synovium, unspecified shoulder
M66.121	Rupture of synovium, right elbow
M66.122	Rupture of synovium, left elbow
M66.129	Rupture of synovium, unspecified elbow
M66.131	Rupture of synovium, right wrist
M66.132	Rupture of synovium, left wrist
M66.139	Rupture of synovium, unspecified wrist
M66.141	Rupture of synovium, right hand
M66.142	Rupture of synovium, left hand
M66.143	Rupture of synovium, unspecified hand
M66.144	Rupture of synovium, right finger(s)
M66.145	Rupture of synovium, left finger(s)
M66.146	Rupture of synovium, unspecified finger(s)
M66.151	Rupture of synovium, right hip
M66.152	Rupture of synovium, left hip
M66.159	Rupture of synovium, unspecified hip
M66.171	Rupture of synovium, right ankle
M66.172	Rupture of synovium, left ankle
M66.173	Rupture of synovium, unspecified ankle
M66.174	Rupture of synovium, right foot
M66.175	Rupture of synovium, left foot
M66.176	Rupture of synovium, unspecified foot
M66.177	Rupture of synovium, right toe(s)
M66.178	Rupture of synovium, left toe(s)
M66.179	Rupture of synovium, unspecified toe(s)
M66.18	Rupture of synovium, other site
M66.20	Spontaneous rupture of extensor tendons, unspecified site
M66.211	Spontaneous rupture of extensor tendons, right shoulder
M66.212	Spontaneous rupture of extensor tendons, left shoulder
M66.219	Spontaneous rupture of extensor tendons, unspecified shoulder

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Code	Description
M66.221	Spontaneous rupture of extensor tendons, right upper arm
M66.222	Spontaneous rupture of extensor tendons, left upper arm
M66.229	Spontaneous rupture of extensor tendons, unspecified upper arm
M66.231	Spontaneous rupture of extensor tendons, right forearm
M66.232	Spontaneous rupture of extensor tendons, left forearm
M66.239	Spontaneous rupture of extensor tendons, unspecified forearm
M66.241	Spontaneous rupture of extensor tendons, right hand
M66.242	Spontaneous rupture of extensor tendons, left hand
M66.249	Spontaneous rupture of extensor tendons, unspecified hand
M66.251	Spontaneous rupture of extensor tendons, right thigh
M66.252	Spontaneous rupture of extensor tendons, left thigh
M66.259	Spontaneous rupture of extensor tendons, unspecified thigh
M66.261	Spontaneous rupture of extensor tendons, right lower leg
M66.262	Spontaneous rupture of extensor tendons, left lower leg
M66.269	Spontaneous rupture of extensor tendons, unspecified lower leg
M66.271	Spontaneous rupture of extensor tendons, right ankle and foot
M66.272	Spontaneous rupture of extensor tendons, left ankle and foot
M66.279	Spontaneous rupture of extensor tendons, unspecified ankle and foot
M66.28	Spontaneous rupture of extensor tendons, other site
M66.29	Spontaneous rupture of extensor tendons, multiple sites
M66.30	Spontaneous rupture of flexor tendons, unspecified site
M66.311	Spontaneous rupture of flexor tendons, right shoulder
M66.312	Spontaneous rupture of flexor tendons, left shoulder
M66.319	Spontaneous rupture of flexor tendons, unspecified shoulder
M66.321	Spontaneous rupture of flexor tendons, right upper arm
M66.322	Spontaneous rupture of flexor tendons, left upper arm
M66.329	Spontaneous rupture of flexor tendons, unspecified upper arm
M66.331	Spontaneous rupture of flexor tendons, right forearm
M66.332	Spontaneous rupture of flexor tendons, left forearm
M66.339	Spontaneous rupture of flexor tendons, unspecified forearm

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Code	Description
M66.341	Spontaneous rupture of flexor tendons, right hand
M66.342	Spontaneous rupture of flexor tendons, left hand
M66.349	Spontaneous rupture of flexor tendons, unspecified hand
M66.351	Spontaneous rupture of flexor tendons, right thigh
M66.352	Spontaneous rupture of flexor tendons, left thigh
M66.359	Spontaneous rupture of flexor tendons, unspecified thigh
M66.361	Spontaneous rupture of flexor tendons, right lower leg
M66.362	Spontaneous rupture of flexor tendons, left lower leg
M66.369	Spontaneous rupture of flexor tendons, unspecified lower leg
M66.371	Spontaneous rupture of flexor tendons, right ankle and foot
M66.372	Spontaneous rupture of flexor tendons, left ankle and foot
M66.379	Spontaneous rupture of flexor tendons, unspecified ankle and foot
M66.38	Spontaneous rupture of flexor tendons, other site
M66.39	Spontaneous rupture of flexor tendons, multiple sites
M66.80	Spontaneous rupture of other tendons, unspecified site
M66.811	Spontaneous rupture of other tendons, right shoulder
M66.812	Spontaneous rupture of other tendons, left shoulder
M66.819	Spontaneous rupture of other tendons, unspecified shoulder
M66.821	Spontaneous rupture of other tendons, right upper arm
M66.822	Spontaneous rupture of other tendons, left upper arm
M66.829	Spontaneous rupture of other tendons, unspecified upper arm
M66.831	Spontaneous rupture of other tendons, right forearm
M66.832	Spontaneous rupture of other tendons, left forearm
M66.839	Spontaneous rupture of other tendons, unspecified forearm
M66.841	Spontaneous rupture of other tendons, right hand
M66.842	Spontaneous rupture of other tendons, left hand
M66.849	Spontaneous rupture of other tendons, unspecified hand
M66.851	Spontaneous rupture of other tendons, right thigh
M66.852	Spontaneous rupture of other tendons, left thigh
M66.859	Spontaneous rupture of other tendons, unspecified thigh



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Code	Description
M66.861	Spontaneous rupture of other tendons, right lower leg
M66.862	Spontaneous rupture of other tendons, left lower leg
M66.869	Spontaneous rupture of other tendons, unspecified lower leg
M66.871	Spontaneous rupture of other tendons, right ankle and foot
M66.872	Spontaneous rupture of other tendons, left ankle and foot
M66.879	Spontaneous rupture of other tendons, unspecified ankle and foot
M66.88	Spontaneous rupture of other tendons, other
M66.89	Spontaneous rupture of other tendons, multiple sites
M66.9	Spontaneous rupture of unspecified tendon
M67.00	Short Achilles tendon (acquired), unspecified ankle
M67.01	Short Achilles tendon (acquired), right ankle
M67.02	Short Achilles tendon (acquired), left ankle
M67.20	Synovial hypertrophy, not elsewhere classified, unspecified site
M67.211	Synovial hypertrophy, not elsewhere classified, right shoulder
M67.212	Synovial hypertrophy, not elsewhere classified, left shoulder
M67.219	Synovial hypertrophy, not elsewhere classified, unspecified shoulder
M67.221	Synovial hypertrophy, not elsewhere classified, right upper arm
M67.222	Synovial hypertrophy, not elsewhere classified, left upper arm
M67.229	Synovial hypertrophy, not elsewhere classified, unspecified upper arm
M67.231	Synovial hypertrophy, not elsewhere classified, right forearm
M67.232	Synovial hypertrophy, not elsewhere classified, left forearm
M67.239	Synovial hypertrophy, not elsewhere classified, unspecified forearm
M67.241	Synovial hypertrophy, not elsewhere classified, right hand
M67.242	Synovial hypertrophy, not elsewhere classified, left hand
M67.249	Synovial hypertrophy, not elsewhere classified, unspecified hand
M67.251	Synovial hypertrophy, not elsewhere classified, right thigh
M67.252	Synovial hypertrophy, not elsewhere classified, left thigh
M67.259	Synovial hypertrophy, not elsewhere classified, unspecified thigh
M67.261	Synovial hypertrophy, not elsewhere classified, right lower leg
M67.262	Synovial hypertrophy, not elsewhere classified, left lower leg

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Code	Description
M67.269	Synovial hypertrophy, not elsewhere classified, unspecified lower leg
M67.271	Synovial hypertrophy, not elsewhere classified, right ankle and foot
M67.272	Synovial hypertrophy, not elsewhere classified, left ankle and foot
M67.279	Synovial hypertrophy, not elsewhere classified, unspecified ankle and foot
M67.28	Synovial hypertrophy, not elsewhere classified, other site
M67.29	Synovial hypertrophy, not elsewhere classified, multiple sites
M67.30	Transient synovitis, unspecified site
M67.311	Transient synovitis, right shoulder
M67.312	Transient synovitis, left shoulder
M67.319	Transient synovitis, unspecified shoulder
M67.321	Transient synovitis, right elbow
M67.322	Transient synovitis, left elbow
M67.329	Transient synovitis, unspecified elbow
M67.331	Transient synovitis, right wrist
M67.332	Transient synovitis, left wrist
M67.339	Transient synovitis, unspecified wrist
M67.341	Transient synovitis, right hand
M67.342	Transient synovitis, left hand
M67.349	Transient synovitis, unspecified hand
M67.351	Transient synovitis, right hip
M67.352	Transient synovitis, left hip
M67.359	Transient synovitis, unspecified hip
M67.361	Transient synovitis, right knee
M67.362	Transient synovitis, left knee
M67.369	Transient synovitis, unspecified knee
M67.371	Transient synovitis, right ankle and foot
M67.372	Transient synovitis, left ankle and foot
M67.379	Transient synovitis, unspecified ankle and foot
M67.38	Transient synovitis, other site
M67.39	Transient synovitis, multiple sites



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Code	Description
M67.40	Ganglion, unspecified site
M67.411	Ganglion, right shoulder
M67.412	Ganglion, left shoulder
M67.419	Ganglion, unspecified shoulder
M67.421	Ganglion, right elbow
M67.422	Ganglion, left elbow
M67.429	Ganglion, unspecified elbow
M67.431	Ganglion, right wrist
M67.432	Ganglion, left wrist
M67.439	Ganglion, unspecified wrist
M67.441	Ganglion, right hand
M67.442	Ganglion, left hand
M67.449	Ganglion, unspecified hand
M67.451	Ganglion, right hip
M67.452	Ganglion, left hip
M67.459	Ganglion, unspecified hip
M67.461	Ganglion, right knee
M67.462	Ganglion, left knee
M67.469	Ganglion, unspecified knee
M67.471	Ganglion, right ankle and foot
M67.472	Ganglion, left ankle and foot
M67.479	Ganglion, unspecified ankle and foot
M67.48	Ganglion, other site
M67.49	Ganglion, multiple sites
M67.50	Plica syndrome, unspecified knee
M67.51	Plica syndrome, right knee
M67.52	Plica syndrome, left knee
M67.80	Other specified disorders of synovium and tendon, unspecified site
M67.811	Other specified disorders of synovium, right shoulder
M67.812	Other specified disorders of synovium, left shoulder

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Code	Description
M67.813	Other specified disorders of tendon, right shoulder
M67.814	Other specified disorders of tendon, left shoulder
M67.819	Other specified disorders of synovium and tendon, unspecified shoulder
M67.821	Other specified disorders of synovium, right elbow
M67.822	Other specified disorders of synovium, left elbow
M67.823	Other specified disorders of tendon, right elbow
M67.824	Other specified disorders of tendon, left elbow
M67.829	Other specified disorders of synovium and tendon, unspecified elbow
M67.831	Other specified disorders of synovium, right wrist
M67.832	Other specified disorders of synovium, left wrist
M67.833	Other specified disorders of tendon, right wrist
M67.834	Other specified disorders of tendon, left wrist
M67.839	Other specified disorders of synovium and tendon, unspecified forearm
M67.841	Other specified disorders of synovium, right hand
M67.842	Other specified disorders of synovium, left hand
M67.843	Other specified disorders of tendon, right hand
M67.844	Other specified disorders of tendon, left hand
M67.849	Other specified disorders of synovium and tendon, unspecified hand
M67.851	Other specified disorders of synovium, right hip
M67.852	Other specified disorders of synovium, left hip
M67.853	Other specified disorders of tendon, right hip
M67.854	Other specified disorders of tendon, left hip
M67.859	Other specified disorders of synovium and tendon, unspecified hip
M67.861	Other specified disorders of synovium, right knee
M67.862	Other specified disorders of synovium, left knee
M67.863	Other specified disorders of tendon, right knee
M67.864	Other specified disorders of tendon, left knee
M67.869	Other specified disorders of synovium and tendon, unspecified knee
M67.871	Other specified disorders of synovium, right ankle and foot
M67.872	Other specified disorders of synovium, left ankle and foot

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Code	Description
M67.873	Other specified disorders of tendon, right ankle and foot
M67.874	Other specified disorders of tendon, left ankle and foot
M67.879	Other specified disorders of synovium and tendon, unspecified ankle and foot
M67.88	Other specified disorders of synovium and tendon, other site
M67.89	Other specified disorders of synovium and tendon, multiple sites
M67.90	Unspecified disorder of synovium and tendon, unspecified site
M67.911	Unspecified disorder of synovium and tendon, right shoulder
M67.912	Unspecified disorder of synovium and tendon, left shoulder
M67.919	Unspecified disorder of synovium and tendon, unspecified shoulder
M67.921	Unspecified disorder of synovium and tendon, right upper arm
M67.922	Unspecified disorder of synovium and tendon, left upper arm
M67.929	Unspecified disorder of synovium and tendon, unspecified upper arm
M67.931	Unspecified disorder of synovium and tendon, right forearm
M67.932	Unspecified disorder of synovium and tendon, left forearm
M67.939	Unspecified disorder of synovium and tendon, unspecified forearm
M67.941	Unspecified disorder of synovium and tendon, right hand
M67.942	Unspecified disorder of synovium and tendon, left hand
M67.949	Unspecified disorder of synovium and tendon, unspecified hand
M67.951	Unspecified disorder of synovium and tendon, right thigh
M67.952	Unspecified disorder of synovium and tendon, left thigh
M67.959	Unspecified disorder of synovium and tendon, unspecified thigh
M67.961	Unspecified disorder of synovium and tendon, right lower leg
M67.962	Unspecified disorder of synovium and tendon, left lower leg
M67.969	Unspecified disorder of synovium and tendon, unspecified lower leg
M67.971	Unspecified disorder of synovium and tendon, right ankle and foot
M67.972	Unspecified disorder of synovium and tendon, left ankle and foot
M67.979	Unspecified disorder of synovium and tendon, unspecified ankle and foot
M67.98	Unspecified disorder of synovium and tendon, other site
M67.99	Unspecified disorder of synovium and tendon, multiple sites
M70.031	Crepitant synovitis (acute) (chronic), right wrist

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Code	Description
M70.032	Crepitant synovitis (acute) (chronic), left wrist
M70.039	Crepitant synovitis (acute) (chronic), unspecified wrist
M70.041	Crepitant synovitis (acute) (chronic), right hand
M70.042	Crepitant synovitis (acute) (chronic), left hand
M70.049	Crepitant synovitis (acute) (chronic), unspecified hand
M70.10	Bursitis, unspecified hand
M70.11	Bursitis, right hand
M70.12	Bursitis, left hand
M70.20	Olecranon bursitis, unspecified elbow
M70.21	Olecranon bursitis, right elbow
M70.22	Olecranon bursitis, left elbow
M70.30	Other bursitis of elbow, unspecified elbow
M70.31	Other bursitis of elbow, right elbow
M70.32	Other bursitis of elbow, left elbow
M70.40	Prepatellar bursitis, unspecified knee
M70.41	Prepatellar bursitis, right knee
M70.42	Prepatellar bursitis, left knee
M70.50	Other bursitis of knee, unspecified knee
M70.51	Other bursitis of knee, right knee
M70.52	Other bursitis of knee, left knee
M70.60	Trochanteric bursitis, unspecified hip
M70.61	Trochanteric bursitis, right hip
M70.62	Trochanteric bursitis, left hip
M70.70	Other bursitis of hip, unspecified hip
M70.71	Other bursitis of hip, right hip
M70.72	Other bursitis of hip, left hip
M71.00	Abscess of bursa, unspecified site
M71.011	Abscess of bursa, right shoulder
M71.012	Abscess of bursa, left shoulder
M71.019	Abscess of bursa, unspecified shoulder



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Code	Description
M71.021	Abscess of bursa, right elbow
M71.022	Abscess of bursa, left elbow
M71.029	Abscess of bursa, unspecified elbow
M71.031	Abscess of bursa, right wrist
M71.032	Abscess of bursa, left wrist
M71.039	Abscess of bursa, unspecified wrist
M71.041	Abscess of bursa, right hand
M71.042	Abscess of bursa, left hand
M71.049	Abscess of bursa, unspecified hand
M71.051	Abscess of bursa, right hip
M71.052	Abscess of bursa, left hip
M71.059	Abscess of bursa, unspecified hip
M71.061	Abscess of bursa, right knee
M71.062	Abscess of bursa, left knee
M71.069	Abscess of bursa, unspecified knee
M71.071	Abscess of bursa, right ankle and foot
M71.072	Abscess of bursa, left ankle and foot
M71.079	Abscess of bursa, unspecified ankle and foot
M71.08	Abscess of bursa, other site
M71.09	Abscess of bursa, multiple sites
M71.10	Other infective bursitis, unspecified site
M71.111	Other infective bursitis, right shoulder
M71.112	Other infective bursitis, left shoulder
M71.119	Other infective bursitis, unspecified shoulder
M71.121	Other infective bursitis, right elbow
M71.122	Other infective bursitis, left elbow
M71.129	Other infective bursitis, unspecified elbow
M71.131	Other infective bursitis, right wrist
M71.132	Other infective bursitis, left wrist
M71.139	Other infective bursitis, unspecified wrist

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Code	Description
M71.141	Other infective bursitis, right hand
M71.142	Other infective bursitis, left hand
M71.149	Other infective bursitis, unspecified hand
M71.151	Other infective bursitis, right hip
M71.152	Other infective bursitis, left hip
M71.159	Other infective bursitis, unspecified hip
M71.161	Other infective bursitis, right knee
M71.162	Other infective bursitis, left knee
M71.169	Other infective bursitis, unspecified knee
M71.171	Other infective bursitis, right ankle and foot
M71.172	Other infective bursitis, left ankle and foot
M71.179	Other infective bursitis, unspecified ankle and foot
M71.18	Other infective bursitis, other site
M71.19	Other infective bursitis, multiple sites
M71.20	Synovial cyst of popliteal space [Baker], unspecified knee
M71.21	Synovial cyst of popliteal space [Baker], right knee
M71.22	Synovial cyst of popliteal space [Baker], left knee
M71.30	Other bursal cyst, unspecified site
M71.311	Other bursal cyst, right shoulder
M71.312	Other bursal cyst, left shoulder
M71.319	Other bursal cyst, unspecified shoulder
M71.321	Other bursal cyst, right elbow
M71.322	Other bursal cyst, left elbow
M71.329	Other bursal cyst, unspecified elbow
M71.331	Other bursal cyst, right wrist
M71.332	Other bursal cyst, left wrist
M71.339	Other bursal cyst, unspecified wrist
M71.341	Other bursal cyst, right hand
M71.342	Other bursal cyst, left hand
M71.349	Other bursal cyst, unspecified hand

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Code	Description
M71.351	Other bursal cyst, right hip
M71.352	Other bursal cyst, left hip
M71.359	Other bursal cyst, unspecified hip
M71.371	Other bursal cyst, right ankle and foot
M71.372	Other bursal cyst, left ankle and foot
M71.379	Other bursal cyst, unspecified ankle and foot
M71.38	Other bursal cyst, other site
M71.39	Other bursal cyst, multiple sites
M71.40	Calcium deposit in bursa, unspecified site
M71.421	Calcium deposit in bursa, right elbow
M71.422	Calcium deposit in bursa, left elbow
M71.429	Calcium deposit in bursa, unspecified elbow
M71.431	Calcium deposit in bursa, right wrist
M71.432	Calcium deposit in bursa, left wrist
M71.439	Calcium deposit in bursa, unspecified wrist
M71.441	Calcium deposit in bursa, right hand
M71.442	Calcium deposit in bursa, left hand
M71.449	Calcium deposit in bursa, unspecified hand
M71.451	Calcium deposit in bursa, right hip
M71.452	Calcium deposit in bursa, left hip
M71.459	Calcium deposit in bursa, unspecified hip
M71.461	Calcium deposit in bursa, right knee
M71.462	Calcium deposit in bursa, left knee
M71.469	Calcium deposit in bursa, unspecified knee
M71.471	Calcium deposit in bursa, right ankle and foot
M71.472	Calcium deposit in bursa, left ankle and foot
M71.479	Calcium deposit in bursa, unspecified ankle and foot
M71.48	Calcium deposit in bursa, other site
M71.49	Calcium deposit in bursa, multiple sites
M71.50	Other bursitis, not elsewhere classified, unspecified site



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Code	Description
M71.521	Other bursitis, not elsewhere classified, right elbow
M71.522	Other bursitis, not elsewhere classified, left elbow
M71.529	Other bursitis, not elsewhere classified, unspecified elbow
M71.531	Other bursitis, not elsewhere classified, right wrist
M71.532	Other bursitis, not elsewhere classified, left wrist
M71.539	Other bursitis, not elsewhere classified, unspecified wrist
M71.541	Other bursitis, not elsewhere classified, right hand
M71.542	Other bursitis, not elsewhere classified, left hand
M71.549	Other bursitis, not elsewhere classified, unspecified hand
M71.551	Other bursitis, not elsewhere classified, right hip
M71.552	Other bursitis, not elsewhere classified, left hip
M71.559	Other bursitis, not elsewhere classified, unspecified hip
M71.561	Other bursitis, not elsewhere classified, right knee
M71.562	Other bursitis, not elsewhere classified, left knee
M71.569	Other bursitis, not elsewhere classified, unspecified knee
M71.571	Other bursitis, not elsewhere classified, right ankle and foot
M71.572	Other bursitis, not elsewhere classified, left ankle and foot
M71.579	Other bursitis, not elsewhere classified, unspecified ankle and foot
M71.58	Other bursitis, not elsewhere classified, other site
M71.80	Other specified bursopathies, unspecified site
M71.811	Other specified bursopathies, right shoulder
M71.812	Other specified bursopathies, left shoulder
M71.819	Other specified bursopathies, unspecified shoulder
M71.821	Other specified bursopathies, right elbow
M71.822	Other specified bursopathies, left elbow
M71.829	Other specified bursopathies, unspecified elbow
M71.831	Other specified bursopathies, right wrist
M71.832	Other specified bursopathies, left wrist
M71.839	Other specified bursopathies, unspecified wrist
M71.841	Other specified bursopathies, right hand



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Code	Description
M71.842	Other specified bursopathies, left hand
M71.849	Other specified bursopathies, unspecified hand
M71.851	Other specified bursopathies, right hip
M71.852	Other specified bursopathies, left hip
M71.859	Other specified bursopathies, unspecified hip
M71.861	Other specified bursopathies, right knee
M71.862	Other specified bursopathies, left knee
M71.869	Other specified bursopathies, unspecified knee
M71.871	Other specified bursopathies, right ankle and foot
M71.872	Other specified bursopathies, left ankle and foot
M71.879	Other specified bursopathies, unspecified ankle and foot
M71.88	Other specified bursopathies, other site
M71.89	Other specified bursopathies, multiple sites
M71.9	Bursopathy, unspecified
M72.0	Palmar fascial fibromatosis [Dupuytren]
M72.1	Knuckle pads
M72.2	Plantar fascial fibromatosis
M72.4	Pseudosarcomatous fibromatosis
M72.9	Fibroblastic disorder, unspecified
M75.00	Adhesive capsulitis of unspecified shoulder
M75.01	Adhesive capsulitis of right shoulder
M75.02	Adhesive capsulitis of left shoulder
M75.100	Unspecified rotator cuff tear or rupture of unspecified shoulder, not specified as traumatic
M75.101	Unspecified rotator cuff tear or rupture of right shoulder, not specified as traumatic
M75.102	Unspecified rotator cuff tear or rupture of left shoulder, not specified as traumatic
M75.110	Incomplete rotator cuff tear or rupture of unspecified shoulder, not specified as traumatic
M75.111	Incomplete rotator cuff tear or rupture of right shoulder, not specified as traumatic
M75.112	Incomplete rotator cuff tear or rupture of left shoulder, not specified as traumatic
M75.120	Complete rotator cuff tear or rupture of unspecified shoulder, not specified as traumatic
M75.121	Complete rotator cuff tear or rupture of right shoulder, not specified as traumatic

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Code	Description
M75.122	Complete rotator cuff tear or rupture of left shoulder, not specified as traumatic
M75.20	Bicipital tendinitis, unspecified shoulder
M75.21	Bicipital tendinitis, right shoulder
M75.22	Bicipital tendinitis, left shoulder
M75.30	Calcific tendinitis of unspecified shoulder
M75.31	Calcific tendinitis of right shoulder
M75.32	Calcific tendinitis of left shoulder
M75.40	Impingement syndrome of unspecified shoulder
M75.41	Impingement syndrome of right shoulder
M75.42	Impingement syndrome of left shoulder
M75.50	Bursitis of unspecified shoulder
M75.51	Bursitis of right shoulder
M75.52	Bursitis of left shoulder
M75.80	Other shoulder lesions, unspecified shoulder
M75.81	Other shoulder lesions, right shoulder
M75.82	Other shoulder lesions, left shoulder
M75.90	Shoulder lesion, unspecified, unspecified shoulder
M75.91	Shoulder lesion, unspecified, right shoulder
M75.92	Shoulder lesion, unspecified, left shoulder
M76.00	Gluteal tendinitis, unspecified hip
M76.01	Gluteal tendinitis, right hip
M76.02	Gluteal tendinitis, left hip
M76.10	Psoas tendinitis, unspecified hip
M76.11	Psoas tendinitis, right hip
M76.12	Psoas tendinitis, left hip
M76.20	Iliac crest spur, unspecified hip
M76.21	Iliac crest spur, right hip
M76.22	Iliac crest spur, left hip
M76.30	Iliotibial band syndrome, unspecified leg
M76.31	Iliotibial band syndrome, right leg

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Code	Description
M76.32	Iliotibial band syndrome, left leg
M76.40	Tibial collateral bursitis [Pellegrini-Stieda], unspecified leg
M76.41	Tibial collateral bursitis [Pellegrini-Stieda], right leg
M76.42	Tibial collateral bursitis [Pellegrini-Stieda], left leg
M76.50	Patellar tendinitis, unspecified knee
M76.51	Patellar tendinitis, right knee
M76.52	Patellar tendinitis, left knee
M76.60	Achilles tendinitis, unspecified leg
M76.61	Achilles tendinitis, right leg
M76.62	Achilles tendinitis, left leg
M76.70	Peroneal tendinitis, unspecified leg
M76.71	Peroneal tendinitis, right leg
M76.72	Peroneal tendinitis, left leg
M76.811	Anterior tibial syndrome, right leg
M76.812	Anterior tibial syndrome, left leg
M76.819	Anterior tibial syndrome, unspecified leg
M76.821	Posterior tibial tendinitis, right leg
M76.822	Posterior tibial tendinitis, left leg
M76.829	Posterior tibial tendinitis, unspecified leg
M76.891	Other specified enthesopathies of right lower limb, excluding foot
M76.892	Other specified enthesopathies of left lower limb, excluding foot
M76.899	Other specified enthesopathies of unspecified lower limb, excluding foot
M76.9	Unspecified enthesopathy, lower limb, excluding foot
M77.00	Medial epicondylitis, unspecified elbow
M77.01	Medial epicondylitis, right elbow
M77.02	Medial epicondylitis, left elbow
M77.10	Lateral epicondylitis, unspecified elbow
M77.11	Lateral epicondylitis, right elbow
M77.12	Lateral epicondylitis, left elbow
M77.20	Periarthritis, unspecified wrist

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Code	Description
M77.21	Periarthritis, right wrist
M77.22	Periarthritis, left wrist
M77.30	Calcaneal spur, unspecified foot
M77.31	Calcaneal spur, right foot
M77.32	Calcaneal spur, left foot
M77.40	Metatarsalgia, unspecified foot
M77.41	Metatarsalgia, right foot
M77.42	Metatarsalgia, left foot
M77.50	Other enthesopathy of unspecified foot
M77.51	Other enthesopathy of right foot
M77.52	Other enthesopathy of left foot
M77.8	Other enthesopathies, not elsewhere classified
M77.9	Enthesopathy, unspecified
M80.00XD	Age-related osteoporosis with current pathological fracture, unspecified site, subsequent encounter for fracture with routine healing
M80.00XG	Age-related osteoporosis with current pathological fracture, unspecified site, subsequent encounter for fracture with delayed healing
M80.00XS	Age-related osteoporosis with current pathological fracture, unspecified site, sequela
M80.011D	Age-related osteoporosis with current pathological fracture, right shoulder, subsequent encounter for fracture with routine healing
M80.011G	Age-related osteoporosis with current pathological fracture, right shoulder, subsequent encounter for fracture with delayed healing
M80.011S	Age-related osteoporosis with current pathological fracture, right shoulder, sequela
M80.012D	Age-related osteoporosis with current pathological fracture, left shoulder, subsequent encounter for fracture with routine healing
M80.012G	Age-related osteoporosis with current pathological fracture, left shoulder, subsequent encounter for fracture with delayed healing
M80.012S	Age-related osteoporosis with current pathological fracture, left shoulder, sequela
M80.019D	Age-related osteoporosis with current pathological fracture, unspecified shoulder, subsequent encounter for fracture with routine healing
M80.019G	Age-related osteoporosis with current pathological fracture, unspecified shoulder, subsequent encounter for fracture with delayed healing
M80.019S	Age-related osteoporosis with current pathological fracture, unspecified shoulder, sequela

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Code	Description
M80.021D	Age-related osteoporosis with current pathological fracture, right humerus, subsequent encounter for fracture with routine healing
M80.021G	Age-related osteoporosis with current pathological fracture, right humerus, subsequent encounter for fracture with delayed healing
M80.021S	Age-related osteoporosis with current pathological fracture, right humerus, sequela
M80.022D	Age-related osteoporosis with current pathological fracture, left humerus, subsequent encounter for fracture with routine healing
M80.022G	Age-related osteoporosis with current pathological fracture, left humerus, subsequent encounter for fracture with delayed healing
M80.022S	Age-related osteoporosis with current pathological fracture, left humerus, sequela
M80.029D	Age-related osteoporosis with current pathological fracture, unspecified humerus, subsequent encounter for fracture with routine healing
M80.029G	Age-related osteoporosis with current pathological fracture, unspecified humerus, subsequent encounter for fracture with delayed healing
M80.029S	Age-related osteoporosis with current pathological fracture, unspecified humerus, sequela
M80.031D	Age-related osteoporosis with current pathological fracture, right forearm, subsequent encounter for fracture with routine healing
M80.031G	Age-related osteoporosis with current pathological fracture, right forearm, subsequent encounter for fracture with delayed healing
M80.031S	Age-related osteoporosis with current pathological fracture, right forearm, sequela
M80.032D	Age-related osteoporosis with current pathological fracture, left forearm, subsequent encounter for fracture with routine healing
M80.032G	Age-related osteoporosis with current pathological fracture, left forearm, subsequent encounter for fracture with delayed healing
M80.032S	Age-related osteoporosis with current pathological fracture, left forearm, sequela
M80.039D	Age-related osteoporosis with current pathological fracture, unspecified forearm, subsequent encounter for fracture with routine healing
M80.039G	Age-related osteoporosis with current pathological fracture, unspecified forearm, subsequent encounter for fracture with delayed healing
M80.039S	Age-related osteoporosis with current pathological fracture, unspecified forearm, sequela
M80.041D	Age-related osteoporosis with current pathological fracture, right hand, subsequent encounter for fracture with routine healing
M80.041G	Age-related osteoporosis with current pathological fracture, right hand, subsequent encounter for fracture with delayed healing
M80.041S	Age-related osteoporosis with current pathological fracture, right hand, sequela

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Code	Description
M80.042D	Age-related osteoporosis with current pathological fracture, left hand, subsequent encounter for fracture with routine healing
M80.042G	Age-related osteoporosis with current pathological fracture, left hand, subsequent encounter for fracture with delayed healing
M80.042S	Age-related osteoporosis with current pathological fracture, left hand, sequela
M80.049D	Age-related osteoporosis with current pathological fracture, unspecified hand, subsequent encounter for fracture with routine healing
M80.049G	Age-related osteoporosis with current pathological fracture, unspecified hand, subsequent encounter for fracture with delayed healing
M80.049S	Age-related osteoporosis with current pathological fracture, unspecified hand, sequela
M80.051D	Age-related osteoporosis with current pathological fracture, right femur, subsequent encounter for fracture with routine healing
M80.051G	Age-related osteoporosis with current pathological fracture, right femur, subsequent encounter for fracture with delayed healing
M80.051S	Age-related osteoporosis with current pathological fracture, right femur, sequela
M80.052D	Age-related osteoporosis with current pathological fracture, left femur, subsequent encounter for fracture with routine healing
M80.052G	Age-related osteoporosis with current pathological fracture, left femur, subsequent encounter for fracture with delayed healing
M80.052S	Age-related osteoporosis with current pathological fracture, left femur, sequela
M80.059D	Age-related osteoporosis with current pathological fracture, unspecified femur, subsequent encounter for fracture with routine healing
M80.059G	Age-related osteoporosis with current pathological fracture, unspecified femur, subsequent encounter for fracture with delayed healing
M80.059S	Age-related osteoporosis with current pathological fracture, unspecified femur, sequela
M80.061D	Age-related osteoporosis with current pathological fracture, right lower leg, subsequent encounter for fracture with routine healing
M80.061G	Age-related osteoporosis with current pathological fracture, right lower leg, subsequent encounter for fracture with delayed healing
M80.061S	Age-related osteoporosis with current pathological fracture, right lower leg, sequela
M80.062D	Age-related osteoporosis with current pathological fracture, left lower leg, subsequent encounter for fracture with routine healing
M80.062G	Age-related osteoporosis with current pathological fracture, left lower leg, subsequent encounter for fracture with delayed healing
M80.062S	Age-related osteoporosis with current pathological fracture, left lower leg, sequela

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Code	Description
M80.069D	Age-related osteoporosis with current pathological fracture, unspecified lower leg, subsequent encounter for fracture with routine healing
M80.069G	Age-related osteoporosis with current pathological fracture, unspecified lower leg, subsequent encounter for fracture with delayed healing
M80.069S	Age-related osteoporosis with current pathological fracture, unspecified lower leg, sequela
M80.071D	Age-related osteoporosis with current pathological fracture, right ankle and foot, subsequent encounter for fracture with routine healing
M80.071G	Age-related osteoporosis with current pathological fracture, right ankle and foot, subsequent encounter for fracture with delayed healing
M80.071S	Age-related osteoporosis with current pathological fracture, right ankle and foot, sequela
M80.072D	Age-related osteoporosis with current pathological fracture, left ankle and foot, subsequent encounter for fracture with routine healing
M80.072G	Age-related osteoporosis with current pathological fracture, left ankle and foot, subsequent encounter for fracture with delayed healing
M80.072S	Age-related osteoporosis with current pathological fracture, left ankle and foot, sequela
M80.079D	Age-related osteoporosis with current pathological fracture, unspecified ankle and foot, subsequent encounter for fracture with routine healing
M80.079G	Age-related osteoporosis with current pathological fracture, unspecified ankle and foot, subsequent encounter for fracture with delayed healing
M80.079S	Age-related osteoporosis with current pathological fracture, unspecified ankle and foot, sequela
M80.08XD	Age-related osteoporosis with current pathological fracture, vertebra(e), subsequent encounter for fracture with routine healing
M80.08XG	Age-related osteoporosis with current pathological fracture, vertebra(e), subsequent encounter for fracture with delayed healing
M80.08XS	Age-related osteoporosis with current pathological fracture, vertebra(e), sequela
M80.80XD	Other osteoporosis with current pathological fracture, unspecified site, subsequent encounter for fracture with routine healing
M80.80XG	Other osteoporosis with current pathological fracture, unspecified site, subsequent encounter for fracture with delayed healing
M80.80XS	Other osteoporosis with current pathological fracture, unspecified site, sequela
M80.811D	Other osteoporosis with current pathological fracture, right shoulder, subsequent encounter for fracture with routine healing
M80.811G	Other osteoporosis with current pathological fracture, right shoulder, subsequent encounter for fracture with delayed healing



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Code	Description
M80.811S	Other osteoporosis with current pathological fracture, right shoulder, sequela
M80.812D	Other osteoporosis with current pathological fracture, left shoulder, subsequent encounter for fracture with routine healing
M80.812G	Other osteoporosis with current pathological fracture, left shoulder, subsequent encounter for fracture with delayed healing
M80.812S	Other osteoporosis with current pathological fracture, left shoulder, sequela
M80.819D	Other osteoporosis with current pathological fracture, unspecified shoulder, subsequent encounter for fracture with routine healing
M80.819G	Other osteoporosis with current pathological fracture, unspecified shoulder, subsequent encounter for fracture with delayed healing
M80.819S	Other osteoporosis with current pathological fracture, unspecified shoulder, sequela
M80.821D	Other osteoporosis with current pathological fracture, right humerus, subsequent encounter for fracture with routine healing
M80.821G	Other osteoporosis with current pathological fracture, right humerus, subsequent encounter for fracture with delayed healing
M80.821S	Other osteoporosis with current pathological fracture, right humerus, sequela
M80.822D	Other osteoporosis with current pathological fracture, left humerus, subsequent encounter for fracture with routine healing
M80.822G	Other osteoporosis with current pathological fracture, left humerus, subsequent encounter for fracture with delayed healing
M80.822S	Other osteoporosis with current pathological fracture, left humerus, sequela
M80.829D	Other osteoporosis with current pathological fracture, unspecified humerus, subsequent encounter for fracture with routine healing
M80.829G	Other osteoporosis with current pathological fracture, unspecified humerus, subsequent encounter for fracture with delayed healing
M80.829S	Other osteoporosis with current pathological fracture, unspecified humerus, sequela
M80.831D	Other osteoporosis with current pathological fracture, right forearm, subsequent encounter for fracture with routine healing
M80.831G	Other osteoporosis with current pathological fracture, right forearm, subsequent encounter for fracture with delayed healing
M80.831S	Other osteoporosis with current pathological fracture, right forearm, sequela
M80.832D	Other osteoporosis with current pathological fracture, left forearm, subsequent encounter for fracture with routine healing
M80.832G	Other osteoporosis with current pathological fracture, left forearm, subsequent encounter for fracture with delayed healing

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Code	Description
M80.832S	Other osteoporosis with current pathological fracture, left forearm, sequela
M80.839D	Other osteoporosis with current pathological fracture, unspecified forearm, subsequent encounter for fracture with routine healing
M80.839G	Other osteoporosis with current pathological fracture, unspecified forearm, subsequent encounter for fracture with delayed healing
M80.839S	Other osteoporosis with current pathological fracture, unspecified forearm, sequela
M80.841D	Other osteoporosis with current pathological fracture, right hand, subsequent encounter for fracture with routine healing
M80.841G	Other osteoporosis with current pathological fracture, right hand, subsequent encounter for fracture with delayed healing
M80.841S	Other osteoporosis with current pathological fracture, right hand, sequela
M80.842D	Other osteoporosis with current pathological fracture, left hand, subsequent encounter for fracture with routine healing
M80.842G	Other osteoporosis with current pathological fracture, left hand, subsequent encounter for fracture with delayed healing
M80.842S	Other osteoporosis with current pathological fracture, left hand, sequela
M80.849D	Other osteoporosis with current pathological fracture, unspecified hand, subsequent encounter for fracture with routine healing
M80.849G	Other osteoporosis with current pathological fracture, unspecified hand, subsequent encounter for fracture with delayed healing
M80.849S	Other osteoporosis with current pathological fracture, unspecified hand, sequela
M80.851D	Other osteoporosis with current pathological fracture, right femur, subsequent encounter for fracture with routine healing
M80.851G	Other osteoporosis with current pathological fracture, right femur, subsequent encounter for fracture with delayed healing
M80.851S	Other osteoporosis with current pathological fracture, right femur, sequela
M80.852D	Other osteoporosis with current pathological fracture, left femur, subsequent encounter for fracture with routine healing
M80.852G	Other osteoporosis with current pathological fracture, left femur, subsequent encounter for fracture with delayed healing
M80.852S	Other osteoporosis with current pathological fracture, left femur, sequela
M80.859D	Other osteoporosis with current pathological fracture, unspecified femur, subsequent encounter for fracture with routine healing
M80.859G	Other osteoporosis with current pathological fracture, unspecified femur, subsequent encounter for fracture with delayed healing

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Code	Description
M80.859S	Other osteoporosis with current pathological fracture, unspecified femur, sequela
M80.861D	Other osteoporosis with current pathological fracture, right lower leg, subsequent encounter for fracture with routine healing
M80.861G	Other osteoporosis with current pathological fracture, right lower leg, subsequent encounter for fracture with delayed healing
M80.861S	Other osteoporosis with current pathological fracture, right lower leg, sequela
M80.862D	Other osteoporosis with current pathological fracture, left lower leg, subsequent encounter for fracture with routine healing
M80.862G	Other osteoporosis with current pathological fracture, left lower leg, subsequent encounter for fracture with delayed healing
M80.862S	Other osteoporosis with current pathological fracture, left lower leg, sequela
M80.869D	Other osteoporosis with current pathological fracture, unspecified lower leg, subsequent encounter for fracture with routine healing
M80.869G	Other osteoporosis with current pathological fracture, unspecified lower leg, subsequent encounter for fracture with delayed healing
M80.869S	Other osteoporosis with current pathological fracture, unspecified lower leg, sequela
M80.871D	Other osteoporosis with current pathological fracture, right ankle and foot, subsequent encounter for fracture with routine healing
M80.871G	Other osteoporosis with current pathological fracture, right ankle and foot, subsequent encounter for fracture with delayed healing
M80.871S	Other osteoporosis with current pathological fracture, right ankle and foot, sequela
M80.872D	Other osteoporosis with current pathological fracture, left ankle and foot, subsequent encounter for fracture with routine healing
M80.872G	Other osteoporosis with current pathological fracture, left ankle and foot, subsequent encounter for fracture with delayed healing
M80.872S	Other osteoporosis with current pathological fracture, left ankle and foot, sequela
M80.879D	Other osteoporosis with current pathological fracture, unspecified ankle and foot, subsequent encounter for fracture with routine healing
M80.879G	Other osteoporosis with current pathological fracture, unspecified ankle and foot, subsequent encounter for fracture with delayed healing
M80.879S	Other osteoporosis with current pathological fracture, unspecified ankle and foot, sequela
M80.88XD	Other osteoporosis with current pathological fracture, vertebra(e), subsequent encounter for fracture with routine healing
M80.88XG	Other osteoporosis with current pathological fracture, vertebra(e), subsequent encounter for fracture with delayed healing



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Code	Description
M80.88XS	Other osteoporosis with current pathological fracture, vertebra(e), sequela
M81.0	Age-related osteoporosis without current pathological fracture
M81.6	Localized osteoporosis [Lequesne]
M81.8	Other osteoporosis without current pathological fracture
M84.30XD	Stress fracture, unspecified site, subsequent encounter for fracture with routine healing
M84.30XG	Stress fracture, unspecified site, subsequent encounter for fracture with delayed healing
M84.30XS	Stress fracture, unspecified site, sequela
M84.311D	Stress fracture, right shoulder, subsequent encounter for fracture with routine healing
M84.311G	Stress fracture, right shoulder, subsequent encounter for fracture with delayed healing
M84.311S	Stress fracture, right shoulder, sequela
M84.312D	Stress fracture, left shoulder, subsequent encounter for fracture with routine healing
M84.312G	Stress fracture, left shoulder, subsequent encounter for fracture with delayed healing
M84.312S	Stress fracture, left shoulder, sequela
M84.319D	Stress fracture, unspecified shoulder, subsequent encounter for fracture with routine healing
M84.319G	Stress fracture, unspecified shoulder, subsequent encounter for fracture with delayed healing
M84.319S	Stress fracture, unspecified shoulder, sequela
M84.321D	Stress fracture, right humerus, subsequent encounter for fracture with routine healing
M84.321G	Stress fracture, right humerus, subsequent encounter for fracture with delayed healing
M84.321S	Stress fracture, right humerus, sequela
M84.322D	Stress fracture, left humerus, subsequent encounter for fracture with routine healing
M84.322G	Stress fracture, left humerus, subsequent encounter for fracture with delayed healing
M84.322S	Stress fracture, left humerus, sequela
M84.329D	Stress fracture, unspecified humerus, subsequent encounter for fracture with routine healing
M84.329G	Stress fracture, unspecified humerus, subsequent encounter for fracture with delayed healing
M84.329S	Stress fracture, unspecified humerus, sequela
M84.331D	Stress fracture, right ulna, subsequent encounter for fracture with routine healing
M84.331G	Stress fracture, right ulna, subsequent encounter for fracture with delayed healing
M84.331S	Stress fracture, right ulna, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.332D	Stress fracture, left ulna, subsequent encounter for fracture with routine healing
M84.332G	Stress fracture, left ulna, subsequent encounter for fracture with delayed healing
M84.332S	Stress fracture, left ulna, sequela
M84.333D	Stress fracture, right radius, subsequent encounter for fracture with routine healing
M84.333G	Stress fracture, right radius, subsequent encounter for fracture with delayed healing
M84.333S	Stress fracture, right radius, sequela
M84.334D	Stress fracture, left radius, subsequent encounter for fracture with routine healing
M84.334G	Stress fracture, left radius, subsequent encounter for fracture with delayed healing
M84.334S	Stress fracture, left radius, sequela
M84.339D	Stress fracture, unspecified ulna and radius, subsequent encounter for fracture with routine healing
M84.339G	Stress fracture, unspecified ulna and radius, subsequent encounter for fracture with delayed healing
M84.339S	Stress fracture, unspecified ulna and radius, sequela
M84.341D	Stress fracture, right hand, subsequent encounter for fracture with routine healing
M84.341G	Stress fracture, right hand, subsequent encounter for fracture with delayed healing
M84.341S	Stress fracture, right hand, sequela
M84.342D	Stress fracture, left hand, subsequent encounter for fracture with routine healing
M84.342G	Stress fracture, left hand, subsequent encounter for fracture with delayed healing
M84.342S	Stress fracture, left hand, sequela
M84.343D	Stress fracture, unspecified hand, subsequent encounter for fracture with routine healing
M84.343G	Stress fracture, unspecified hand, subsequent encounter for fracture with delayed healing
M84.343S	Stress fracture, unspecified hand, sequela
M84.344D	Stress fracture, right finger(s), subsequent encounter for fracture with routine healing
M84.344G	Stress fracture, right finger(s), subsequent encounter for fracture with delayed healing
M84.344S	Stress fracture, right finger(s), sequela
M84.345D	Stress fracture, left finger(s), subsequent encounter for fracture with routine healing
M84.345G	Stress fracture, left finger(s), subsequent encounter for fracture with delayed healing
M84.345S	Stress fracture, left finger(s), sequela
M84.346D	Stress fracture, unspecified finger(s), subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
M84.346G	Stress fracture, unspecified finger(s), subsequent encounter for fracture with delayed healing
M84.346S	Stress fracture, unspecified finger(s), sequela
M84.350D	Stress fracture, pelvis, subsequent encounter for fracture with routine healing
M84.350G	Stress fracture, pelvis, subsequent encounter for fracture with delayed healing
M84.350S	Stress fracture, pelvis, sequela
M84.351D	Stress fracture, right femur, subsequent encounter for fracture with routine healing
M84.351G	Stress fracture, right femur, subsequent encounter for fracture with delayed healing
M84.351S	Stress fracture, right femur, sequela
M84.352D	Stress fracture, left femur, subsequent encounter for fracture with routine healing
M84.352G	Stress fracture, left femur, subsequent encounter for fracture with delayed healing
M84.352S	Stress fracture, left femur, sequela
M84.353D	Stress fracture, unspecified femur, subsequent encounter for fracture with routine healing
M84.353G	Stress fracture, unspecified femur, subsequent encounter for fracture with delayed healing
M84.353S	Stress fracture, unspecified femur, sequela
M84.359D	Stress fracture, hip, unspecified, subsequent encounter for fracture with routine healing
M84.359G	Stress fracture, hip, unspecified, subsequent encounter for fracture with delayed healing
M84.359S	Stress fracture, hip, unspecified, sequela
M84.361D	Stress fracture, right tibia, subsequent encounter for fracture with routine healing
M84.361G	Stress fracture, right tibia, subsequent encounter for fracture with delayed healing
M84.361S	Stress fracture, right tibia, sequela
M84.362D	Stress fracture, left tibia, subsequent encounter for fracture with routine healing
M84.362G	Stress fracture, left tibia, subsequent encounter for fracture with delayed healing
M84.362S	Stress fracture, left tibia, sequela
M84.363D	Stress fracture, right fibula, subsequent encounter for fracture with routine healing
M84.363G	Stress fracture, right fibula, subsequent encounter for fracture with delayed healing
M84.363S	Stress fracture, right fibula, sequela
M84.364D	Stress fracture, left fibula, subsequent encounter for fracture with routine healing
M84.364G	Stress fracture, left fibula, subsequent encounter for fracture with delayed healing
M84.364S	Stress fracture, left fibula, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.369D	Stress fracture, unspecified tibia and fibula, subsequent encounter for fracture with routine healing
M84.369G	Stress fracture, unspecified tibia and fibula, subsequent encounter for fracture with delayed healing
M84.369S	Stress fracture, unspecified tibia and fibula, sequela
M84.371D	Stress fracture, right ankle, subsequent encounter for fracture with routine healing
M84.371G	Stress fracture, right ankle, subsequent encounter for fracture with delayed healing
M84.371S	Stress fracture, right ankle, sequela
M84.372D	Stress fracture, left ankle, subsequent encounter for fracture with routine healing
M84.372G	Stress fracture, left ankle, subsequent encounter for fracture with delayed healing
M84.372S	Stress fracture, left ankle, sequela
M84.373D	Stress fracture, unspecified ankle, subsequent encounter for fracture with routine healing
M84.373G	Stress fracture, unspecified ankle, subsequent encounter for fracture with delayed healing
M84.373S	Stress fracture, unspecified ankle, sequela
M84.374D	Stress fracture, right foot, subsequent encounter for fracture with routine healing
M84.374G	Stress fracture, right foot, subsequent encounter for fracture with delayed healing
M84.374S	Stress fracture, right foot, sequela
M84.375D	Stress fracture, left foot, subsequent encounter for fracture with routine healing
M84.375G	Stress fracture, left foot, subsequent encounter for fracture with delayed healing
M84.375S	Stress fracture, left foot, sequela
M84.376D	Stress fracture, unspecified foot, subsequent encounter for fracture with routine healing
M84.376G	Stress fracture, unspecified foot, subsequent encounter for fracture with delayed healing
M84.376S	Stress fracture, unspecified foot, sequela
M84.377D	Stress fracture, right toe(s), subsequent encounter for fracture with routine healing
M84.377G	Stress fracture, right toe(s), subsequent encounter for fracture with delayed healing
M84.377S	Stress fracture, right toe(s), sequela
M84.378D	Stress fracture, left toe(s), subsequent encounter for fracture with routine healing
M84.378G	Stress fracture, left toe(s), subsequent encounter for fracture with delayed healing
M84.378S	Stress fracture, left toe(s), sequela
M84.379D	Stress fracture, unspecified toe(s), subsequent encounter for fracture with routine healing
M84.379G	Stress fracture, unspecified toe(s), subsequent encounter for fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
M84.379S	Stress fracture, unspecified toe(s), sequela
M84.38XD	Stress fracture, other site, subsequent encounter for fracture with routine healing
M84.38XG	Stress fracture, other site, subsequent encounter for fracture with delayed healing
M84.38XS	Stress fracture, other site, sequela
M84.40XD	Pathological fracture, unspecified site, subsequent encounter for fracture with routine healing
M84.40XG	Pathological fracture, unspecified site, subsequent encounter for fracture with delayed healing
M84.40XS	Pathological fracture, unspecified site, sequela
M84.411D	Pathological fracture, right shoulder, subsequent encounter for fracture with routine healing
M84.411G	Pathological fracture, right shoulder, subsequent encounter for fracture with delayed healing
M84.411S	Pathological fracture, right shoulder, sequela
M84.412D	Pathological fracture, left shoulder, subsequent encounter for fracture with routine healing
M84.412G	Pathological fracture, left shoulder, subsequent encounter for fracture with delayed healing
M84.412S	Pathological fracture, left shoulder, sequela
M84.419D	Pathological fracture, unspecified shoulder, subsequent encounter for fracture with routine healing
M84.419G	Pathological fracture, unspecified shoulder, subsequent encounter for fracture with delayed healing
M84.419S	Pathological fracture, unspecified shoulder, sequela
M84.421D	Pathological fracture, right humerus, subsequent encounter for fracture with routine healing
M84.421G	Pathological fracture, right humerus, subsequent encounter for fracture with delayed healing
M84.421S	Pathological fracture, right humerus, sequela
M84.422D	Pathological fracture, left humerus, subsequent encounter for fracture with routine healing
M84.422G	Pathological fracture, left humerus, subsequent encounter for fracture with delayed healing
M84.422S	Pathological fracture, left humerus, sequela
M84.429D	Pathological fracture, unspecified humerus, subsequent encounter for fracture with routine healing
M84.429G	Pathological fracture, unspecified humerus, subsequent encounter for fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.429S	Pathological fracture, unspecified humerus, sequela
M84.431D	Pathological fracture, right ulna, subsequent encounter for fracture with routine healing
M84.431G	Pathological fracture, right ulna, subsequent encounter for fracture with delayed healing
M84.431S	Pathological fracture, right ulna, sequela
M84.432D	Pathological fracture, left ulna, subsequent encounter for fracture with routine healing
M84.432G	Pathological fracture, left ulna, subsequent encounter for fracture with delayed healing
M84.432S	Pathological fracture, left ulna, sequela
M84.433D	Pathological fracture, right radius, subsequent encounter for fracture with routine healing
M84.433G	Pathological fracture, right radius, subsequent encounter for fracture with delayed healing
M84.433S	Pathological fracture, right radius, sequela
M84.434D	Pathological fracture, left radius, subsequent encounter for fracture with routine healing
M84.434G	Pathological fracture, left radius, subsequent encounter for fracture with delayed healing
M84.434S	Pathological fracture, left radius, sequela
M84.439D	Pathological fracture, unspecified ulna and radius, subsequent encounter for fracture with routine healing
M84.439G	Pathological fracture, unspecified ulna and radius, subsequent encounter for fracture with delayed healing
M84.439S	Pathological fracture, unspecified ulna and radius, sequela
M84.441D	Pathological fracture, right hand, subsequent encounter for fracture with routine healing
M84.441G	Pathological fracture, right hand, subsequent encounter for fracture with delayed healing
M84.441S	Pathological fracture, right hand, sequela
M84.442D	Pathological fracture, left hand, subsequent encounter for fracture with routine healing
M84.442G	Pathological fracture, left hand, subsequent encounter for fracture with delayed healing
M84.442S	Pathological fracture, left hand, sequela
M84.443D	Pathological fracture, unspecified hand, subsequent encounter for fracture with routine healing
M84.443G	Pathological fracture, unspecified hand, subsequent encounter for fracture with delayed healing
M84.443S	Pathological fracture, unspecified hand, sequela
M84.444D	Pathological fracture, right finger(s), subsequent encounter for fracture with routine healing
M84.444G	Pathological fracture, right finger(s), subsequent encounter for fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.444S	Pathological fracture, right finger(s), sequela
M84.445D	Pathological fracture, left finger(s), subsequent encounter for fracture with routine healing
M84.445G	Pathological fracture, left finger(s), subsequent encounter for fracture with delayed healing
M84.445S	Pathological fracture, left finger(s), sequela
M84.446D	Pathological fracture, unspecified finger(s), subsequent encounter for fracture with routine healing
M84.446G	Pathological fracture, unspecified finger(s), subsequent encounter for fracture with delayed healing
M84.446S	Pathological fracture, unspecified finger(s), sequela
M84.451D	Pathological fracture, right femur, subsequent encounter for fracture with routine healing
M84.451G	Pathological fracture, right femur, subsequent encounter for fracture with delayed healing
M84.451S	Pathological fracture, right femur, sequela
M84.452D	Pathological fracture, left femur, subsequent encounter for fracture with routine healing
M84.452G	Pathological fracture, left femur, subsequent encounter for fracture with delayed healing
M84.452S	Pathological fracture, left femur, sequela
M84.453D	Pathological fracture, unspecified femur, subsequent encounter for fracture with routine healing
M84.453G	Pathological fracture, unspecified femur, subsequent encounter for fracture with delayed healing
M84.453S	Pathological fracture, unspecified femur, sequela
M84.454D	Pathological fracture, pelvis, subsequent encounter for fracture with routine healing
M84.454G	Pathological fracture, pelvis, subsequent encounter for fracture with delayed healing
M84.454S	Pathological fracture, pelvis, sequela
M84.459D	Pathological fracture, hip, unspecified, subsequent encounter for fracture with routine healing
M84.459G	Pathological fracture, hip, unspecified, subsequent encounter for fracture with delayed healing
M84.459S	Pathological fracture, hip, unspecified, sequela
M84.461D	Pathological fracture, right tibia, subsequent encounter for fracture with routine healing
M84.461G	Pathological fracture, right tibia, subsequent encounter for fracture with delayed healing
M84.461S	Pathological fracture, right tibia, sequela
M84.462D	Pathological fracture, left tibia, subsequent encounter for fracture with routine healing



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Code	Description
M84.462G	Pathological fracture, left tibia, subsequent encounter for fracture with delayed healing
M84.462S	Pathological fracture, left tibia, sequela
M84.463D	Pathological fracture, right fibula, subsequent encounter for fracture with routine healing
M84.463G	Pathological fracture, right fibula, subsequent encounter for fracture with delayed healing
M84.463S	Pathological fracture, right fibula, sequela
M84.464D	Pathological fracture, left fibula, subsequent encounter for fracture with routine healing
M84.464G	Pathological fracture, left fibula, subsequent encounter for fracture with delayed healing
M84.464S	Pathological fracture, left fibula, sequela
M84.469D	Pathological fracture, unspecified tibia and fibula, subsequent encounter for fracture with routine healing
M84.469G	Pathological fracture, unspecified tibia and fibula, subsequent encounter for fracture with delayed healing
M84.469S	Pathological fracture, unspecified tibia and fibula, sequela
M84.471D	Pathological fracture, right ankle, subsequent encounter for fracture with routine healing
M84.471G	Pathological fracture, right ankle, subsequent encounter for fracture with delayed healing
M84.471S	Pathological fracture, right ankle, sequela
M84.472D	Pathological fracture, left ankle, subsequent encounter for fracture with routine healing
M84.472G	Pathological fracture, left ankle, subsequent encounter for fracture with delayed healing
M84.472S	Pathological fracture, left ankle, sequela
M84.473D	Pathological fracture, unspecified ankle, subsequent encounter for fracture with routine healing
M84.473G	Pathological fracture, unspecified ankle, subsequent encounter for fracture with delayed healing
M84.473S	Pathological fracture, unspecified ankle, sequela
M84.474D	Pathological fracture, right foot, subsequent encounter for fracture with routine healing
M84.474G	Pathological fracture, right foot, subsequent encounter for fracture with delayed healing
M84.474S	Pathological fracture, right foot, sequela
M84.475D	Pathological fracture, left foot, subsequent encounter for fracture with routine healing
M84.475G	Pathological fracture, left foot, subsequent encounter for fracture with delayed healing
M84.475S	Pathological fracture, left foot, sequela
M84.476D	Pathological fracture, unspecified foot, subsequent encounter for fracture with routine healing



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
M84.476G	Pathological fracture, unspecified foot, subsequent encounter for fracture with delayed healing
M84.476S	Pathological fracture, unspecified foot, sequela
M84.477D	Pathological fracture, right toe(s), subsequent encounter for fracture with routine healing
M84.477G	Pathological fracture, right toe(s), subsequent encounter for fracture with delayed healing
M84.477S	Pathological fracture, right toe(s), sequela
M84.478D	Pathological fracture, left toe(s), subsequent encounter for fracture with routine healing
M84.478G	Pathological fracture, left toe(s), subsequent encounter for fracture with delayed healing
M84.478S	Pathological fracture, left toe(s), sequela
M84.479D	Pathological fracture, unspecified toe(s), subsequent encounter for fracture with routine healing
M84.479G	Pathological fracture, unspecified toe(s), subsequent encounter for fracture with delayed healing
M84.479S	Pathological fracture, unspecified toe(s), sequela
M84.48XD	Pathological fracture, other site, subsequent encounter for fracture with routine healing
M84.48XG	Pathological fracture, other site, subsequent encounter for fracture with delayed healing
M84.48XS	Pathological fracture, other site, sequela
M84.50XD	Pathological fracture in neoplastic disease, unspecified site, subsequent encounter for fracture with routine healing
M84.50XG	Pathological fracture in neoplastic disease, unspecified site, subsequent encounter for fracture with delayed healing
M84.50XS	Pathological fracture in neoplastic disease, unspecified site, sequela
M84.511D	Pathological fracture in neoplastic disease, right shoulder, subsequent encounter for fracture with routine healing
M84.511G	Pathological fracture in neoplastic disease, right shoulder, subsequent encounter for fracture with delayed healing
M84.511S	Pathological fracture in neoplastic disease, right shoulder, sequela
M84.512D	Pathological fracture in neoplastic disease, left shoulder, subsequent encounter for fracture with routine healing
M84.512G	Pathological fracture in neoplastic disease, left shoulder, subsequent encounter for fracture with delayed healing
M84.512S	Pathological fracture in neoplastic disease, left shoulder, sequela
M84.519D	Pathological fracture in neoplastic disease, unspecified shoulder, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.519G	Pathological fracture in neoplastic disease, unspecified shoulder, subsequent encounter for fracture with delayed healing
M84.519S	Pathological fracture in neoplastic disease, unspecified shoulder, sequela
M84.521D	Pathological fracture in neoplastic disease, right humerus, subsequent encounter for fracture with routine healing
M84.521G	Pathological fracture in neoplastic disease, right humerus, subsequent encounter for fracture with delayed healing
M84.521S	Pathological fracture in neoplastic disease, right humerus, sequela
M84.522D	Pathological fracture in neoplastic disease, left humerus, subsequent encounter for fracture with routine healing
M84.522G	Pathological fracture in neoplastic disease, left humerus, subsequent encounter for fracture with delayed healing
M84.522S	Pathological fracture in neoplastic disease, left humerus, sequela
M84.529D	Pathological fracture in neoplastic disease, unspecified humerus, subsequent encounter for fracture with routine healing
M84.529G	Pathological fracture in neoplastic disease, unspecified humerus, subsequent encounter for fracture with delayed healing
M84.529S	Pathological fracture in neoplastic disease, unspecified humerus, sequela
M84.531D	Pathological fracture in neoplastic disease, right ulna, subsequent encounter for fracture with routine healing
M84.531G	Pathological fracture in neoplastic disease, right ulna, subsequent encounter for fracture with delayed healing
M84.531S	Pathological fracture in neoplastic disease, right ulna, sequela
M84.532D	Pathological fracture in neoplastic disease, left ulna, subsequent encounter for fracture with routine healing
M84.532G	Pathological fracture in neoplastic disease, left ulna, subsequent encounter for fracture with delayed healing
M84.532S	Pathological fracture in neoplastic disease, left ulna, sequela
M84.533D	Pathological fracture in neoplastic disease, right radius, subsequent encounter for fracture with routine healing
M84.533G	Pathological fracture in neoplastic disease, right radius, subsequent encounter for fracture with delayed healing
M84.533S	Pathological fracture in neoplastic disease, right radius, sequela
M84.534D	Pathological fracture in neoplastic disease, left radius, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.534G	Pathological fracture in neoplastic disease, left radius, subsequent encounter for fracture with delayed healing
M84.534S	Pathological fracture in neoplastic disease, left radius, sequela
M84.539D	Pathological fracture in neoplastic disease, unspecified ulna and radius, subsequent encounter for fracture with routine healing
M84.539G	Pathological fracture in neoplastic disease, unspecified ulna and radius, subsequent encounter for fracture with delayed healing
M84.539S	Pathological fracture in neoplastic disease, unspecified ulna and radius, sequela
M84.541D	Pathological fracture in neoplastic disease, right hand, subsequent encounter for fracture with routine healing
M84.541G	Pathological fracture in neoplastic disease, right hand, subsequent encounter for fracture with delayed healing
M84.541S	Pathological fracture in neoplastic disease, right hand, sequela
M84.542D	Pathological fracture in neoplastic disease, left hand, subsequent encounter for fracture with routine healing
M84.542G	Pathological fracture in neoplastic disease, left hand, subsequent encounter for fracture with delayed healing
M84.542S	Pathological fracture in neoplastic disease, left hand, sequela
M84.549D	Pathological fracture in neoplastic disease, unspecified hand, subsequent encounter for fracture with routine healing
M84.549G	Pathological fracture in neoplastic disease, unspecified hand, subsequent encounter for fracture with delayed healing
M84.549S	Pathological fracture in neoplastic disease, unspecified hand, sequela
M84.550D	Pathological fracture in neoplastic disease, pelvis, subsequent encounter for fracture with routine healing
M84.550G	Pathological fracture in neoplastic disease, pelvis, subsequent encounter for fracture with delayed healing
M84.550S	Pathological fracture in neoplastic disease, pelvis, sequela
M84.551D	Pathological fracture in neoplastic disease, right femur, subsequent encounter for fracture with routine healing
M84.551G	Pathological fracture in neoplastic disease, right femur, subsequent encounter for fracture with delayed healing
M84.551S	Pathological fracture in neoplastic disease, right femur, sequela
M84.552D	Pathological fracture in neoplastic disease, left femur, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.552G	Pathological fracture in neoplastic disease, left femur, subsequent encounter for fracture with delayed healing
M84.552S	Pathological fracture in neoplastic disease, left femur, sequela
M84.553D	Pathological fracture in neoplastic disease, unspecified femur, subsequent encounter for fracture with routine healing
M84.553G	Pathological fracture in neoplastic disease, unspecified femur, subsequent encounter for fracture with delayed healing
M84.553S	Pathological fracture in neoplastic disease, unspecified femur, sequela
M84.559D	Pathological fracture in neoplastic disease, hip, unspecified, subsequent encounter for fracture with routine healing
M84.559G	Pathological fracture in neoplastic disease, hip, unspecified, subsequent encounter for fracture with delayed healing
M84.559S	Pathological fracture in neoplastic disease, hip, unspecified, sequela
M84.561D	Pathological fracture in neoplastic disease, right tibia, subsequent encounter for fracture with routine healing
M84.561G	Pathological fracture in neoplastic disease, right tibia, subsequent encounter for fracture with delayed healing
M84.561S	Pathological fracture in neoplastic disease, right tibia, sequela
M84.562D	Pathological fracture in neoplastic disease, left tibia, subsequent encounter for fracture with routine healing
M84.562G	Pathological fracture in neoplastic disease, left tibia, subsequent encounter for fracture with delayed healing
M84.562S	Pathological fracture in neoplastic disease, left tibia, sequela
M84.563D	Pathological fracture in neoplastic disease, right fibula, subsequent encounter for fracture with routine healing
M84.563G	Pathological fracture in neoplastic disease, right fibula, subsequent encounter for fracture with delayed healing
M84.563S	Pathological fracture in neoplastic disease, right fibula, sequela
M84.564D	Pathological fracture in neoplastic disease, left fibula, subsequent encounter for fracture with routine healing
M84.564G	Pathological fracture in neoplastic disease, left fibula, subsequent encounter for fracture with delayed healing
M84.564S	Pathological fracture in neoplastic disease, left fibula, sequela
M84.569D	Pathological fracture in neoplastic disease, unspecified tibia and fibula, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.569G	Pathological fracture in neoplastic disease, unspecified tibia and fibula, subsequent encounter for fracture with delayed healing
M84.569S	Pathological fracture in neoplastic disease, unspecified tibia and fibula, sequela
M84.571D	Pathological fracture in neoplastic disease, right ankle, subsequent encounter for fracture with routine healing
M84.571G	Pathological fracture in neoplastic disease, right ankle, subsequent encounter for fracture with delayed healing
M84.571S	Pathological fracture in neoplastic disease, right ankle, sequela
M84.572D	Pathological fracture in neoplastic disease, left ankle, subsequent encounter for fracture with routine healing
M84.572G	Pathological fracture in neoplastic disease, left ankle, subsequent encounter for fracture with delayed healing
M84.572S	Pathological fracture in neoplastic disease, left ankle, sequela
M84.573D	Pathological fracture in neoplastic disease, unspecified ankle, subsequent encounter for fracture with routine healing
M84.573G	Pathological fracture in neoplastic disease, unspecified ankle, subsequent encounter for fracture with delayed healing
M84.573S	Pathological fracture in neoplastic disease, unspecified ankle, sequela
M84.574D	Pathological fracture in neoplastic disease, right foot, subsequent encounter for fracture with routine healing
M84.574G	Pathological fracture in neoplastic disease, right foot, subsequent encounter for fracture with delayed healing
M84.574S	Pathological fracture in neoplastic disease, right foot, sequela
M84.575D	Pathological fracture in neoplastic disease, left foot, subsequent encounter for fracture with routine healing
M84.575G	Pathological fracture in neoplastic disease, left foot, subsequent encounter for fracture with delayed healing
M84.575S	Pathological fracture in neoplastic disease, left foot, sequela
M84.576D	Pathological fracture in neoplastic disease, unspecified foot, subsequent encounter for fracture with routine healing
M84.576G	Pathological fracture in neoplastic disease, unspecified foot, subsequent encounter for fracture with delayed healing
M84.576S	Pathological fracture in neoplastic disease, unspecified foot, sequela
M84.58XD	Pathological fracture in neoplastic disease, other specified site, subsequent encounter for fracture with routine healing



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Code	Description
M84.58XG	Pathological fracture in neoplastic disease, other specified site, subsequent encounter for fracture with delayed healing
M84.58XS	Pathological fracture in neoplastic disease, other specified site, sequela
M84.60XD	Pathological fracture in other disease, unspecified site, subsequent encounter for fracture with routine healing
M84.60XG	Pathological fracture in other disease, unspecified site, subsequent encounter for fracture with delayed healing
M84.60XS	Pathological fracture in other disease, unspecified site, sequela
M84.611D	Pathological fracture in other disease, right shoulder, subsequent encounter for fracture with routine healing
M84.611G	Pathological fracture in other disease, right shoulder, subsequent encounter for fracture with delayed healing
M84.611S	Pathological fracture in other disease, right shoulder, sequela
M84.612D	Pathological fracture in other disease, left shoulder, subsequent encounter for fracture with routine healing
M84.612G	Pathological fracture in other disease, left shoulder, subsequent encounter for fracture with delayed healing
M84.612S	Pathological fracture in other disease, left shoulder, sequela
M84.619D	Pathological fracture in other disease, unspecified shoulder, subsequent encounter for fracture with routine healing
M84.619G	Pathological fracture in other disease, unspecified shoulder, subsequent encounter for fracture with delayed healing
M84.619S	Pathological fracture in other disease, unspecified shoulder, sequela
M84.621D	Pathological fracture in other disease, right humerus, subsequent encounter for fracture with routine healing
M84.621G	Pathological fracture in other disease, right humerus, subsequent encounter for fracture with delayed healing
M84.621S	Pathological fracture in other disease, right humerus, sequela
M84.622D	Pathological fracture in other disease, left humerus, subsequent encounter for fracture with routine healing
M84.622G	Pathological fracture in other disease, left humerus, subsequent encounter for fracture with delayed healing
M84.622S	Pathological fracture in other disease, left humerus, sequela
M84.629D	Pathological fracture in other disease, unspecified humerus, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.629G	Pathological fracture in other disease, unspecified humerus, subsequent encounter for fracture with delayed healing
M84.629S	Pathological fracture in other disease, unspecified humerus, sequela
M84.631D	Pathological fracture in other disease, right ulna, subsequent encounter for fracture with routine healing
M84.631G	Pathological fracture in other disease, right ulna, subsequent encounter for fracture with delayed healing
M84.631S	Pathological fracture in other disease, right ulna, sequela
M84.632D	Pathological fracture in other disease, left ulna, subsequent encounter for fracture with routine healing
M84.632G	Pathological fracture in other disease, left ulna, subsequent encounter for fracture with delayed healing
M84.632S	Pathological fracture in other disease, left ulna, sequela
M84.633D	Pathological fracture in other disease, right radius, subsequent encounter for fracture with routine healing
M84.633G	Pathological fracture in other disease, right radius, subsequent encounter for fracture with delayed healing
M84.633S	Pathological fracture in other disease, right radius, sequela
M84.634D	Pathological fracture in other disease, left radius, subsequent encounter for fracture with routine healing
M84.634G	Pathological fracture in other disease, left radius, subsequent encounter for fracture with delayed healing
M84.634S	Pathological fracture in other disease, left radius, sequela
M84.639D	Pathological fracture in other disease, unspecified ulna and radius, subsequent encounter for fracture with routine healing
M84.639G	Pathological fracture in other disease, unspecified ulna and radius, subsequent encounter for fracture with delayed healing
M84.639S	Pathological fracture in other disease, unspecified ulna and radius, sequela
M84.641D	Pathological fracture in other disease, right hand, subsequent encounter for fracture with routine healing
M84.641G	Pathological fracture in other disease, right hand, subsequent encounter for fracture with delayed healing
M84.641S	Pathological fracture in other disease, right hand, sequela
M84.642D	Pathological fracture in other disease, left hand, subsequent encounter for fracture with routine healing

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Code	Description
M84.642G	Pathological fracture in other disease, left hand, subsequent encounter for fracture with delayed healing
M84.642S	Pathological fracture in other disease, left hand, sequela
M84.649D	Pathological fracture in other disease, unspecified hand, subsequent encounter for fracture with routine healing
M84.649G	Pathological fracture in other disease, unspecified hand, subsequent encounter for fracture with delayed healing
M84.649S	Pathological fracture in other disease, unspecified hand, sequela
M84.650D	Pathological fracture in other disease, pelvis, subsequent encounter for fracture with routine healing
M84.650G	Pathological fracture in other disease, pelvis, subsequent encounter for fracture with delayed healing
M84.650S	Pathological fracture in other disease, pelvis, sequela
M84.651D	Pathological fracture in other disease, right femur, subsequent encounter for fracture with routine healing
M84.651G	Pathological fracture in other disease, right femur, subsequent encounter for fracture with delayed healing
M84.651S	Pathological fracture in other disease, right femur, sequela
M84.652D	Pathological fracture in other disease, left femur, subsequent encounter for fracture with routine healing
M84.652G	Pathological fracture in other disease, left femur, subsequent encounter for fracture with delayed healing
M84.652S	Pathological fracture in other disease, left femur, sequela
M84.653D	Pathological fracture in other disease, unspecified femur, subsequent encounter for fracture with routine healing
M84.653G	Pathological fracture in other disease, unspecified femur, subsequent encounter for fracture with delayed healing
M84.653S	Pathological fracture in other disease, unspecified femur, sequela
M84.659D	Pathological fracture in other disease, hip, unspecified, subsequent encounter for fracture with routine healing
M84.659G	Pathological fracture in other disease, hip, unspecified, subsequent encounter for fracture with delayed healing
M84.659S	Pathological fracture in other disease, hip, unspecified, sequela
M84.661D	Pathological fracture in other disease, right tibia, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.661G	Pathological fracture in other disease, right tibia, subsequent encounter for fracture with delayed healing
M84.661S	Pathological fracture in other disease, right tibia, sequela
M84.662D	Pathological fracture in other disease, left tibia, subsequent encounter for fracture with routine healing
M84.662G	Pathological fracture in other disease, left tibia, subsequent encounter for fracture with delayed healing
M84.662S	Pathological fracture in other disease, left tibia, sequela
M84.663D	Pathological fracture in other disease, right fibula, subsequent encounter for fracture with routine healing
M84.663G	Pathological fracture in other disease, right fibula, subsequent encounter for fracture with delayed healing
M84.663S	Pathological fracture in other disease, right fibula, sequela
M84.664D	Pathological fracture in other disease, left fibula, subsequent encounter for fracture with routine healing
M84.664G	Pathological fracture in other disease, left fibula, subsequent encounter for fracture with delayed healing
M84.664S	Pathological fracture in other disease, left fibula, sequela
M84.669D	Pathological fracture in other disease, unspecified tibia and fibula, subsequent encounter for fracture with routine healing
M84.669G	Pathological fracture in other disease, unspecified tibia and fibula, subsequent encounter for fracture with delayed healing
M84.669S	Pathological fracture in other disease, unspecified tibia and fibula, sequela
M84.671D	Pathological fracture in other disease, right ankle, subsequent encounter for fracture with routine healing
M84.671G	Pathological fracture in other disease, right ankle, subsequent encounter for fracture with delayed healing
M84.671S	Pathological fracture in other disease, right ankle, sequela
M84.672D	Pathological fracture in other disease, left ankle, subsequent encounter for fracture with routine healing
M84.672G	Pathological fracture in other disease, left ankle, subsequent encounter for fracture with delayed healing
M84.672S	Pathological fracture in other disease, left ankle, sequela
M84.673D	Pathological fracture in other disease, unspecified ankle, subsequent encounter for fracture with routine healing

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Code	Description
M84.673G	Pathological fracture in other disease, unspecified ankle, subsequent encounter for fracture with delayed healing
M84.673S	Pathological fracture in other disease, unspecified ankle, sequela
M84.674D	Pathological fracture in other disease, right foot, subsequent encounter for fracture with routine healing
M84.674G	Pathological fracture in other disease, right foot, subsequent encounter for fracture with delayed healing
M84.674S	Pathological fracture in other disease, right foot, sequela
M84.675D	Pathological fracture in other disease, left foot, subsequent encounter for fracture with routine healing
M84.675G	Pathological fracture in other disease, left foot, subsequent encounter for fracture with delayed healing
M84.675S	Pathological fracture in other disease, left foot, sequela
M84.676D	Pathological fracture in other disease, unspecified foot, subsequent encounter for fracture with routine healing
M84.676G	Pathological fracture in other disease, unspecified foot, subsequent encounter for fracture with delayed healing
M84.676S	Pathological fracture in other disease, unspecified foot, sequela
M84.68XD	Pathological fracture in other disease, other site, subsequent encounter for fracture with routine healing
M84.68XG	Pathological fracture in other disease, other site, subsequent encounter for fracture with delayed healing
M84.68XS	Pathological fracture in other disease, other site, sequela
M89.38	Hypertrophy of bone, other site
M89.8X8	Other specified disorders of bone, other site
M91.0	Juvenile osteochondrosis of pelvis
M91.10	Juvenile osteochondrosis of head of femur [Legg-Calve-Perthes], unspecified leg
M91.11	Juvenile osteochondrosis of head of femur [Legg-Calve-Perthes], right leg
M91.12	Juvenile osteochondrosis of head of femur [Legg-Calve-Perthes], left leg
M91.20	Coxa plana, unspecified hip
M91.21	Coxa plana, right hip
M91.22	Coxa plana, left hip
M91.30	Pseudocoxalgia, unspecified hip

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Code	Description
M91.31	Pseudocoxalgia, right hip
M91.32	Pseudocoxalgia, left hip
M91.40	Coxa magna, unspecified hip
M91.41	Coxa magna, right hip
M91.42	Coxa magna, left hip
M91.80	Other juvenile osteochondrosis of hip and pelvis, unspecified leg
M91.81	Other juvenile osteochondrosis of hip and pelvis, right leg
M91.82	Other juvenile osteochondrosis of hip and pelvis, left leg
M91.90	Juvenile osteochondrosis of hip and pelvis, unspecified, unspecified leg
M91.91	Juvenile osteochondrosis of hip and pelvis, unspecified, right leg
M91.92	Juvenile osteochondrosis of hip and pelvis, unspecified, left leg
M92.00	Juvenile osteochondrosis of humerus, unspecified arm
M92.01	Juvenile osteochondrosis of humerus, right arm
M92.02	Juvenile osteochondrosis of humerus, left arm
M92.10	Juvenile osteochondrosis of radius and ulna, unspecified arm
M92.11	Juvenile osteochondrosis of radius and ulna, right arm
M92.12	Juvenile osteochondrosis of radius and ulna, left arm
M92.201	Unspecified juvenile osteochondrosis, right hand
M92.202	Unspecified juvenile osteochondrosis, left hand
M92.209	Unspecified juvenile osteochondrosis, unspecified hand
M92.211	Osteochondrosis (juvenile) of carpal lunate [Kienbock], right hand
M92.212	Osteochondrosis (juvenile) of carpal lunate [Kienbock], left hand
M92.219	Osteochondrosis (juvenile) of carpal lunate [Kienbock], unspecified hand
M92.221	Osteochondrosis (juvenile) of metacarpal heads [Mauclaire], right hand
M92.222	Osteochondrosis (juvenile) of metacarpal heads [Mauclaire], left hand
M92.229	Osteochondrosis (juvenile) of metacarpal heads [Mauclaire], unspecified hand
M92.291	Other juvenile osteochondrosis, right hand
M92.292	Other juvenile osteochondrosis, left hand
M92.299	Other juvenile osteochondrosis, unspecified hand
M92.30	Other juvenile osteochondrosis, unspecified upper limb

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Code	Description
M92.31	Other juvenile osteochondrosis, right upper limb
M92.32	Other juvenile osteochondrosis, left upper limb
M92.40	Juvenile osteochondrosis of patella, unspecified knee
M92.41	Juvenile osteochondrosis of patella, right knee
M92.42	Juvenile osteochondrosis of patella, left knee
M92.50	Juvenile osteochondrosis of tibia and fibula, unspecified leg
M92.51	Juvenile osteochondrosis of tibia and fibula, right leg
M92.52	Juvenile osteochondrosis of tibia and fibula, left leg
M92.60	Juvenile osteochondrosis of tarsus, unspecified ankle
M92.61	Juvenile osteochondrosis of tarsus, right ankle
M92.62	Juvenile osteochondrosis of tarsus, left ankle
M92.70	Juvenile osteochondrosis of metatarsus, unspecified foot
M92.71	Juvenile osteochondrosis of metatarsus, right foot
M92.72	Juvenile osteochondrosis of metatarsus, left foot
M92.8	Other specified juvenile osteochondrosis
M92.9	Juvenile osteochondrosis, unspecified
M93.001	Unspecified slipped upper femoral epiphysis (nontraumatic), right hip
M93.002	Unspecified slipped upper femoral epiphysis (nontraumatic), left hip
M93.003	Unspecified slipped upper femoral epiphysis (nontraumatic), unspecified hip
M93.011	Acute slipped upper femoral epiphysis (nontraumatic), right hip
M93.012	Acute slipped upper femoral epiphysis (nontraumatic), left hip
M93.013	Acute slipped upper femoral epiphysis (nontraumatic), unspecified hip
M93.021	Chronic slipped upper femoral epiphysis (nontraumatic), right hip
M93.022	Chronic slipped upper femoral epiphysis (nontraumatic), left hip
M93.023	Chronic slipped upper femoral epiphysis (nontraumatic), unspecified hip
M93.031	Acute on chronic slipped upper femoral epiphysis (nontraumatic), right hip
M93.032	Acute on chronic slipped upper femoral epiphysis (nontraumatic), left hip
M93.033	Acute on chronic slipped upper femoral epiphysis (nontraumatic), unspecified hip
M93.1	Kienbock's disease of adults
M93.20	Osteochondritis dissecans of unspecified site



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Code	Description
M93.211	Osteochondritis dissecans, right shoulder
M93.212	Osteochondritis dissecans, left shoulder
M93.219	Osteochondritis dissecans, unspecified shoulder
M93.221	Osteochondritis dissecans, right elbow
M93.222	Osteochondritis dissecans, left elbow
M93.229	Osteochondritis dissecans, unspecified elbow
M93.231	Osteochondritis dissecans, right wrist
M93.232	Osteochondritis dissecans, left wrist
M93.239	Osteochondritis dissecans, unspecified wrist
M93.241	Osteochondritis dissecans, joints of right hand
M93.242	Osteochondritis dissecans, joints of left hand
M93.249	Osteochondritis dissecans, joints of unspecified hand
M93.251	Osteochondritis dissecans, right hip
M93.252	Osteochondritis dissecans, left hip
M93.259	Osteochondritis dissecans, unspecified hip
M93.261	Osteochondritis dissecans, right knee
M93.262	Osteochondritis dissecans, left knee
M93.269	Osteochondritis dissecans, unspecified knee
M93.271	Osteochondritis dissecans, right ankle and joints of right foot
M93.272	Osteochondritis dissecans, left ankle and joints of left foot
M93.279	Osteochondritis dissecans, unspecified ankle and joints of foot
M93.28	Osteochondritis dissecans other site
M93.29	Osteochondritis dissecans multiple sites
M93.80	Other specified osteochondropathies of unspecified site
M93.811	Other specified osteochondropathies, right shoulder
M93.812	Other specified osteochondropathies, left shoulder
M93.819	Other specified osteochondropathies, unspecified shoulder
M93.821	Other specified osteochondropathies, right upper arm
M93.822	Other specified osteochondropathies, left upper arm
M93.829	Other specified osteochondropathies, unspecified upper arm

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Code	Description
M93.831	Other specified osteochondropathies, right forearm
M93.832	Other specified osteochondropathies, left forearm
M93.839	Other specified osteochondropathies, unspecified forearm
M93.841	Other specified osteochondropathies, right hand
M93.842	Other specified osteochondropathies, left hand
M93.849	Other specified osteochondropathies, unspecified hand
M93.851	Other specified osteochondropathies, right thigh
M93.852	Other specified osteochondropathies, left thigh
M93.859	Other specified osteochondropathies, unspecified thigh
M93.861	Other specified osteochondropathies, right lower leg
M93.862	Other specified osteochondropathies, left lower leg
M93.869	Other specified osteochondropathies, unspecified lower leg
M93.871	Other specified osteochondropathies, right ankle and foot
M93.872	Other specified osteochondropathies, left ankle and foot
M93.879	Other specified osteochondropathies, unspecified ankle and foot
M93.88	Other specified osteochondropathies other
M93.89	Other specified osteochondropathies multiple sites
M93.90	Osteochondropathy, unspecified of unspecified site
M93.911	Osteochondropathy, unspecified, right shoulder
M93.912	Osteochondropathy, unspecified, left shoulder
M93.919	Osteochondropathy, unspecified, unspecified shoulder
M93.921	Osteochondropathy, unspecified, right upper arm
M93.922	Osteochondropathy, unspecified, left upper arm
M93.929	Osteochondropathy, unspecified, unspecified upper arm
M93.931	Osteochondropathy, unspecified, right forearm
M93.932	Osteochondropathy, unspecified, left forearm
M93.939	Osteochondropathy, unspecified, unspecified forearm
M93.941	Osteochondropathy, unspecified, right hand
M93.942	Osteochondropathy, unspecified, left hand
M93.949	Osteochondropathy, unspecified, unspecified hand

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Code	Description
M93.951	Osteochondropathy, unspecified, right thigh
M93.952	Osteochondropathy, unspecified, left thigh
M93.959	Osteochondropathy, unspecified, unspecified thigh
M93.961	Osteochondropathy, unspecified, right lower leg
M93.962	Osteochondropathy, unspecified, left lower leg
M93.969	Osteochondropathy, unspecified, unspecified lower leg
M93.971	Osteochondropathy, unspecified, right ankle and foot
M93.972	Osteochondropathy, unspecified, left ankle and foot
M93.979	Osteochondropathy, unspecified, unspecified ankle and foot
M93.98	Osteochondropathy, unspecified other
M93.99	Osteochondropathy, unspecified multiple sites
M95.0	Acquired deformity of nose
M95.10	Cauliflower ear, unspecified ear
M95.11	Cauliflower ear, right ear
M95.12	Cauliflower ear, left ear
M95.2	Other acquired deformity of head
M95.3	Acquired deformity of neck
M95.4	Acquired deformity of chest and rib
M95.5	Acquired deformity of pelvis
M95.8	Other specified acquired deformities of musculoskeletal system
M95.9	Acquired deformity of musculoskeletal system, unspecified
M96.0	Pseudarthrosis after fusion or arthrodesis
M96.2	Postradiation kyphosis
M96.3	Postlaminectomy kyphosis
M96.4	Postsurgical lordosis
M96.5	Postradiation scoliosis
M99.00	Segmental and somatic dysfunction of head region
M99.01	Segmental and somatic dysfunction of cervical region
M99.02	Segmental and somatic dysfunction of thoracic region
M99.03	Segmental and somatic dysfunction of lumbar region



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Code	Description
M99.04	Segmental and somatic dysfunction of sacral region
M99.05	Segmental and somatic dysfunction of pelvic region
M99.06	Segmental and somatic dysfunction of lower extremity
M99.07	Segmental and somatic dysfunction of upper extremity
M99.08	Segmental and somatic dysfunction of rib cage
M99.09	Segmental and somatic dysfunction of abdomen and other regions
M99.10	Subluxation complex (vertebral) of head region
M99.11	Subluxation complex (vertebral) of cervical region
M99.12	Subluxation complex (vertebral) of thoracic region
M99.13	Subluxation complex (vertebral) of lumbar region
M99.14	Subluxation complex (vertebral) of sacral region
M99.15	Subluxation complex (vertebral) of pelvic region
M99.16	Subluxation complex (vertebral) of lower extremity
M99.17	Subluxation complex (vertebral) of upper extremity
M99.18	Subluxation complex (vertebral) of rib cage
M99.19	Subluxation complex (vertebral) of abdomen and other regions
M99.80	Other biomechanical lesions of head region
M99.81	Other biomechanical lesions of cervical region
M99.82	Other biomechanical lesions of thoracic region
M99.83	Other biomechanical lesions of lumbar region
M99.84	Other biomechanical lesions of sacral region
M99.85	Other biomechanical lesions of pelvic region
M99.86	Other biomechanical lesions of lower extremity
M99.87	Other biomechanical lesions of upper extremity
M99.88	Other biomechanical lesions of rib cage
M99.89	Other biomechanical lesions of abdomen and other regions
M99.9	Biomechanical lesion, unspecified
N40.0	Benign prostatic hyperplasia without lower urinary tract symptoms
N40.1	Benign prostatic hyperplasia with lower urinary tract symptoms
N40.2	Nodular prostate without lower urinary tract symptoms

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Code	Description
N40.3	Nodular prostate with lower urinary tract symptoms
N42.83	Cyst of prostate
N43.0	Encysted hydrocele
N43.2	Other hydrocele
N43.3	Hydrocele, unspecified
N43.40	Spermatocele of epididymis, unspecified
N43.41	Spermatocele of epididymis, single
N43.42	Spermatocele of epididymis, multiple
N44.00	Torsion of testis, unspecified
N44.01	Extravaginal torsion of spermatic cord
N44.02	Intravaginal torsion of spermatic cord
N44.03	Torsion of appendix testis
N44.04	Torsion of appendix epididymis
N46.01	Organic azoospermia
N46.021	Azoospermia due to drug therapy
N46.022	Azoospermia due to infection
N46.023	Azoospermia due to obstruction of efferent ducts
N46.024	Azoospermia due to radiation
N46.025	Azoospermia due to systemic disease
N46.11	Organic oligospermia
N46.121	Oligospermia due to drug therapy
N46.122	Oligospermia due to infection
N46.123	Oligospermia due to obstruction of efferent ducts
N46.124	Oligospermia due to radiation
N46.125	Oligospermia due to systemic disease
N46.129	Oligospermia due to other extratesticular causes
N47.0	Adherent prepuce, newborn
N47.1	Phimosis
N47.2	Paraphimosis
N47.3	Deficient foreskin

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Code	Description
N47.4	Benign cyst of prepuce
N47.5	Adhesions of prepuce and glans penis
N47.7	Other inflammatory diseases of prepuce
N47.8	Other disorders of prepuce
N50.0	Atrophy of testis
N60.01	Solitary cyst of right breast
N60.02	Solitary cyst of left breast
N60.09	Solitary cyst of unspecified breast
N60.11	Diffuse cystic mastopathy of right breast
N60.12	Diffuse cystic mastopathy of left breast
N60.19	Diffuse cystic mastopathy of unspecified breast
N60.21	Fibroadenosis of right breast
N60.22	Fibroadenosis of left breast
N60.29	Fibroadenosis of unspecified breast
N60.31	Fibrosclerosis of right breast
N60.32	Fibrosclerosis of left breast
N60.39	Fibrosclerosis of unspecified breast
N60.41	Mammary duct ectasia of right breast
N60.42	Mammary duct ectasia of left breast
N60.49	Mammary duct ectasia of unspecified breast
N60.81	Other benign mammary dysplasias of right breast
N60.82	Other benign mammary dysplasias of left breast
N60.89	Other benign mammary dysplasias of unspecified breast
N60.91	Unspecified benign mammary dysplasia of right breast
N60.92	Unspecified benign mammary dysplasia of left breast
N60.99	Unspecified benign mammary dysplasia of unspecified breast
N62	Hypertrophy of breast
N64.0	Fissure and fistula of nipple
N64.1	Fat necrosis of breast
N64.2	Atrophy of breast

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Code	Description
N64.3	Galactorrhea not associated with childbirth
N64.89	Other specified disorders of breast
N64.9	Disorder of breast, unspecified
N75.0	Cyst of Bartholin's gland
N75.8	Other diseases of Bartholin's gland
N81.0	Urethrocele
N81.10	Cystocele, unspecified
N81.11	Cystocele, midline
N81.12	Cystocele, lateral
N81.2	Incomplete uterovaginal prolapse
N81.3	Complete uterovaginal prolapse
N81.4	Uterovaginal prolapse, unspecified
N81.5	Vaginal enterocele
N81.6	Rectocele
N81.81	Perineocele
N81.82	Incompetence or weakening of pubocervical tissue
N81.83	Incompetence or weakening of rectovaginal tissue
N81.84	Pelvic muscle wasting
N81.85	Cervical stump prolapse
N81.89	Other female genital prolapse
N81.9	Female genital prolapse, unspecified
N83.00	Follicular cyst of ovary, unspecified side
N83.01	Follicular cyst of right ovary
N83.02	Follicular cyst of left ovary
N83.10	Corpus luteum cyst of ovary, unspecified side
N83.11	Corpus luteum cyst of right ovary
N83.12	Corpus luteum cyst of left ovary
N83.201	Unspecified ovarian cyst, right side
N83.202	Unspecified ovarian cyst, left side
N83.209	Unspecified ovarian cyst, unspecified side

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Code	Description
N83.291	Other ovarian cyst, right side
N83.292	Other ovarian cyst, left side
N83.299	Other ovarian cyst, unspecified side
N83.311	Acquired atrophy of right ovary
N83.312	Acquired atrophy of left ovary
N83.319	Acquired atrophy of ovary, unspecified side
N83.321	Acquired atrophy of right fallopian tube
N83.322	Acquired atrophy of left fallopian tube
N83.329	Acquired atrophy of fallopian tube, unspecified side
N83.331	Acquired atrophy of right ovary and fallopian tube
N83.332	Acquired atrophy of left ovary and fallopian tube
N83.339	Acquired atrophy of ovary and fallopian tube, unspecified side
N85.4	Malposition of uterus
N85.5	Inversion of uterus
N95.1	Menopausal and female climacteric states
N95.2	Postmenopausal atrophic vaginitis
N95.8	Other specified menopausal and perimenopausal disorders
N95.9	Unspecified menopausal and perimenopausal disorder
N97.0	Female infertility associated with anovulation
N97.1	Female infertility of tubal origin
N97.2	Female infertility of uterine origin
N97.8	Female infertility of other origin
N97.9	Female infertility, unspecified
N99.3	Prolapse of vaginal vault after hysterectomy
O92.011	Retracted nipple associated with pregnancy, first trimester
O92.012	Retracted nipple associated with pregnancy, second trimester
O92.013	Retracted nipple associated with pregnancy, third trimester
O92.019	Retracted nipple associated with pregnancy, unspecified trimester
O92.02	Retracted nipple associated with the puerperium
O92.03	Retracted nipple associated with lactation

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Code	Description
O92.111	Cracked nipple associated with pregnancy, first trimester
O92.112	Cracked nipple associated with pregnancy, second trimester
O92.113	Cracked nipple associated with pregnancy, third trimester
O92.119	Cracked nipple associated with pregnancy, unspecified trimester
O92.12	Cracked nipple associated with the puerperium
O92.13	Cracked nipple associated with lactation
O92.20	Unspecified disorder of breast associated with pregnancy and the puerperium
O92.29	Other disorders of breast associated with pregnancy and the puerperium
O92.3	Agalactia
O92.4	Hypogalactia
O92.5	Suppressed lactation
O92.6	Galactorrhea
O92.70	Unspecified disorders of lactation
O92.79	Other disorders of lactation
P07.01	Extremely low birth weight newborn, less than 500 grams
P07.02	Extremely low birth weight newborn, 500-749 grams
P07.03	Extremely low birth weight newborn, 750-999 grams
P07.10	Other low birth weight newborn, unspecified weight
P07.14	Other low birth weight newborn, 1000-1249 grams
P07.15	Other low birth weight newborn, 1250-1499 grams
P07.16	Other low birth weight newborn, 1500-1749 grams
P07.17	Other low birth weight newborn, 1750-1999 grams
P07.18	Other low birth weight newborn, 2000-2499 grams
R09.81	Nasal congestion
R13.10	Dysphagia, unspecified
R37	Sexual dysfunction, unspecified
R41.83	Borderline intellectual functioning
R43.9	Unspecified disturbances of smell and taste
R45.850	Homicidal ideations
R45.851	Suicidal ideations



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Code	Description
R46.81	Obsessive-compulsive behavior
R46.89	Other symptoms and signs involving appearance and behavior
R47.89	Other speech disturbances
R52	Pain, unspecified
R68.2	Dry mouth, unspecified
R68.82	Decreased libido
R68.89	Other general symptoms and signs
R69	Illness, unspecified
S00.00XA	Unspecified superficial injury of scalp, initial encounter
S00.00XS	Unspecified superficial injury of scalp, sequela
S00.01XA	Abrasion of scalp, initial encounter
S00.01XS	Abrasion of scalp, sequela
S00.02XA	Blister (nonthermal) of scalp, initial encounter
S00.02XS	Blister (nonthermal) of scalp, sequela
S00.03XS	Contusion of scalp, sequela
S00.04XA	External constriction of part of scalp, initial encounter
S00.04XS	External constriction of part of scalp, sequela
S00.05XA	Superficial foreign body of scalp, initial encounter
S00.05XS	Superficial foreign body of scalp, sequela
S00.06XA	Insect bite (nonvenomous) of scalp, initial encounter
S00.06XS	Insect bite (nonvenomous) of scalp, sequela
S00.07XA	Other superficial bite of scalp, initial encounter
S00.07XS	Other superficial bite of scalp, sequela
S00.10XS	Contusion of unspecified eyelid and periocular area, sequela
S00.11XS	Contusion of right eyelid and periocular area, sequela
S00.12XS	Contusion of left eyelid and periocular area, sequela
S00.201A	Unspecified superficial injury of right eyelid and periocular area, initial encounter
S00.201S	Unspecified superficial injury of right eyelid and periocular area, sequela
S00.202A	Unspecified superficial injury of left eyelid and periocular area, initial encounter
S00.202S	Unspecified superficial injury of left eyelid and periocular area, sequela

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S00.209A	Unspecified superficial injury of unspecified eyelid and periocular area, initial encounter
S00.209S	Unspecified superficial injury of unspecified eyelid and periocular area, sequela
S00.211A	Abrasion of right eyelid and periocular area, initial encounter
S00.211S	Abrasion of right eyelid and periocular area, sequela
S00.212A	Abrasion of left eyelid and periocular area, initial encounter
S00.212S	Abrasion of left eyelid and periocular area, sequela
S00.219A	Abrasion of unspecified eyelid and periocular area, initial encounter
S00.219S	Abrasion of unspecified eyelid and periocular area, sequela
S00.221A	Blister (nonthermal) of right eyelid and periocular area, initial encounter
S00.221S	Blister (nonthermal) of right eyelid and periocular area, sequela
S00.222A	Blister (nonthermal) of left eyelid and periocular area, initial encounter
S00.222S	Blister (nonthermal) of left eyelid and periocular area, sequela
S00.229A	Blister (nonthermal) of unspecified eyelid and periocular area, initial encounter
S00.229S	Blister (nonthermal) of unspecified eyelid and periocular area, sequela
S00.241A	External constriction of right eyelid and periocular area, initial encounter
S00.241S	External constriction of right eyelid and periocular area, sequela
S00.242A	External constriction of left eyelid and periocular area, initial encounter
S00.242S	External constriction of left eyelid and periocular area, sequela
S00.249A	External constriction of unspecified eyelid and periocular area, initial encounter
S00.249S	External constriction of unspecified eyelid and periocular area, sequela
S00.251A	Superficial foreign body of right eyelid and periocular area, initial encounter
S00.251S	Superficial foreign body of right eyelid and periocular area, sequela
S00.252A	Superficial foreign body of left eyelid and periocular area, initial encounter
S00.252S	Superficial foreign body of left eyelid and periocular area, sequela
S00.259A	Superficial foreign body of unspecified eyelid and periocular area, initial encounter
S00.259S	Superficial foreign body of unspecified eyelid and periocular area, sequela
S00.261A	Insect bite (nonvenomous) of right eyelid and periocular area, initial encounter
S00.261S	Insect bite (nonvenomous) of right eyelid and periocular area, sequela
S00.262A	Insect bite (nonvenomous) of left eyelid and periocular area, initial encounter
S00.262S	Insect bite (nonvenomous) of left eyelid and periocular area, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S00.269A	Insect bite (nonvenomous) of unspecified eyelid and periocular area, initial encounter
S00.269S	Insect bite (nonvenomous) of unspecified eyelid and periocular area, sequela
S00.271A	Other superficial bite of right eyelid and periocular area, initial encounter
S00.271S	Other superficial bite of right eyelid and periocular area, sequela
S00.272A	Other superficial bite of left eyelid and periocular area, initial encounter
S00.272S	Other superficial bite of left eyelid and periocular area, sequela
S00.279A	Other superficial bite of unspecified eyelid and periocular area, initial encounter
S00.279S	Other superficial bite of unspecified eyelid and periocular area, sequela
S00.30XA	Unspecified superficial injury of nose, initial encounter
S00.30XS	Unspecified superficial injury of nose, sequela
S00.31XA	Abrasion of nose, initial encounter
S00.31XS	Abrasion of nose, sequela
S00.32XA	Blister (nonthermal) of nose, initial encounter
S00.32XS	Blister (nonthermal) of nose, sequela
S00.33XS	Contusion of nose, sequela
S00.34XA	External constriction of nose, initial encounter
S00.34XS	External constriction of nose, sequela
S00.35XA	Superficial foreign body of nose, initial encounter
S00.35XS	Superficial foreign body of nose, sequela
S00.36XA	Insect bite (nonvenomous) of nose, initial encounter
S00.36XS	Insect bite (nonvenomous) of nose, sequela
S00.37XA	Other superficial bite of nose, initial encounter
S00.37XS	Other superficial bite of nose, sequela
S00.401A	Unspecified superficial injury of right ear, initial encounter
S00.401S	Unspecified superficial injury of right ear, sequela
S00.402A	Unspecified superficial injury of left ear, initial encounter
S00.402S	Unspecified superficial injury of left ear, sequela
S00.409A	Unspecified superficial injury of unspecified ear, initial encounter
S00.409S	Unspecified superficial injury of unspecified ear, sequela
S00.411A	Abrasion of right ear, initial encounter



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Code	Description
S00.411S	Abrasion of right ear, sequela
S00.412A	Abrasion of left ear, initial encounter
S00.412S	Abrasion of left ear, sequela
S00.419A	Abrasion of unspecified ear, initial encounter
S00.419S	Abrasion of unspecified ear, sequela
S00.421A	Blister (nonthermal) of right ear, initial encounter
S00.421S	Blister (nonthermal) of right ear, sequela
S00.422A	Blister (nonthermal) of left ear, initial encounter
S00.422S	Blister (nonthermal) of left ear, sequela
S00.429A	Blister (nonthermal) of unspecified ear, initial encounter
S00.429S	Blister (nonthermal) of unspecified ear, sequela
S00.431S	Contusion of right ear, sequela
S00.432S	Contusion of left ear, sequela
S00.439S	Contusion of unspecified ear, sequela
S00.441A	External constriction of right ear, initial encounter
S00.441S	External constriction of right ear, sequela
S00.442A	External constriction of left ear, initial encounter
S00.442S	External constriction of left ear, sequela
S00.449A	External constriction of unspecified ear, initial encounter
S00.449S	External constriction of unspecified ear, sequela
S00.451A	Superficial foreign body of right ear, initial encounter
S00.451S	Superficial foreign body of right ear, sequela
S00.452A	Superficial foreign body of left ear, initial encounter
S00.452S	Superficial foreign body of left ear, sequela
S00.459A	Superficial foreign body of unspecified ear, initial encounter
S00.459S	Superficial foreign body of unspecified ear, sequela
S00.461A	Insect bite (nonvenomous) of right ear, initial encounter
S00.461S	Insect bite (nonvenomous) of right ear, sequela
S00.462A	Insect bite (nonvenomous) of left ear, initial encounter
S00.462S	Insect bite (nonvenomous) of left ear, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S00.469A	Insect bite (nonvenomous) of unspecified ear, initial encounter
S00.469S	Insect bite (nonvenomous) of unspecified ear, sequela
S00.471A	Other superficial bite of right ear, initial encounter
S00.471S	Other superficial bite of right ear, sequela
S00.472A	Other superficial bite of left ear, initial encounter
S00.472S	Other superficial bite of left ear, sequela
S00.479A	Other superficial bite of unspecified ear, initial encounter
S00.479S	Other superficial bite of unspecified ear, sequela
S00.501A	Unspecified superficial injury of lip, initial encounter
S00.501S	Unspecified superficial injury of lip, sequela
S00.502A	Unspecified superficial injury of oral cavity, initial encounter
S00.502S	Unspecified superficial injury of oral cavity, sequela
S00.511A	Abrasion of lip, initial encounter
S00.511S	Abrasion of lip, sequela
S00.512A	Abrasion of oral cavity, initial encounter
S00.512S	Abrasion of oral cavity, sequela
S00.521A	Blister (nonthermal) of lip, initial encounter
S00.521S	Blister (nonthermal) of lip, sequela
S00.522A	Blister (nonthermal) of oral cavity, initial encounter
S00.522S	Blister (nonthermal) of oral cavity, sequela
S00.531S	Contusion of lip, sequela
S00.532S	Contusion of oral cavity, sequela
S00.541A	External constriction of lip, initial encounter
S00.541S	External constriction of lip, sequela
S00.542A	External constriction of oral cavity, initial encounter
S00.542S	External constriction of oral cavity, sequela
S00.551A	Superficial foreign body of lip, initial encounter
S00.551S	Superficial foreign body of lip, sequela
S00.552A	Superficial foreign body of oral cavity, initial encounter
S00.552S	Superficial foreign body of oral cavity, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S00.561A	Insect bite (nonvenomous) of lip, initial encounter
S00.561S	Insect bite (nonvenomous) of lip, sequela
S00.562A	Insect bite (nonvenomous) of oral cavity, initial encounter
S00.562S	Insect bite (nonvenomous) of oral cavity, sequela
S00.571A	Other superficial bite of lip, initial encounter
S00.571S	Other superficial bite of lip, sequela
S00.572A	Other superficial bite of oral cavity, initial encounter
S00.572S	Other superficial bite of oral cavity, sequela
S00.80XA	Unspecified superficial injury of other part of head, initial encounter
S00.80XS	Unspecified superficial injury of other part of head, sequela
S00.81XA	Abrasion of other part of head, initial encounter
S00.81XS	Abrasion of other part of head, sequela
S00.82XA	Blisters (nonthermal) of other part of head, initial encounter
S00.82XS	Blisters (nonthermal) of other part of head, sequela
S00.83XS	Contusion of other part of head, sequela
S00.84XA	External constriction of other part of head, initial encounter
S00.84XS	External constriction of other part of head, sequela
S00.85XA	Superficial foreign body of other part of head, initial encounter
S00.85XS	Superficial foreign body of other part of head, sequela
S00.86XA	Insect bite (nonvenomous) of other part of head, initial encounter
S00.86XS	Insect bite (nonvenomous) of other part of head, sequela
S00.87XA	Other superficial bite of other part of head, initial encounter
S00.87XS	Other superficial bite of other part of head, sequela
S00.90XA	Unspecified superficial injury of unspecified part of head, initial encounter
S00.90XS	Unspecified superficial injury of unspecified part of head, sequela
S00.91XA	Abrasion of unspecified part of head, initial encounter
S00.91XS	Abrasion of unspecified part of head, sequela
S00.92XA	Blisters (nonthermal) of unspecified part of head, initial encounter
S00.92XS	Blisters (nonthermal) of unspecified part of head, sequela
S00.93XS	Contusion of unspecified part of head, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S00.94XA	External constriction of unspecified part of head, initial encounter
S00.94XS	External constriction of unspecified part of head, sequela
S00.95XA	Superficial foreign body of unspecified part of head, initial encounter
S00.95XS	Superficial foreign body of unspecified part of head, sequela
S00.96XA	Insect bite (nonvenomous) of unspecified part of head, initial encounter
S00.96XS	Insect bite (nonvenomous) of unspecified part of head, sequela
S00.97XA	Other superficial bite of unspecified part of head, initial encounter
S00.97XS	Other superficial bite of unspecified part of head, sequela
S01.00XS	Unspecified open wound of scalp, sequela
S01.01XS	Laceration without foreign body of scalp, sequela
S01.02XS	Laceration with foreign body of scalp, sequela
S01.03XS	Puncture wound without foreign body of scalp, sequela
S01.04XS	Puncture wound with foreign body of scalp, sequela
S01.05XS	Open bite of scalp, sequela
S01.101S	Unspecified open wound of right eyelid and periocular area, sequela
S01.102S	Unspecified open wound of left eyelid and periocular area, sequela
S01.109S	Unspecified open wound of unspecified eyelid and periocular area, sequela
S01.111S	Laceration without foreign body of right eyelid and periocular area, sequela
S01.112S	Laceration without foreign body of left eyelid and periocular area, sequela
S01.119S	Laceration without foreign body of unspecified eyelid and periocular area, sequela
S01.121S	Laceration with foreign body of right eyelid and periocular area, sequela
S01.122S	Laceration with foreign body of left eyelid and periocular area, sequela
S01.129S	Laceration with foreign body of unspecified eyelid and periocular area, sequela
S01.131S	Puncture wound without foreign body of right eyelid and periocular area, sequela
S01.132S	Puncture wound without foreign body of left eyelid and periocular area, sequela
S01.139S	Puncture wound without foreign body of unspecified eyelid and periocular area, sequela
S01.141S	Puncture wound with foreign body of right eyelid and periocular area, sequela
S01.142S	Puncture wound with foreign body of left eyelid and periocular area, sequela
S01.149S	Puncture wound with foreign body of unspecified eyelid and periocular area, sequela
S01.151S	Open bite of right eyelid and periocular area, sequela



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Code	Description
S01.152S	Open bite of left eyelid and periocular area, sequela
S01.159S	Open bite of unspecified eyelid and periocular area, sequela
S01.20XS	Unspecified open wound of nose, sequela
S01.21XS	Laceration without foreign body of nose, sequela
S01.22XS	Laceration with foreign body of nose, sequela
S01.23XS	Puncture wound without foreign body of nose, sequela
S01.24XS	Puncture wound with foreign body of nose, sequela
S01.25XS	Open bite of nose, sequela
S01.301S	Unspecified open wound of right ear, sequela
S01.302S	Unspecified open wound of left ear, sequela
S01.309S	Unspecified open wound of unspecified ear, sequela
S01.311S	Laceration without foreign body of right ear, sequela
S01.312S	Laceration without foreign body of left ear, sequela
S01.319S	Laceration without foreign body of unspecified ear, sequela
S01.321S	Laceration with foreign body of right ear, sequela
S01.322S	Laceration with foreign body of left ear, sequela
S01.329S	Laceration with foreign body of unspecified ear, sequela
S01.331S	Puncture wound without foreign body of right ear, sequela
S01.332S	Puncture wound without foreign body of left ear, sequela
S01.339S	Puncture wound without foreign body of unspecified ear, sequela
S01.341S	Puncture wound with foreign body of right ear, sequela
S01.342S	Puncture wound with foreign body of left ear, sequela
S01.349S	Puncture wound with foreign body of unspecified ear, sequela
S01.351S	Open bite of right ear, sequela
S01.352S	Open bite of left ear, sequela
S01.359S	Open bite of unspecified ear, sequela
S01.401S	Unspecified open wound of right cheek and temporomandibular area, sequela
S01.402S	Unspecified open wound of left cheek and temporomandibular area, sequela
S01.409S	Unspecified open wound of unspecified cheek and temporomandibular area, sequela
S01.411S	Laceration without foreign body of right cheek and temporomandibular area, sequela

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Code	Description
S01.412S	Laceration without foreign body of left cheek and temporomandibular area, sequela
S01.419S	Laceration without foreign body of unspecified cheek and temporomandibular area, sequela
S01.421S	Laceration with foreign body of right cheek and temporomandibular area, sequela
S01.422S	Laceration with foreign body of left cheek and temporomandibular area, sequela
S01.429S	Laceration with foreign body of unspecified cheek and temporomandibular area, sequela
S01.431S	Puncture wound without foreign body of right cheek and temporomandibular area, sequela
S01.432S	Puncture wound without foreign body of left cheek and temporomandibular area, sequela
S01.439S	Puncture wound without foreign body of unspecified cheek and temporomandibular area, sequela
S01.441S	Puncture wound with foreign body of right cheek and temporomandibular area, sequela
S01.442S	Puncture wound with foreign body of left cheek and temporomandibular area, sequela
S01.449S	Puncture wound with foreign body of unspecified cheek and temporomandibular area, sequela
S01.451S	Open bite of right cheek and temporomandibular area, sequela
S01.452S	Open bite of left cheek and temporomandibular area, sequela
S01.459S	Open bite of unspecified cheek and temporomandibular area, sequela
S01.501S	Unspecified open wound of lip, sequela
S01.502S	Unspecified open wound of oral cavity, sequela
S01.511S	Laceration without foreign body of lip, sequela
S01.512S	Laceration without foreign body of oral cavity, sequela
S01.521S	Laceration with foreign body of lip, sequela
S01.522S	Laceration with foreign body of oral cavity, sequela
S01.531S	Puncture wound without foreign body of lip, sequela
S01.532S	Puncture wound without foreign body of oral cavity, sequela
S01.541S	Puncture wound with foreign body of lip, sequela
S01.542S	Puncture wound with foreign body of oral cavity, sequela
S01.551S	Open bite of lip, sequela
S01.552S	Open bite of oral cavity, sequela
S01.80XS	Unspecified open wound of other part of head, sequela
S01.81XS	Laceration without foreign body of other part of head, sequela



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Code	Description
S01.82XS	Laceration with foreign body of other part of head, sequela
S01.83XS	Puncture wound without foreign body of other part of head, sequela
S01.84XS	Puncture wound with foreign body of other part of head, sequela
S01.85XS	Open bite of other part of head, sequela
S01.90XS	Unspecified open wound of unspecified part of head, sequela
S01.91XS	Laceration without foreign body of unspecified part of head, sequela
S01.92XS	Laceration with foreign body of unspecified part of head, sequela
S01.93XS	Puncture wound without foreign body of unspecified part of head, sequela
S01.94XS	Puncture wound with foreign body of unspecified part of head, sequela
S01.95XS	Open bite of unspecified part of head, sequela
S02.0XXD	Fracture of vault of skull, subsequent encounter for fracture with routine healing
S02.0XXG	Fracture of vault of skull, subsequent encounter for fracture with delayed healing
S02.0XXS	Fracture of vault of skull, sequela
*S02.101A	*Fracture of base of skull, right side, initial encounter for closed fracture
*S02.101B	*Fracture of base of skull, right side, initial encounter for open fracture
*S02.102A	*Fracture of base of skull, left side, initial encounter for closed fracture
*S02.102B	*Fracture of base of skull, left side, initial encounter for open fracture
*S02.109A	*Fracture of base of skull, unspecified side, initial encounter for closed fracture
*S02.109B	*Fracture of base of skull, unspecified side, initial encounter for open fracture
S02.110D	Type I occipital condyle fracture, unspecified side, subsequent encounter for fracture with routine healing
S02.110G	Type I occipital condyle fracture, unspecified side, subsequent encounter for fracture with delayed healing
S02.110S	Type I occipital condyle fracture, unspecified side, sequela
S02.111D	Type II occipital condyle fracture, unspecified side, subsequent encounter for fracture with routine healing
S02.111G	Type II occipital condyle fracture, unspecified side, subsequent encounter for fracture with delayed healing
S02.111S	Type II occipital condyle fracture, unspecified side, sequela
S02.112D	Type III occipital condyle fracture, unspecified side, subsequent encounter for fracture with routine healing



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Code	Description
S02.112G	Type III occipital condyle fracture, unspecified side, subsequent encounter for fracture with delayed healing
S02.112S	Type III occipital condyle fracture, unspecified side, sequela
S02.113D	Unspecified occipital condyle fracture, subsequent encounter for fracture with routine healing
S02.113G	Unspecified occipital condyle fracture, subsequent encounter for fracture with delayed healing
S02.113S	Unspecified occipital condyle fracture, sequela
S02.118D	Other fracture of occiput, unspecified side, subsequent encounter for fracture with routine healing
S02.118G	Other fracture of occiput, unspecified side, subsequent encounter for fracture with delayed healing
S02.118S	Other fracture of occiput, unspecified side, sequela
S02.119D	Unspecified fracture of occiput, subsequent encounter for fracture with routine healing
S02.119G	Unspecified fracture of occiput, subsequent encounter for fracture with delayed healing
S02.119S	Unspecified fracture of occiput, sequela
*S02.11AA	*Type I occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11AB	*Type I occipital condyle fracture, right side, initial encounter for open fracture
*S02.11BA	*Type I occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11BB	*Type I occipital condyle fracture, left side, initial encounter for open fracture
*S02.11CA	*Type II occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11CB	*Type II occipital condyle fracture, right side, initial encounter for open fracture
*S02.11DA	*Type II occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11DB	*Type II occipital condyle fracture, left side, initial encounter for open fracture
*S02.11EA	*Type III occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11EB	*Type III occipital condyle fracture, right side, initial encounter for open fracture
*S02.11FA	*Type III occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11FB	*Type III occipital condyle fracture, left side, initial encounter for open fracture
*S02.11GA	*Other fracture of occiput, right side, initial encounter for closed fracture
*S02.11GB	*Other fracture of occiput, right side, initial encounter for open fracture
*S02.11HA	*Other fracture of occiput, left side, initial encounter for closed fracture
*S02.11HB	*Other fracture of occiput, left side, initial encounter for open fracture



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Code	Description
S02.19XD	Other fracture of base of skull, subsequent encounter for fracture with routine healing
S02.19XG	Other fracture of base of skull, subsequent encounter for fracture with delayed healing
S02.19XS	Other fracture of base of skull, sequela
S02.2XXD	Fracture of nasal bones, subsequent encounter for fracture with routine healing
S02.2XXG	Fracture of nasal bones, subsequent encounter for fracture with delayed healing
S02.2XXS	Fracture of nasal bones, sequela
*S02.30XA	*Fracture of orbital floor, unspecified side, initial encounter for closed fracture
*S02.30XB	*Fracture of orbital floor, unspecified side, initial encounter for open fracture
*S02.31XA	*Fracture of orbital floor, right side, initial encounter for closed fracture
*S02.31XB	*Fracture of orbital floor, right side, initial encounter for open fracture
*S02.32XA	*Fracture of orbital floor, left side, initial encounter for closed fracture
*S02.32XB	*Fracture of orbital floor, left side, initial encounter for open fracture
S02.400D	Malar fracture, unspecified side, subsequent encounter for fracture with routine healing
S02.400G	Malar fracture, unspecified side, subsequent encounter for fracture with delayed healing
S02.400S	Malar fracture, unspecified side, sequela
S02.401D	Maxillary fracture, unspecified side, subsequent encounter for fracture with routine healing
S02.401G	Maxillary fracture, unspecified side, subsequent encounter for fracture with delayed healing
S02.401S	Maxillary fracture, unspecified side, sequela
S02.402D	Zygomatic fracture, unspecified side, subsequent encounter for fracture with routine healing
S02.402G	Zygomatic fracture, unspecified side, subsequent encounter for fracture with delayed healing
S02.402S	Zygomatic fracture, unspecified side, sequela
*S02.40AA	*Malar fracture, right side, initial encounter for closed fracture
*S02.40AB	*Malar fracture, right side, initial encounter for open fracture
*S02.40AG	*Malar fracture, right side, subsequent encounter for fracture with delayed healing
*S02.40BA	*Malar fracture, left side, initial encounter for closed fracture
*S02.40BB	*Malar fracture, left side, initial encounter for open fracture
*S02.40CA	*Maxillary fracture, right side, initial encounter for closed fracture
*S02.40CB	*Maxillary fracture, right side, initial encounter for open fracture



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Code	Description
*S02.40DA	*Maxillary fracture, left side, initial encounter for closed fracture
*S02.40DB	*Maxillary fracture, left side, initial encounter for open fracture
*S02.40EA	*Zygomatic fracture, right side, initial encounter for closed fracture
*S02.40EB	*Zygomatic fracture, right side, initial encounter for open fracture
*S02.40FA	*Zygomatic fracture, left side, initial encounter for closed fracture
*S02.40FB	*Zygomatic fracture, left side, initial encounter for open fracture
S02.411D	LeFort I fracture, subsequent encounter for fracture with routine healing
S02.411G	LeFort I fracture, subsequent encounter for fracture with delayed healing
S02.411S	LeFort I fracture, sequela
S02.412D	LeFort II fracture, subsequent encounter for fracture with routine healing
S02.412G	LeFort II fracture, subsequent encounter for fracture with delayed healing
S02.412S	LeFort II fracture, sequela
S02.413D	LeFort III fracture, subsequent encounter for fracture with routine healing
S02.413G	LeFort III fracture, subsequent encounter for fracture with delayed healing
S02.413S	LeFort III fracture, sequela
S02.42XD	Fracture of alveolus of maxilla, subsequent encounter for fracture with routine healing
S02.42XG	Fracture of alveolus of maxilla, subsequent encounter for fracture with delayed healing
S02.42XS	Fracture of alveolus of maxilla, sequela
S02.5XXD	Fracture of tooth (traumatic), subsequent encounter for fracture with routine healing
S02.5XXG	Fracture of tooth (traumatic), subsequent encounter for fracture with delayed healing
S02.5XXS	Fracture of tooth (traumatic), sequela
S02.600D	Fracture of unspecified part of body of mandible, unspecified side, subsequent encounter for fracture with routine healing
S02.600G	Fracture of unspecified part of body of mandible, unspecified side, subsequent encounter for fracture with delayed healing
S02.600S	Fracture of unspecified part of body of mandible, unspecified side, sequela
*S02.601A	*Fracture of unspecified part of body of right mandible, initial encounter for closed fracture
*S02.601B	*Fracture of unspecified part of body of right mandible, initial encounter for open fracture
*S02.602A	*Fracture of unspecified part of body of left mandible, initial encounter for closed fracture



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Code	Description
*S02.602B	*Fracture of unspecified part of body of left mandible, initial encounter for open fracture
S02.609D	Fracture of mandible, unspecified, subsequent encounter for fracture with routine healing
S02.609G	Fracture of mandible, unspecified, subsequent encounter for fracture with delayed healing
S02.609S	Fracture of mandible, unspecified, sequela
*S02.610A	*Fracture of condylar process of mandible, unspecified side, initial encounter for closed fracture
*S02.610B	*Fracture of condylar process of mandible, unspecified side, initial encounter for open fracture
*S02.611A	*Fracture of condylar process of right mandible, initial encounter for closed fracture
*S02.611B	*Fracture of condylar process of right mandible, initial encounter for open fracture
*S02.612A	*Fracture of condylar process of left mandible, initial encounter for closed fracture
*S02.612B	*Fracture of condylar process of left mandible, initial encounter for open fracture
*S02.620A	*Fracture of subcondylar process of mandible, unspecified side, initial encounter for closed fracture
*S02.620B	*Fracture of subcondylar process of mandible, unspecified side, initial encounter for open fracture
*S02.621A	*Fracture of subcondylar process of right mandible, initial encounter for closed fracture
*S02.621B	*Fracture of subcondylar process of right mandible, initial encounter for open fracture
*S02.622A	*Fracture of subcondylar process of left mandible, initial encounter for closed fracture
*S02.622B	*Fracture of subcondylar process of left mandible, initial encounter for open fracture
*S02.630A	*Fracture of coronoid process of mandible, unspecified side, initial encounter for closed fracture
*S02.630B	*Fracture of coronoid process of mandible, unspecified side, initial encounter for open fracture
*S02.631A	*Fracture of coronoid process of right mandible, initial encounter for closed fracture
*S02.631B	*Fracture of coronoid process of right mandible, initial encounter for open fracture
*S02.632A	*Fracture of coronoid process of left mandible, initial encounter for closed fracture
*S02.632B	*Fracture of coronoid process of left mandible, initial encounter for open fracture
*S02.640A	*Fracture of ramus of mandible, unspecified side, initial encounter for closed fracture



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Code	Description
*S02.640B	*Fracture of ramus of mandible, unspecified side, initial encounter for open fracture
*S02.641A	*Fracture of ramus of right mandible, initial encounter for closed fracture
*S02.641B	*Fracture of ramus of right mandible, initial encounter for open fracture
*S02.642A	*Fracture of ramus of left mandible, initial encounter for closed fracture
*S02.642B	*Fracture of ramus of left mandible, initial encounter for open fracture
*S02.650A	*Fracture of angle of mandible, unspecified side, initial encounter for closed fracture
*S02.650B	*Fracture of angle of mandible, unspecified side, initial encounter for open fracture
*S02.651A	*Fracture of angle of right mandible, initial encounter for closed fracture
*S02.651B	*Fracture of angle of right mandible, initial encounter for open fracture
*S02.652A	*Fracture of angle of left mandible, initial encounter for closed fracture
*S02.652B	*Fracture of angle of left mandible, initial encounter for open fracture
S02.66XD	Fracture of symphysis of mandible, subsequent encounter for fracture with routine healing
S02.66XG	Fracture of symphysis of mandible, subsequent encounter for fracture with delayed healing
S02.66XS	Fracture of symphysis of mandible, sequela
*S02.670A	*Fracture of alveolus of mandible, unspecified side, initial encounter for closed fracture
*S02.670B	*Fracture of alveolus of mandible, unspecified side, initial encounter for open fracture
*S02.671A	*Fracture of alveolus of right mandible, initial encounter for closed fracture
*S02.671B	*Fracture of alveolus of right mandible, initial encounter for open fracture
*S02.672A	*Fracture of alveolus of left mandible, initial encounter for closed fracture
*S02.672B	*Fracture of alveolus of left mandible, initial encounter for open fracture
S02.69XD	Fracture of mandible of other specified site, subsequent encounter for fracture with routine healing
S02.69XG	Fracture of mandible of other specified site, subsequent encounter for fracture with delayed healing
S02.69XS	Fracture of mandible of other specified site, sequela
*S02.80XA	*Fracture of other specified skull and facial bones, unspecified side, initial encounter for closed fracture
*S02.80XB	*Fracture of other specified skull and facial bones, unspecified side, initial encounter for open fracture
*S02.81XA	*Fracture of other specified skull and facial bones, right side, initial encounter for closed fracture



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Code	Description
*S02.81XB	*Fracture of other specified skull and facial bones, right side, initial encounter for open fracture
*S02.82XA	*Fracture of other specified skull and facial bones, left side, initial encounter for closed fracture
*S02.82XB	*Fracture of other specified skull and facial bones, left side, initial encounter for open fracture
S02.91XD	Unspecified fracture of skull, subsequent encounter for fracture with routine healing
S02.91XG	Unspecified fracture of skull, subsequent encounter for fracture with delayed healing
S02.91XS	Unspecified fracture of skull, sequela
S02.92XD	Unspecified fracture of facial bones, subsequent encounter for fracture with routine healing
S02.92XG	Unspecified fracture of facial bones, subsequent encounter for fracture with delayed healing
S02.92XS	Unspecified fracture of facial bones, sequela
S03.1XXA	Dislocation of septal cartilage of nose, initial encounter
S03.1XXS	Dislocation of septal cartilage of nose, sequela
S03.2XXS	Dislocation of tooth, sequela
S03.8XXA	Sprain of joints and ligaments of other parts of head, initial encounter
S03.8XXS	Sprain of joints and ligaments of other parts of head, sequela
S03.9XXA	Sprain of joints and ligaments of unspecified parts of head, initial encounter
S03.9XXS	Sprain of joints and ligaments of unspecified parts of head, sequela
S04.011S	Injury of optic nerve, right eye, sequela
S04.012S	Injury of optic nerve, left eye, sequela
S04.019S	Injury of optic nerve, unspecified eye, sequela
S04.02XS	Injury of optic chiasm, sequela
S04.031S	Injury of optic tract and pathways, right eye, sequela
S04.032S	Injury of optic tract and pathways, left eye, sequela
S04.039S	Injury of optic tract and pathways, unspecified eye, sequela
S04.041S	Injury of visual cortex, right eye, sequela
S04.042S	Injury of visual cortex, left eye, sequela
S04.049S	Injury of visual cortex, unspecified eye, sequela
S04.10XS	Injury of oculomotor nerve, unspecified side, sequela
S04.11XS	Injury of oculomotor nerve, right side, sequela

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Code	Description
S04.12XS	Injury of oculomotor nerve, left side, sequela
S04.20XS	Injury of trochlear nerve, unspecified side, sequela
S04.21XS	Injury of trochlear nerve, right side, sequela
S04.22XS	Injury of trochlear nerve, left side, sequela
S04.30XS	Injury of trigeminal nerve, unspecified side, sequela
S04.31XS	Injury of trigeminal nerve, right side, sequela
S04.32XS	Injury of trigeminal nerve, left side, sequela
S04.40XS	Injury of abducent nerve, unspecified side, sequela
S04.41XS	Injury of abducent nerve, right side, sequela
S04.42XS	Injury of abducent nerve, left side, sequela
S04.50XS	Injury of facial nerve, unspecified side, sequela
S04.51XS	Injury of facial nerve, right side, sequela
S04.52XS	Injury of facial nerve, left side, sequela
S04.60XS	Injury of acoustic nerve, unspecified side, sequela
S04.61XS	Injury of acoustic nerve, right side, sequela
S04.62XS	Injury of acoustic nerve, left side, sequela
S04.70XS	Injury of accessory nerve, unspecified side, sequela
S04.71XS	Injury of accessory nerve, right side, sequela
S04.72XS	Injury of accessory nerve, left side, sequela
S04.811S	Injury of olfactory [1st] nerve, right side, sequela
S04.812S	Injury of olfactory [1st] nerve, left side, sequela
S04.819S	Injury of olfactory [1st] nerve, unspecified side, sequela
S04.891S	Injury of other cranial nerves, right side, sequela
S04.892S	Injury of other cranial nerves, left side, sequela
S04.899S	Injury of other cranial nerves, unspecified side, sequela
S04.9XXS	Injury of unspecified cranial nerve, sequela
S05.00XA	Injury of conjunctiva and corneal abrasion without foreign body, unspecified eye, initial encounter
S05.00XS	Injury of conjunctiva and corneal abrasion without foreign body, unspecified eye, sequela
S05.01XA	Injury of conjunctiva and corneal abrasion without foreign body, right eye, initial encounter
S05.01XS	Injury of conjunctiva and corneal abrasion without foreign body, right eye, sequela

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Code	Description
S05.02XA	Injury of conjunctiva and corneal abrasion without foreign body, left eye, initial encounter
S05.02XS	Injury of conjunctiva and corneal abrasion without foreign body, left eye, sequela
S05.10XS	Contusion of eyeball and orbital tissues, unspecified eye, sequela
S05.11XS	Contusion of eyeball and orbital tissues, right eye, sequela
S05.12XS	Contusion of eyeball and orbital tissues, left eye, sequela
S05.20XS	Ocular laceration and rupture with prolapse or loss of intraocular tissue, unspecified eye, sequela
S05.21XS	Ocular laceration and rupture with prolapse or loss of intraocular tissue, right eye, sequela
S05.22XS	Ocular laceration and rupture with prolapse or loss of intraocular tissue, left eye, sequela
S05.30XS	Ocular laceration without prolapse or loss of intraocular tissue, unspecified eye, sequela
S05.31XS	Ocular laceration without prolapse or loss of intraocular tissue, right eye, sequela
S05.32XS	Ocular laceration without prolapse or loss of intraocular tissue, left eye, sequela
S05.40XS	Penetrating wound of orbit with or without foreign body, unspecified eye, sequela
S05.41XS	Penetrating wound of orbit with or without foreign body, right eye, sequela
S05.42XS	Penetrating wound of orbit with or without foreign body, left eye, sequela
S05.50XS	Penetrating wound with foreign body of unspecified eyeball, sequela
S05.51XS	Penetrating wound with foreign body of right eyeball, sequela
S05.52XS	Penetrating wound with foreign body of left eyeball, sequela
S05.60XS	Penetrating wound without foreign body of unspecified eyeball, sequela
S05.61XS	Penetrating wound without foreign body of right eyeball, sequela
S05.62XS	Penetrating wound without foreign body of left eyeball, sequela
S05.70XS	Avulsion of unspecified eye, sequela
S05.71XS	Avulsion of right eye, sequela
S05.72XS	Avulsion of left eye, sequela
S05.8X1S	Other injuries of right eye and orbit, sequela
S05.8X2S	Other injuries of left eye and orbit, sequela
S05.8X9S	Other injuries of unspecified eye and orbit, sequela
S05.90XA	Unspecified injury of unspecified eye and orbit, initial encounter
S05.90XS	Unspecified injury of unspecified eye and orbit, sequela
S05.91XS	Unspecified injury of right eye and orbit, sequela
S05.92XS	Unspecified injury of left eye and orbit, sequela

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Code	Description
S06.0X0S	Concussion without loss of consciousness, sequela
S06.0X1S	Concussion with loss of consciousness of 30 minutes or less, sequela
S06.0X9S	Concussion with loss of consciousness of unspecified duration, sequela
S06.1X0S	Traumatic cerebral edema without loss of consciousness, sequela
S06.1X1S	Traumatic cerebral edema with loss of consciousness of 30 minutes or less, sequela
S06.1X2S	Traumatic cerebral edema with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.1X3S	Traumatic cerebral edema with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.1X4S	Traumatic cerebral edema with loss of consciousness of 6 hours to 24 hours, sequela
S06.1X5S	Traumatic cerebral edema with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.1X6S	Traumatic cerebral edema with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.1X7S	Traumatic cerebral edema with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.1X8S	Traumatic cerebral edema with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.1X9S	Traumatic cerebral edema with loss of consciousness of unspecified duration, sequela
S06.2X0S	Diffuse traumatic brain injury without loss of consciousness, sequela
S06.2X1S	Diffuse traumatic brain injury with loss of consciousness of 30 minutes or less, sequela
S06.2X2S	Diffuse traumatic brain injury with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.2X3S	Diffuse traumatic brain injury with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.2X4S	Diffuse traumatic brain injury with loss of consciousness of 6 hours to 24 hours, sequela
S06.2X5S	Diffuse traumatic brain injury with loss of consciousness greater than 24 hours with return to pre-existing conscious levels, sequela
S06.2X6S	Diffuse traumatic brain injury with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.2X7S	Diffuse traumatic brain injury with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.2X8S	Diffuse traumatic brain injury with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela



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Code	Description
S06.2X9S	Diffuse traumatic brain injury with loss of consciousness of unspecified duration, sequela
S06.300S	Unspecified focal traumatic brain injury without loss of consciousness, sequela
S06.301S	Unspecified focal traumatic brain injury with loss of consciousness of 30 minutes or less, sequela
S06.302S	Unspecified focal traumatic brain injury with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.303S	Unspecified focal traumatic brain injury with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.304S	Unspecified focal traumatic brain injury with loss of consciousness of 6 hours to 24 hours, sequela
S06.305S	Unspecified focal traumatic brain injury with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.306S	Unspecified focal traumatic brain injury with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.307S	Unspecified focal traumatic brain injury with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.308S	Unspecified focal traumatic brain injury with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.309S	Unspecified focal traumatic brain injury with loss of consciousness of unspecified duration, sequela
S06.310S	Contusion and laceration of right cerebrum without loss of consciousness, sequela
S06.311S	Contusion and laceration of right cerebrum with loss of consciousness of 30 minutes or less, sequela
S06.312S	Contusion and laceration of right cerebrum with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.313S	Contusion and laceration of right cerebrum with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.314S	Contusion and laceration of right cerebrum with loss of consciousness of 6 hours to 24 hours, sequela
S06.315S	Contusion and laceration of right cerebrum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.316S	Contusion and laceration of right cerebrum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.317S	Contusion and laceration of right cerebrum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela



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Code	Description
S06.318S	Contusion and laceration of right cerebrum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.319S	Contusion and laceration of right cerebrum with loss of consciousness of unspecified duration, sequela
S06.320S	Contusion and laceration of left cerebrum without loss of consciousness, sequela
S06.321S	Contusion and laceration of left cerebrum with loss of consciousness of 30 minutes or less, sequela
S06.322S	Contusion and laceration of left cerebrum with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.323S	Contusion and laceration of left cerebrum with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.324S	Contusion and laceration of left cerebrum with loss of consciousness of 6 hours to 24 hours, sequela
S06.325S	Contusion and laceration of left cerebrum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.326S	Contusion and laceration of left cerebrum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.327S	Contusion and laceration of left cerebrum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.328S	Contusion and laceration of left cerebrum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.329S	Contusion and laceration of left cerebrum with loss of consciousness of unspecified duration, sequela
S06.330S	Contusion and laceration of cerebrum, unspecified, without loss of consciousness, sequela
S06.331S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of 30 minutes or less, sequela
S06.332S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.333S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.334S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of 6 hours to 24 hours, sequela
S06.335S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.336S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela



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Code	Description
S06.337S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.338S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.339S	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of unspecified duration, sequela
S06.340S	Traumatic hemorrhage of right cerebrum without loss of consciousness, sequela
S06.341S	Traumatic hemorrhage of right cerebrum with loss of consciousness of 30 minutes or less, sequela
S06.342S	Traumatic hemorrhage of right cerebrum with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.343S	Traumatic hemorrhage of right cerebrum with loss of consciousness of 1 hours to 5 hours 59 minutes, sequela
S06.344S	Traumatic hemorrhage of right cerebrum with loss of consciousness of 6 hours to 24 hours, sequela
S06.345S	Traumatic hemorrhage of right cerebrum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.346S	Traumatic hemorrhage of right cerebrum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.347S	Traumatic hemorrhage of right cerebrum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.348S	Traumatic hemorrhage of right cerebrum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.349S	Traumatic hemorrhage of right cerebrum with loss of consciousness of unspecified duration, sequela
S06.350S	Traumatic hemorrhage of left cerebrum without loss of consciousness, sequela
S06.351S	Traumatic hemorrhage of left cerebrum with loss of consciousness of 30 minutes or less, sequela
S06.352S	Traumatic hemorrhage of left cerebrum with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.353S	Traumatic hemorrhage of left cerebrum with loss of consciousness of 1 hours to 5 hours 59 minutes, sequela
S06.354S	Traumatic hemorrhage of left cerebrum with loss of consciousness of 6 hours to 24 hours, sequela
S06.355S	Traumatic hemorrhage of left cerebrum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela



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Code	Description
S06.356S	Traumatic hemorrhage of left cerebrum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.357S	Traumatic hemorrhage of left cerebrum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.358S	Traumatic hemorrhage of left cerebrum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.359S	Traumatic hemorrhage of left cerebrum with loss of consciousness of unspecified duration, sequela
S06.360S	Traumatic hemorrhage of cerebrum, unspecified, without loss of consciousness, sequela
S06.361S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 30 minutes or less, sequela
S06.362S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.363S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 1 hours to 5 hours 59 minutes, sequela
S06.364S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 6 hours to 24 hours, sequela
S06.365S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.366S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.367S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.368S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.369S	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of unspecified duration, sequela
S06.370S	Contusion, laceration, and hemorrhage of cerebellum without loss of consciousness, sequela
S06.371S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness of 30 minutes or less, sequela
S06.372S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.373S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela



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Code	Description
S06.374S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness of 6 hours to 24 hours, sequela
S06.375S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.376S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.377S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.378S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.379S	Contusion, laceration, and hemorrhage of cerebellum with loss of consciousness of unspecified duration, sequela
S06.380S	Contusion, laceration, and hemorrhage of brainstem without loss of consciousness, sequela
S06.381S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness of 30 minutes or less, sequela
S06.382S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.383S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.384S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness of 6 hours to 24 hours, sequela
S06.385S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.386S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.387S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.388S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.389S	Contusion, laceration, and hemorrhage of brainstem with loss of consciousness of unspecified duration, sequela
S06.4X0S	Epidural hemorrhage without loss of consciousness, sequela
S06.4X1S	Epidural hemorrhage with loss of consciousness of 30 minutes or less, sequela
S06.4X2S	Epidural hemorrhage with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.4X3S	Epidural hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela

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Code	Description
S06.4X4S	Epidural hemorrhage with loss of consciousness of 6 hours to 24 hours, sequela
S06.4X5S	Epidural hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.4X6S	Epidural hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.4X7S	Epidural hemorrhage with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.4X8S	Epidural hemorrhage with loss of consciousness of any duration with death due to other causes prior to regaining consciousness, sequela
S06.4X9S	Epidural hemorrhage with loss of consciousness of unspecified duration, sequela
S06.5X0S	Traumatic subdural hemorrhage without loss of consciousness, sequela
S06.5X1S	Traumatic subdural hemorrhage with loss of consciousness of 30 minutes or less, sequela
S06.5X2S	Traumatic subdural hemorrhage with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.5X3S	Traumatic subdural hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.5X4S	Traumatic subdural hemorrhage with loss of consciousness of 6 hours to 24 hours, sequela
S06.5X5S	Traumatic subdural hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.5X6S	Traumatic subdural hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.5X7S	Traumatic subdural hemorrhage with loss of consciousness of any duration with death due to brain injury before regaining consciousness, sequela
S06.5X8S	Traumatic subdural hemorrhage with loss of consciousness of any duration with death due to other cause before regaining consciousness, sequela
S06.5X9S	Traumatic subdural hemorrhage with loss of consciousness of unspecified duration, sequela
S06.6X0S	Traumatic subarachnoid hemorrhage without loss of consciousness, sequela
S06.6X1S	Traumatic subarachnoid hemorrhage with loss of consciousness of 30 minutes or less, sequela
S06.6X2S	Traumatic subarachnoid hemorrhage with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.6X3S	Traumatic subarachnoid hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela



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Code	Description
S06.6X4S	Traumatic subarachnoid hemorrhage with loss of consciousness of 6 hours to 24 hours, sequela
S06.6X5S	Traumatic subarachnoid hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.6X6S	Traumatic subarachnoid hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.6X7S	Traumatic subarachnoid hemorrhage with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.6X8S	Traumatic subarachnoid hemorrhage with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.6X9S	Traumatic subarachnoid hemorrhage with loss of consciousness of unspecified duration, sequela
S06.810S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified without loss of consciousness, sequela
S06.811S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of 30 minutes or less, sequela
S06.812S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.813S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.814S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of 6 hours to 24 hours, sequela
S06.815S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.816S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.817S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.818S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.819S	Injury of right internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of unspecified duration, sequela
S06.820S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified without loss of consciousness, sequela



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Code	Description
S06.821S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of 30 minutes or less, sequela
S06.822S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.823S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.824S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of 6 hours to 24 hours, sequela
S06.825S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.826S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.827S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.828S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.829S	Injury of left internal carotid artery, intracranial portion, not elsewhere classified with loss of consciousness of unspecified duration, sequela
S06.890S	Other specified intracranial injury without loss of consciousness, sequela
S06.891S	Other specified intracranial injury with loss of consciousness of 30 minutes or less, sequela
S06.892S	Other specified intracranial injury with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.893S	Other specified intracranial injury with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.894S	Other specified intracranial injury with loss of consciousness of 6 hours to 24 hours, sequela
S06.895S	Other specified intracranial injury with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.896S	Other specified intracranial injury with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.897S	Other specified intracranial injury with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.898S	Other specified intracranial injury with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela

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Code	Description
S06.899S	Other specified intracranial injury with loss of consciousness of unspecified duration, sequela
S06.9X0S	Unspecified intracranial injury without loss of consciousness, sequela
S06.9X1S	Unspecified intracranial injury with loss of consciousness of 30 minutes or less, sequela
S06.9X2S	Unspecified intracranial injury with loss of consciousness of 31 minutes to 59 minutes, sequela
S06.9X3S	Unspecified intracranial injury with loss of consciousness of 1 hour to 5 hours 59 minutes, sequela
S06.9X4S	Unspecified intracranial injury with loss of consciousness of 6 hours to 24 hours, sequela
S06.9X5S	Unspecified intracranial injury with loss of consciousness greater than 24 hours with return to pre-existing conscious level, sequela
S06.9X6S	Unspecified intracranial injury with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, sequela
S06.9X7S	Unspecified intracranial injury with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, sequela
S06.9X8S	Unspecified intracranial injury with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, sequela
S06.9X9S	Unspecified intracranial injury with loss of consciousness of unspecified duration, sequela
S07.0XXS	Crushing injury of face, sequela
S07.1XXS	Crushing injury of skull, sequela
S07.8XXS	Crushing injury of other parts of head, sequela
S07.9XXS	Crushing injury of head, part unspecified, sequela
S08.0XXS	Avulsion of scalp, sequela
S08.111S	Complete traumatic amputation of right ear, sequela
S08.112S	Complete traumatic amputation of left ear, sequela
S08.119S	Complete traumatic amputation of unspecified ear, sequela
S08.121S	Partial traumatic amputation of right ear, sequela
S08.122S	Partial traumatic amputation of left ear, sequela
S08.129S	Partial traumatic amputation of unspecified ear, sequela
S08.811S	Complete traumatic amputation of nose, sequela
S08.812S	Partial traumatic amputation of nose, sequela
S08.89XS	Traumatic amputation of other parts of head, sequela
S09.0XXS	Injury of blood vessels of head, not elsewhere classified, sequela

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Code	Description
S09.10XS	Unspecified injury of muscle and tendon of head, sequela
S09.11XS	Strain of muscle and tendon of head, sequela
S09.12XS	Laceration of muscle and tendon of head, sequela
S09.19XS	Other specified injury of muscle and tendon of head, sequela
S09.20XS	Traumatic rupture of unspecified ear drum, sequela
S09.21XS	Traumatic rupture of right ear drum, sequela
S09.22XS	Traumatic rupture of left ear drum, sequela
S09.301S	Unspecified injury of right middle and inner ear, sequela
S09.302S	Unspecified injury of left middle and inner ear, sequela
S09.309S	Unspecified injury of unspecified middle and inner ear, sequela
S09.311S	Primary blast injury of right ear, sequela
S09.312S	Primary blast injury of left ear, sequela
S09.313S	Primary blast injury of ear, bilateral, sequela
S09.319S	Primary blast injury of unspecified ear, sequela
S09.391S	Other specified injury of right middle and inner ear, sequela
S09.392S	Other specified injury of left middle and inner ear, sequela
S09.399S	Other specified injury of unspecified middle and inner ear, sequela
S09.8XXS	Other specified injuries of head, sequela
S09.90XS	Unspecified injury of head, sequela
S09.91XS	Unspecified injury of ear, sequela
S09.92XS	Unspecified injury of nose, sequela
S09.93XS	Unspecified injury of face, sequela
S10.0XXS	Contusion of throat, sequela
S10.10XA	Unspecified superficial injuries of throat, initial encounter
S10.10XS	Unspecified superficial injuries of throat, sequela
S10.11XA	Abrasion of throat, initial encounter
S10.11XS	Abrasion of throat, sequela
S10.12XA	Blister (nonthermal) of throat, initial encounter
S10.12XS	Blister (nonthermal) of throat, sequela
S10.14XA	External constriction of part of throat, initial encounter

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Code	Description
S10.14XS	External constriction of part of throat, sequela
S10.15XA	Superficial foreign body of throat, initial encounter
S10.15XS	Superficial foreign body of throat, sequela
S10.16XA	Insect bite (nonvenomous) of throat, initial encounter
S10.16XS	Insect bite (nonvenomous) of throat, sequela
S10.17XA	Other superficial bite of throat, initial encounter
S10.17XS	Other superficial bite of throat, sequela
S10.80XA	Unspecified superficial injury of other specified part of neck, initial encounter
S10.80XS	Unspecified superficial injury of other specified part of neck, sequela
S10.81XA	Abrasion of other specified part of neck, initial encounter
S10.81XS	Abrasion of other specified part of neck, sequela
S10.82XA	Blister (nonthermal) of other specified part of neck, initial encounter
S10.82XS	Blister (nonthermal) of other specified part of neck, sequela
S10.83XS	Contusion of other specified part of neck, sequela
S10.84XA	External constriction of other specified part of neck, initial encounter
S10.84XS	External constriction of other specified part of neck, sequela
S10.85XA	Superficial foreign body of other specified part of neck, initial encounter
S10.85XS	Superficial foreign body of other specified part of neck, sequela
S10.86XA	Insect bite of other specified part of neck, initial encounter
S10.86XS	Insect bite of other specified part of neck, sequela
S10.87XA	Other superficial bite of other specified part of neck, initial encounter
S10.87XS	Other superficial bite of other specified part of neck, sequela
S10.90XA	Unspecified superficial injury of unspecified part of neck, initial encounter
S10.90XS	Unspecified superficial injury of unspecified part of neck, sequela
S10.91XA	Abrasion of unspecified part of neck, initial encounter
S10.91XS	Abrasion of unspecified part of neck, sequela
S10.92XA	Blister (nonthermal) of unspecified part of neck, initial encounter
S10.92XS	Blister (nonthermal) of unspecified part of neck, sequela
S10.93XS	Contusion of unspecified part of neck, sequela
S10.94XA	External constriction of unspecified part of neck, initial encounter

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Code	Description
S10.94XS	External constriction of unspecified part of neck, sequela
S10.95XA	Superficial foreign body of unspecified part of neck, initial encounter
S10.95XS	Superficial foreign body of unspecified part of neck, sequela
S10.96XA	Insect bite of unspecified part of neck, initial encounter
S10.96XS	Insect bite of unspecified part of neck, sequela
S10.97XA	Other superficial bite of unspecified part of neck, initial encounter
S10.97XS	Other superficial bite of unspecified part of neck, sequela
S11.011S	Laceration without foreign body of larynx, sequela
S11.012S	Laceration with foreign body of larynx, sequela
S11.013S	Puncture wound without foreign body of larynx, sequela
S11.014S	Puncture wound with foreign body of larynx, sequela
S11.015S	Open bite of larynx, sequela
S11.019S	Unspecified open wound of larynx, sequela
S11.021S	Laceration without foreign body of trachea, sequela
S11.022S	Laceration with foreign body of trachea, sequela
S11.023S	Puncture wound without foreign body of trachea, sequela
S11.024S	Puncture wound with foreign body of trachea, sequela
S11.025S	Open bite of trachea, sequela
S11.029S	Unspecified open wound of trachea, sequela
S11.031S	Laceration without foreign body of vocal cord, sequela
S11.032S	Laceration with foreign body of vocal cord, sequela
S11.033S	Puncture wound without foreign body of vocal cord, sequela
S11.034S	Puncture wound with foreign body of vocal cord, sequela
S11.035S	Open bite of vocal cord, sequela
S11.039S	Unspecified open wound of vocal cord, sequela
S11.10XS	Unspecified open wound of thyroid gland, sequela
S11.11XS	Laceration without foreign body of thyroid gland, sequela
S11.12XS	Laceration with foreign body of thyroid gland, sequela
S11.13XS	Puncture wound without foreign body of thyroid gland, sequela
S11.14XS	Puncture wound with foreign body of thyroid gland, sequela

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Code	Description
S11.15XS	Open bite of thyroid gland, sequela
S11.20XS	Unspecified open wound of pharynx and cervical esophagus, sequela
S11.21XS	Laceration without foreign body of pharynx and cervical esophagus, sequela
S11.22XS	Laceration with foreign body of pharynx and cervical esophagus, sequela
S11.23XS	Puncture wound without foreign body of pharynx and cervical esophagus, sequela
S11.24XS	Puncture wound with foreign body of pharynx and cervical esophagus, sequela
S11.25XS	Open bite of pharynx and cervical esophagus, sequela
S11.80XS	Unspecified open wound of other specified part of neck, sequela
S11.81XS	Laceration without foreign body of other specified part of neck, sequela
S11.82XS	Laceration with foreign body of other specified part of neck, sequela
S11.83XS	Puncture wound without foreign body of other specified part of neck, sequela
S11.84XS	Puncture wound with foreign body of other specified part of neck, sequela
S11.85XS	Open bite of other specified part of neck, sequela
S11.89XS	Other open wound of other specified part of neck, sequela
S11.90XA	Unspecified open wound of unspecified part of neck, initial encounter
S11.90XS	Unspecified open wound of unspecified part of neck, sequela
S11.91XS	Laceration without foreign body of unspecified part of neck, sequela
S11.92XS	Laceration with foreign body of unspecified part of neck, sequela
S11.93XS	Puncture wound without foreign body of unspecified part of neck, sequela
S11.94XS	Puncture wound with foreign body of unspecified part of neck, sequela
S11.95XS	Open bite of unspecified part of neck, sequela
S12.000D	Unspecified displaced fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.000G	Unspecified displaced fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.000S	Unspecified displaced fracture of first cervical vertebra, sequela
S12.001D	Unspecified nondisplaced fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.001G	Unspecified nondisplaced fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.001S	Unspecified nondisplaced fracture of first cervical vertebra, sequela



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Code	Description
S12.01XD	Stable burst fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.01XG	Stable burst fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.01XS	Stable burst fracture of first cervical vertebra, sequela
S12.02XD	Unstable burst fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.02XG	Unstable burst fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.02XS	Unstable burst fracture of first cervical vertebra, sequela
S12.030D	Displaced posterior arch fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.030G	Displaced posterior arch fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.030S	Displaced posterior arch fracture of first cervical vertebra, sequela
S12.031D	Nondisplaced posterior arch fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.031G	Nondisplaced posterior arch fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.031S	Nondisplaced posterior arch fracture of first cervical vertebra, sequela
S12.040D	Displaced lateral mass fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.040G	Displaced lateral mass fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.040S	Displaced lateral mass fracture of first cervical vertebra, sequela
S12.041D	Nondisplaced lateral mass fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.041G	Nondisplaced lateral mass fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.041S	Nondisplaced lateral mass fracture of first cervical vertebra, sequela
S12.090D	Other displaced fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.090G	Other displaced fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.090S	Other displaced fracture of first cervical vertebra, sequela

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Code	Description
S12.091D	Other nondisplaced fracture of first cervical vertebra, subsequent encounter for fracture with routine healing
S12.091G	Other nondisplaced fracture of first cervical vertebra, subsequent encounter for fracture with delayed healing
S12.091S	Other nondisplaced fracture of first cervical vertebra, sequela
S12.100D	Unspecified displaced fracture of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.100G	Unspecified displaced fracture of second cervical vertebra, subsequent encounter for fracture with delayed healing
S12.100S	Unspecified displaced fracture of second cervical vertebra, sequela
S12.101D	Unspecified nondisplaced fracture of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.101G	Unspecified nondisplaced fracture of second cervical vertebra, subsequent encounter for fracture with delayed healing
S12.101S	Unspecified nondisplaced fracture of second cervical vertebra, sequela
S12.110D	Anterior displaced Type II dens fracture, subsequent encounter for fracture with routine healing
S12.110G	Anterior displaced Type II dens fracture, subsequent encounter for fracture with delayed healing
S12.110S	Anterior displaced Type II dens fracture, sequela
S12.111D	Posterior displaced Type II dens fracture, subsequent encounter for fracture with routine healing
S12.111G	Posterior displaced Type II dens fracture, subsequent encounter for fracture with delayed healing
S12.111S	Posterior displaced Type II dens fracture, sequela
S12.112D	Nondisplaced Type II dens fracture, subsequent encounter for fracture with routine healing
S12.112G	Nondisplaced Type II dens fracture, subsequent encounter for fracture with delayed healing
S12.112S	Nondisplaced Type II dens fracture, sequela
S12.120D	Other displaced dens fracture, subsequent encounter for fracture with routine healing
S12.120G	Other displaced dens fracture, subsequent encounter for fracture with delayed healing
S12.120S	Other displaced dens fracture, sequela
S12.121D	Other nondisplaced dens fracture, subsequent encounter for fracture with routine healing
S12.121G	Other nondisplaced dens fracture, subsequent encounter for fracture with delayed healing

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Code	Description
S12.121S	Other nondisplaced dens fracture, sequela
S12.130D	Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.130G	Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with delayed healing
S12.130S	Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, sequela
S12.131D	Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.131G	Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with delayed healing
S12.131S	Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, sequela
S12.14XD	Type III traumatic spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.14XG	Type III traumatic spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with delayed healing
S12.14XS	Type III traumatic spondylolisthesis of second cervical vertebra, sequela
S12.150D	Other traumatic displaced spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.150G	Other traumatic displaced spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with delayed healing
S12.150S	Other traumatic displaced spondylolisthesis of second cervical vertebra, sequela
S12.151D	Other traumatic nondisplaced spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.151G	Other traumatic nondisplaced spondylolisthesis of second cervical vertebra, subsequent encounter for fracture with delayed healing
S12.151S	Other traumatic nondisplaced spondylolisthesis of second cervical vertebra, sequela
S12.190D	Other displaced fracture of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.190G	Other displaced fracture of second cervical vertebra, subsequent encounter for fracture with delayed healing
S12.190S	Other displaced fracture of second cervical vertebra, sequela
S12.191D	Other nondisplaced fracture of second cervical vertebra, subsequent encounter for fracture with routine healing
S12.191G	Other nondisplaced fracture of second cervical vertebra, subsequent encounter for fracture with delayed healing

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Code	Description
S12.191S	Other nondisplaced fracture of second cervical vertebra, sequela
S12.200D	Unspecified displaced fracture of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.200G	Unspecified displaced fracture of third cervical vertebra, subsequent encounter for fracture with delayed healing
S12.200S	Unspecified displaced fracture of third cervical vertebra, sequela
S12.201D	Unspecified nondisplaced fracture of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.201G	Unspecified nondisplaced fracture of third cervical vertebra, subsequent encounter for fracture with delayed healing
S12.201S	Unspecified nondisplaced fracture of third cervical vertebra, sequela
S12.230D	Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.230G	Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with delayed healing
S12.230S	Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, sequela
S12.231D	Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.231G	Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with delayed healing
S12.231S	Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, sequela
S12.24XD	Type III traumatic spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.24XG	Type III traumatic spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with delayed healing
S12.24XS	Type III traumatic spondylolisthesis of third cervical vertebra, sequela
S12.250D	Other traumatic displaced spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.250G	Other traumatic displaced spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with delayed healing
S12.250S	Other traumatic displaced spondylolisthesis of third cervical vertebra, sequela
S12.251D	Other traumatic nondisplaced spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.251G	Other traumatic nondisplaced spondylolisthesis of third cervical vertebra, subsequent encounter for fracture with delayed healing



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Code	Description
S12.251S	Other traumatic nondisplaced spondylolisthesis of third cervical vertebra, sequela
S12.290D	Other displaced fracture of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.290G	Other displaced fracture of third cervical vertebra, subsequent encounter for fracture with delayed healing
S12.290S	Other displaced fracture of third cervical vertebra, sequela
S12.291D	Other nondisplaced fracture of third cervical vertebra, subsequent encounter for fracture with routine healing
S12.291G	Other nondisplaced fracture of third cervical vertebra, subsequent encounter for fracture with delayed healing
S12.291S	Other nondisplaced fracture of third cervical vertebra, sequela
S12.300D	Unspecified displaced fracture of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.300G	Unspecified displaced fracture of fourth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.300S	Unspecified displaced fracture of fourth cervical vertebra, sequela
S12.301D	Unspecified nondisplaced fracture of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.301G	Unspecified nondisplaced fracture of fourth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.301S	Unspecified nondisplaced fracture of fourth cervical vertebra, sequela
S12.330D	Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.330G	Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.330S	Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, sequela
S12.331D	Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.331G	Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.331S	Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, sequela
S12.34XD	Type III traumatic spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.34XG	Type III traumatic spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with delayed healing

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Code	Description
S12.34XS	Type III traumatic spondylolisthesis of fourth cervical vertebra, sequela
S12.350D	Other traumatic displaced spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.350G	Other traumatic displaced spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.350S	Other traumatic displaced spondylolisthesis of fourth cervical vertebra, sequela
S12.351D	Other traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.351G	Other traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.351S	Other traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, sequela
S12.390D	Other displaced fracture of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.390G	Other displaced fracture of fourth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.390S	Other displaced fracture of fourth cervical vertebra, sequela
S12.391D	Other nondisplaced fracture of fourth cervical vertebra, subsequent encounter for fracture with routine healing
S12.391G	Other nondisplaced fracture of fourth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.391S	Other nondisplaced fracture of fourth cervical vertebra, sequela
S12.400D	Unspecified displaced fracture of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.400G	Unspecified displaced fracture of fifth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.400S	Unspecified displaced fracture of fifth cervical vertebra, sequela
S12.401D	Unspecified nondisplaced fracture of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.401G	Unspecified nondisplaced fracture of fifth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.401S	Unspecified nondisplaced fracture of fifth cervical vertebra, sequela
S12.430D	Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.430G	Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with delayed healing

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Code	Description
S12.430S	Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, sequela
S12.431D	Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.431G	Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.431S	Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, sequela
S12.44XD	Type III traumatic spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.44XG	Type III traumatic spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.44XS	Type III traumatic spondylolisthesis of fifth cervical vertebra, sequela
S12.450D	Other traumatic displaced spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.450G	Other traumatic displaced spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.450S	Other traumatic displaced spondylolisthesis of fifth cervical vertebra, sequela
S12.451D	Other traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.451G	Other traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.451S	Other traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, sequela
S12.490D	Other displaced fracture of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.490G	Other displaced fracture of fifth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.490S	Other displaced fracture of fifth cervical vertebra, sequela
S12.491D	Other nondisplaced fracture of fifth cervical vertebra, subsequent encounter for fracture with routine healing
S12.491G	Other nondisplaced fracture of fifth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.491S	Other nondisplaced fracture of fifth cervical vertebra, sequela
S12.500D	Unspecified displaced fracture of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.500G	Unspecified displaced fracture of sixth cervical vertebra, subsequent encounter for fracture with delayed healing



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Code	Description
S12.500S	Unspecified displaced fracture of sixth cervical vertebra, sequela
S12.501D	Unspecified nondisplaced fracture of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.501G	Unspecified nondisplaced fracture of sixth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.501S	Unspecified nondisplaced fracture of sixth cervical vertebra, sequela
S12.530D	Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.530G	Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.530S	Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, sequela
S12.531D	Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.531G	Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.531S	Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, sequela
S12.54XD	Type III traumatic spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.54XG	Type III traumatic spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.54XS	Type III traumatic spondylolisthesis of sixth cervical vertebra, sequela
S12.550D	Other traumatic displaced spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.550G	Other traumatic displaced spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.550S	Other traumatic displaced spondylolisthesis of sixth cervical vertebra, sequela
S12.551D	Other traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.551G	Other traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.551S	Other traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, sequela
S12.590D	Other displaced fracture of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.590G	Other displaced fracture of sixth cervical vertebra, subsequent encounter for fracture with delayed healing

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Code	Description
S12.590S	Other displaced fracture of sixth cervical vertebra, sequela
S12.591D	Other nondisplaced fracture of sixth cervical vertebra, subsequent encounter for fracture with routine healing
S12.591G	Other nondisplaced fracture of sixth cervical vertebra, subsequent encounter for fracture with delayed healing
S12.591S	Other nondisplaced fracture of sixth cervical vertebra, sequela
S12.600D	Unspecified displaced fracture of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.600G	Unspecified displaced fracture of seventh cervical vertebra, subsequent encounter for fracture with delayed healing
S12.600S	Unspecified displaced fracture of seventh cervical vertebra, sequela
S12.601D	Unspecified nondisplaced fracture of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.601G	Unspecified nondisplaced fracture of seventh cervical vertebra, subsequent encounter for fracture with delayed healing
S12.601S	Unspecified nondisplaced fracture of seventh cervical vertebra, sequela
S12.630D	Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.630G	Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with delayed healing
S12.630S	Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, sequela
S12.631D	Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.631G	Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with delayed healing
S12.631S	Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, sequela
S12.64XD	Type III traumatic spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.64XG	Type III traumatic spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with delayed healing
S12.64XS	Type III traumatic spondylolisthesis of seventh cervical vertebra, sequela
S12.650D	Other traumatic displaced spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.650G	Other traumatic displaced spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with delayed healing

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Code	Description
S12.650S	Other traumatic displaced spondylolisthesis of seventh cervical vertebra, sequela
S12.651D	Other traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.651G	Other traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, subsequent encounter for fracture with delayed healing
S12.651S	Other traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, sequela
S12.690D	Other displaced fracture of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.690G	Other displaced fracture of seventh cervical vertebra, subsequent encounter for fracture with delayed healing
S12.690S	Other displaced fracture of seventh cervical vertebra, sequela
S12.691D	Other nondisplaced fracture of seventh cervical vertebra, subsequent encounter for fracture with routine healing
S12.691G	Other nondisplaced fracture of seventh cervical vertebra, subsequent encounter for fracture with delayed healing
S12.691S	Other nondisplaced fracture of seventh cervical vertebra, sequela
S12.8XXD	Fracture of other parts of neck, subsequent encounter
S12.8XXS	Fracture of other parts of neck, sequela
S12.9XXD	Fracture of neck, unspecified, subsequent encounter
S12.9XXS	Fracture of neck, unspecified, sequela
S13.0XXA	Traumatic rupture of cervical intervertebral disc, initial encounter
S13.0XXS	Traumatic rupture of cervical intervertebral disc, sequela
S13.100A	Subluxation of unspecified cervical vertebrae, initial encounter
S13.100S	Subluxation of unspecified cervical vertebrae, sequela
S13.101A	Dislocation of unspecified cervical vertebrae, initial encounter
S13.101S	Dislocation of unspecified cervical vertebrae, sequela
S13.110A	Subluxation of C0/C1 cervical vertebrae, initial encounter
S13.110S	Subluxation of C0/C1 cervical vertebrae, sequela
S13.111A	Dislocation of C0/C1 cervical vertebrae, initial encounter
S13.111S	Dislocation of C0/C1 cervical vertebrae, sequela
S13.120A	Subluxation of C1/C2 cervical vertebrae, initial encounter
S13.120S	Subluxation of C1/C2 cervical vertebrae, sequela

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S13.121A	Dislocation of C1/C2 cervical vertebrae, initial encounter
S13.121S	Dislocation of C1/C2 cervical vertebrae, sequela
S13.130A	Subluxation of C2/C3 cervical vertebrae, initial encounter
S13.130S	Subluxation of C2/C3 cervical vertebrae, sequela
S13.131A	Dislocation of C2/C3 cervical vertebrae, initial encounter
S13.131S	Dislocation of C2/C3 cervical vertebrae, sequela
S13.140A	Subluxation of C3/C4 cervical vertebrae, initial encounter
S13.140S	Subluxation of C3/C4 cervical vertebrae, sequela
S13.141A	Dislocation of C3/C4 cervical vertebrae, initial encounter
S13.141S	Dislocation of C3/C4 cervical vertebrae, sequela
S13.150A	Subluxation of C4/C5 cervical vertebrae, initial encounter
S13.150S	Subluxation of C4/C5 cervical vertebrae, sequela
S13.151A	Dislocation of C4/C5 cervical vertebrae, initial encounter
S13.151S	Dislocation of C4/C5 cervical vertebrae, sequela
S13.160A	Subluxation of C5/C6 cervical vertebrae, initial encounter
S13.160S	Subluxation of C5/C6 cervical vertebrae, sequela
S13.161A	Dislocation of C5/C6 cervical vertebrae, initial encounter
S13.161S	Dislocation of C5/C6 cervical vertebrae, sequela
S13.170A	Subluxation of C6/C7 cervical vertebrae, initial encounter
S13.170S	Subluxation of C6/C7 cervical vertebrae, sequela
S13.171A	Dislocation of C6/C7 cervical vertebrae, initial encounter
S13.171S	Dislocation of C6/C7 cervical vertebrae, sequela
S13.180A	Subluxation of C7/T1 cervical vertebrae, initial encounter
S13.180S	Subluxation of C7/T1 cervical vertebrae, sequela
S13.181A	Dislocation of C7/T1 cervical vertebrae, initial encounter
S13.181S	Dislocation of C7/T1 cervical vertebrae, sequela
S13.20XA	Dislocation of unspecified parts of neck, initial encounter
S13.20XS	Dislocation of unspecified parts of neck, sequela
S13.29XA	Dislocation of other parts of neck, initial encounter
S13.29XS	Dislocation of other parts of neck, sequela



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Code	Description
S13.4XXA	Sprain of ligaments of cervical spine, initial encounter
S13.4XXS	Sprain of ligaments of cervical spine, sequela
S13.5XXA	Sprain of thyroid region, initial encounter
S13.5XXS	Sprain of thyroid region, sequela
S13.8XXA	Sprain of joints and ligaments of other parts of neck, initial encounter
S13.8XXS	Sprain of joints and ligaments of other parts of neck, sequela
S13.9XXA	Sprain of joints and ligaments of unspecified parts of neck, initial encounter
S13.9XXS	Sprain of joints and ligaments of unspecified parts of neck, sequela
S14.0XXS	Concussion and edema of cervical spinal cord, sequela
S14.101S	Unspecified injury at C1 level of cervical spinal cord, sequela
S14.102S	Unspecified injury at C2 level of cervical spinal cord, sequela
S14.103S	Unspecified injury at C3 level of cervical spinal cord, sequela
S14.104S	Unspecified injury at C4 level of cervical spinal cord, sequela
S14.105S	Unspecified injury at C5 level of cervical spinal cord, sequela
S14.106S	Unspecified injury at C6 level of cervical spinal cord, sequela
S14.107S	Unspecified injury at C7 level of cervical spinal cord, sequela
S14.108S	Unspecified injury at C8 level of cervical spinal cord, sequela
S14.109S	Unspecified injury at unspecified level of cervical spinal cord, sequela
S14.111S	Complete lesion at C1 level of cervical spinal cord, sequela
S14.112S	Complete lesion at C2 level of cervical spinal cord, sequela
S14.113S	Complete lesion at C3 level of cervical spinal cord, sequela
S14.114S	Complete lesion at C4 level of cervical spinal cord, sequela
S14.115S	Complete lesion at C5 level of cervical spinal cord, sequela
S14.116S	Complete lesion at C6 level of cervical spinal cord, sequela
S14.117S	Complete lesion at C7 level of cervical spinal cord, sequela
S14.118S	Complete lesion at C8 level of cervical spinal cord, sequela
S14.119S	Complete lesion at unspecified level of cervical spinal cord, sequela
S14.121S	Central cord syndrome at C1 level of cervical spinal cord, sequela
S14.122S	Central cord syndrome at C2 level of cervical spinal cord, sequela
S14.123S	Central cord syndrome at C3 level of cervical spinal cord, sequela

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Code	Description
S14.124S	Central cord syndrome at C4 level of cervical spinal cord, sequela
S14.125S	Central cord syndrome at C5 level of cervical spinal cord, sequela
S14.126S	Central cord syndrome at C6 level of cervical spinal cord, sequela
S14.127S	Central cord syndrome at C7 level of cervical spinal cord, sequela
S14.128S	Central cord syndrome at C8 level of cervical spinal cord, sequela
S14.129S	Central cord syndrome at unspecified level of cervical spinal cord, sequela
S14.131S	Anterior cord syndrome at C1 level of cervical spinal cord, sequela
S14.132S	Anterior cord syndrome at C2 level of cervical spinal cord, sequela
S14.133S	Anterior cord syndrome at C3 level of cervical spinal cord, sequela
S14.134S	Anterior cord syndrome at C4 level of cervical spinal cord, sequela
S14.135S	Anterior cord syndrome at C5 level of cervical spinal cord, sequela
S14.136S	Anterior cord syndrome at C6 level of cervical spinal cord, sequela
S14.137S	Anterior cord syndrome at C7 level of cervical spinal cord, sequela
S14.138S	Anterior cord syndrome at C8 level of cervical spinal cord, sequela
S14.139S	Anterior cord syndrome at unspecified level of cervical spinal cord, sequela
S14.141S	Brown-Sequard syndrome at C1 level of cervical spinal cord, sequela
S14.142S	Brown-Sequard syndrome at C2 level of cervical spinal cord, sequela
S14.143S	Brown-Sequard syndrome at C3 level of cervical spinal cord, sequela
S14.144S	Brown-Sequard syndrome at C4 level of cervical spinal cord, sequela
S14.145S	Brown-Sequard syndrome at C5 level of cervical spinal cord, sequela
S14.146S	Brown-Sequard syndrome at C6 level of cervical spinal cord, sequela
S14.147S	Brown-Sequard syndrome at C7 level of cervical spinal cord, sequela
S14.148S	Brown-Sequard syndrome at C8 level of cervical spinal cord, sequela
S14.149S	Brown-Sequard syndrome at unspecified level of cervical spinal cord, sequela
S14.151S	Other incomplete lesion at C1 level of cervical spinal cord, sequela
S14.152S	Other incomplete lesion at C2 level of cervical spinal cord, sequela
S14.153S	Other incomplete lesion at C3 level of cervical spinal cord, sequela
S14.154S	Other incomplete lesion at C4 level of cervical spinal cord, sequela
S14.155S	Other incomplete lesion at C5 level of cervical spinal cord, sequela
S14.156S	Other incomplete lesion at C6 level of cervical spinal cord, sequela

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Code	Description
S14.157S	Other incomplete lesion at C7 level of cervical spinal cord, sequela
S14.158S	Other incomplete lesion at C8 level of cervical spinal cord, sequela
S14.159S	Other incomplete lesion at unspecified level of cervical spinal cord, sequela
S14.2XXS	Injury of nerve root of cervical spine, sequela
S14.3XXS	Injury of brachial plexus, sequela
S14.4XXA	Injury of peripheral nerves of neck, initial encounter
S14.4XXS	Injury of peripheral nerves of neck, sequela
S14.5XXS	Injury of cervical sympathetic nerves, sequela
S14.8XXA	Injury of other specified nerves of neck, initial encounter
S14.8XXS	Injury of other specified nerves of neck, sequela
S14.9XXA	Injury of unspecified nerves of neck, initial encounter
S14.9XXS	Injury of unspecified nerves of neck, sequela
S15.001S	Unspecified injury of right carotid artery, sequela
S15.002S	Unspecified injury of left carotid artery, sequela
S15.009S	Unspecified injury of unspecified carotid artery, sequela
S15.011S	Minor laceration of right carotid artery, sequela
S15.012S	Minor laceration of left carotid artery, sequela
S15.019S	Minor laceration of unspecified carotid artery, sequela
S15.021S	Major laceration of right carotid artery, sequela
S15.022S	Major laceration of left carotid artery, sequela
S15.029S	Major laceration of unspecified carotid artery, sequela
S15.091S	Other specified injury of right carotid artery, sequela
S15.092S	Other specified injury of left carotid artery, sequela
S15.099S	Other specified injury of unspecified carotid artery, sequela
S15.101S	Unspecified injury of right vertebral artery, sequela
S15.102S	Unspecified injury of left vertebral artery, sequela
S15.109S	Unspecified injury of unspecified vertebral artery, sequela
S15.111S	Minor laceration of right vertebral artery, sequela
S15.112S	Minor laceration of left vertebral artery, sequela
S15.119S	Minor laceration of unspecified vertebral artery, sequela

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Code	Description
S15.121S	Major laceration of right vertebral artery, sequela
S15.122S	Major laceration of left vertebral artery, sequela
S15.129S	Major laceration of unspecified vertebral artery, sequela
S15.191S	Other specified injury of right vertebral artery, sequela
S15.192S	Other specified injury of left vertebral artery, sequela
S15.199S	Other specified injury of unspecified vertebral artery, sequela
S15.201S	Unspecified injury of right external jugular vein, sequela
S15.202S	Unspecified injury of left external jugular vein, sequela
S15.209S	Unspecified injury of unspecified external jugular vein, sequela
S15.211S	Minor laceration of right external jugular vein, sequela
S15.212S	Minor laceration of left external jugular vein, sequela
S15.219S	Minor laceration of unspecified external jugular vein, sequela
S15.221S	Major laceration of right external jugular vein, sequela
S15.222S	Major laceration of left external jugular vein, sequela
S15.229S	Major laceration of unspecified external jugular vein, sequela
S15.291S	Other specified injury of right external jugular vein, sequela
S15.292S	Other specified injury of left external jugular vein, sequela
S15.299S	Other specified injury of unspecified external jugular vein, sequela
S15.301S	Unspecified injury of right internal jugular vein, sequela
S15.302S	Unspecified injury of left internal jugular vein, sequela
S15.309S	Unspecified injury of unspecified internal jugular vein, sequela
S15.311S	Minor laceration of right internal jugular vein, sequela
S15.312S	Minor laceration of left internal jugular vein, sequela
S15.319S	Minor laceration of unspecified internal jugular vein, sequela
S15.321S	Major laceration of right internal jugular vein, sequela
S15.322S	Major laceration of left internal jugular vein, sequela
S15.329S	Major laceration of unspecified internal jugular vein, sequela
S15.391S	Other specified injury of right internal jugular vein, sequela
S15.392S	Other specified injury of left internal jugular vein, sequela
S15.399S	Other specified injury of unspecified internal jugular vein, sequela



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Code	Description
S15.8XXS	Injury of other specified blood vessels at neck level, sequela
S15.9XXS	Injury of unspecified blood vessel at neck level, sequela
S16.1XXA	Strain of muscle, fascia and tendon at neck level, initial encounter
S16.1XXS	Strain of muscle, fascia and tendon at neck level, sequela
S16.2XXS	Laceration of muscle, fascia and tendon at neck level, sequela
S16.8XXS	Other specified injury of muscle, fascia and tendon at neck level, sequela
S16.9XXS	Unspecified injury of muscle, fascia and tendon at neck level, sequela
S17.0XXS	Crushing injury of larynx and trachea, sequela
S17.8XXS	Crushing injury of other specified parts of neck, sequela
S17.9XXS	Crushing injury of neck, part unspecified, sequela
S19.80XS	Other specified injuries of unspecified part of neck, sequela
S19.81XS	Other specified injuries of larynx, sequela
S19.82XS	Other specified injuries of cervical trachea, sequela
S19.83XS	Other specified injuries of vocal cord, sequela
S19.84XS	Other specified injuries of thyroid gland, sequela
S19.85XS	Other specified injuries of pharynx and cervical esophagus, sequela
S19.89XS	Other specified injuries of other specified part of neck, sequela
S19.9XXS	Unspecified injury of neck, sequela
S20.00XS	Contusion of breast, unspecified breast, sequela
S20.01XS	Contusion of right breast, sequela
S20.02XS	Contusion of left breast, sequela
S20.101A	Unspecified superficial injuries of breast, right breast, initial encounter
S20.101S	Unspecified superficial injuries of breast, right breast, sequela
S20.102A	Unspecified superficial injuries of breast, left breast, initial encounter
S20.102S	Unspecified superficial injuries of breast, left breast, sequela
S20.109A	Unspecified superficial injuries of breast, unspecified breast, initial encounter
S20.109S	Unspecified superficial injuries of breast, unspecified breast, sequela
S20.111A	Abrasion of breast, right breast, initial encounter
S20.111S	Abrasion of breast, right breast, sequela
S20.112A	Abrasion of breast, left breast, initial encounter

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Code	Description
S20.112S	Abrasion of breast, left breast, sequela
S20.119A	Abrasion of breast, unspecified breast, initial encounter
S20.119S	Abrasion of breast, unspecified breast, sequela
S20.121A	Blister (nonthermal) of breast, right breast, initial encounter
S20.121S	Blister (nonthermal) of breast, right breast, sequela
S20.122A	Blister (nonthermal) of breast, left breast, initial encounter
S20.122S	Blister (nonthermal) of breast, left breast, sequela
S20.129A	Blister (nonthermal) of breast, unspecified breast, initial encounter
S20.129S	Blister (nonthermal) of breast, unspecified breast, sequela
S20.141A	External constriction of part of breast, right breast, initial encounter
S20.141S	External constriction of part of breast, right breast, sequela
S20.142A	External constriction of part of breast, left breast, initial encounter
S20.142S	External constriction of part of breast, left breast, sequela
S20.149A	External constriction of part of breast, unspecified breast, initial encounter
S20.149S	External constriction of part of breast, unspecified breast, sequela
S20.151A	Superficial foreign body of breast, right breast, initial encounter
S20.151S	Superficial foreign body of breast, right breast, sequela
S20.152A	Superficial foreign body of breast, left breast, initial encounter
S20.152S	Superficial foreign body of breast, left breast, sequela
S20.159A	Superficial foreign body of breast, unspecified breast, initial encounter
S20.159S	Superficial foreign body of breast, unspecified breast, sequela
S20.161A	Insect bite (nonvenomous) of breast, right breast, initial encounter
S20.161S	Insect bite (nonvenomous) of breast, right breast, sequela
S20.162A	Insect bite (nonvenomous) of breast, left breast, initial encounter
S20.162S	Insect bite (nonvenomous) of breast, left breast, sequela
S20.169A	Insect bite (nonvenomous) of breast, unspecified breast, initial encounter
S20.169S	Insect bite (nonvenomous) of breast, unspecified breast, sequela
S20.171A	Other superficial bite of breast, right breast, initial encounter
S20.171S	Other superficial bite of breast, right breast, sequela
S20.172A	Other superficial bite of breast, left breast, initial encounter

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Code	Description
S20.172S	Other superficial bite of breast, left breast, sequela
S20.179A	Other superficial bite of breast, unspecified breast, initial encounter
S20.179S	Other superficial bite of breast, unspecified breast, sequela
S20.20XS	Contusion of thorax, unspecified, sequela
S20.211S	Contusion of right front wall of thorax, sequela
S20.212S	Contusion of left front wall of thorax, sequela
S20.219S	Contusion of unspecified front wall of thorax, sequela
S20.221S	Contusion of right back wall of thorax, sequela
S20.222S	Contusion of left back wall of thorax, sequela
S20.229S	Contusion of unspecified back wall of thorax, sequela
S20.301A	Unspecified superficial injuries of right front wall of thorax, initial encounter
S20.301S	Unspecified superficial injuries of right front wall of thorax, sequela
S20.302A	Unspecified superficial injuries of left front wall of thorax, initial encounter
S20.302S	Unspecified superficial injuries of left front wall of thorax, sequela
S20.309A	Unspecified superficial injuries of unspecified front wall of thorax, initial encounter
S20.309S	Unspecified superficial injuries of unspecified front wall of thorax, sequela
S20.311A	Abrasion of right front wall of thorax, initial encounter
S20.311S	Abrasion of right front wall of thorax, sequela
S20.312A	Abrasion of left front wall of thorax, initial encounter
S20.312S	Abrasion of left front wall of thorax, sequela
S20.319A	Abrasion of unspecified front wall of thorax, initial encounter
S20.319S	Abrasion of unspecified front wall of thorax, sequela
S20.321A	Blister (nonthermal) of right front wall of thorax, initial encounter
S20.321S	Blister (nonthermal) of right front wall of thorax, sequela
S20.322A	Blister (nonthermal) of left front wall of thorax, initial encounter
S20.322S	Blister (nonthermal) of left front wall of thorax, sequela
S20.329A	Blister (nonthermal) of unspecified front wall of thorax, initial encounter
S20.329S	Blister (nonthermal) of unspecified front wall of thorax, sequela
S20.341A	External constriction of right front wall of thorax, initial encounter
S20.341S	External constriction of right front wall of thorax, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S20.342A	External constriction of left front wall of thorax, initial encounter
S20.342S	External constriction of left front wall of thorax, sequela
S20.349A	External constriction of unspecified front wall of thorax, initial encounter
S20.349S	External constriction of unspecified front wall of thorax, sequela
S20.351A	Superficial foreign body of right front wall of thorax, initial encounter
S20.351S	Superficial foreign body of right front wall of thorax, sequela
S20.352A	Superficial foreign body of left front wall of thorax, initial encounter
S20.352S	Superficial foreign body of left front wall of thorax, sequela
S20.359A	Superficial foreign body of unspecified front wall of thorax, initial encounter
S20.359S	Superficial foreign body of unspecified front wall of thorax, sequela
S20.361A	Insect bite (nonvenomous) of right front wall of thorax, initial encounter
S20.361S	Insect bite (nonvenomous) of right front wall of thorax, sequela
S20.362A	Insect bite (nonvenomous) of left front wall of thorax, initial encounter
S20.362S	Insect bite (nonvenomous) of left front wall of thorax, sequela
S20.369A	Insect bite (nonvenomous) of unspecified front wall of thorax, initial encounter
S20.369S	Insect bite (nonvenomous) of unspecified front wall of thorax, sequela
S20.371A	Other superficial bite of right front wall of thorax, initial encounter
S20.371S	Other superficial bite of right front wall of thorax, sequela
S20.372A	Other superficial bite of left front wall of thorax, initial encounter
S20.372S	Other superficial bite of left front wall of thorax, sequela
S20.379A	Other superficial bite of unspecified front wall of thorax, initial encounter
S20.379S	Other superficial bite of unspecified front wall of thorax, sequela
S20.401A	Unspecified superficial injuries of right back wall of thorax, initial encounter
S20.401S	Unspecified superficial injuries of right back wall of thorax, sequela
S20.402A	Unspecified superficial injuries of left back wall of thorax, initial encounter
S20.402S	Unspecified superficial injuries of left back wall of thorax, sequela
S20.409A	Unspecified superficial injuries of unspecified back wall of thorax, initial encounter
S20.409S	Unspecified superficial injuries of unspecified back wall of thorax, sequela
S20.411A	Abrasion of right back wall of thorax, initial encounter
S20.411S	Abrasion of right back wall of thorax, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S20.412A	Abrasion of left back wall of thorax, initial encounter
S20.412S	Abrasion of left back wall of thorax, sequela
S20.419A	Abrasion of unspecified back wall of thorax, initial encounter
S20.419S	Abrasion of unspecified back wall of thorax, sequela
S20.421A	Blister (nonthermal) of right back wall of thorax, initial encounter
S20.421S	Blister (nonthermal) of right back wall of thorax, sequela
S20.422A	Blister (nonthermal) of left back wall of thorax, initial encounter
S20.422S	Blister (nonthermal) of left back wall of thorax, sequela
S20.429A	Blister (nonthermal) of unspecified back wall of thorax, initial encounter
S20.429S	Blister (nonthermal) of unspecified back wall of thorax, sequela
S20.441A	External constriction of right back wall of thorax, initial encounter
S20.441S	External constriction of right back wall of thorax, sequela
S20.442A	External constriction of left back wall of thorax, initial encounter
S20.442S	External constriction of left back wall of thorax, sequela
S20.449A	External constriction of unspecified back wall of thorax, initial encounter
S20.449S	External constriction of unspecified back wall of thorax, sequela
S20.451A	Superficial foreign body of right back wall of thorax, initial encounter
S20.451S	Superficial foreign body of right back wall of thorax, sequela
S20.452A	Superficial foreign body of left back wall of thorax, initial encounter
S20.452S	Superficial foreign body of left back wall of thorax, sequela
S20.459A	Superficial foreign body of unspecified back wall of thorax, initial encounter
S20.459S	Superficial foreign body of unspecified back wall of thorax, sequela
S20.461A	Insect bite (nonvenomous) of right back wall of thorax, initial encounter
S20.461S	Insect bite (nonvenomous) of right back wall of thorax, sequela
S20.462A	Insect bite (nonvenomous) of left back wall of thorax, initial encounter
S20.462S	Insect bite (nonvenomous) of left back wall of thorax, sequela
S20.469A	Insect bite (nonvenomous) of unspecified back wall of thorax, initial encounter
S20.469S	Insect bite (nonvenomous) of unspecified back wall of thorax, sequela
S20.471A	Other superficial bite of right back wall of thorax, initial encounter
S20.471S	Other superficial bite of right back wall of thorax, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S20.472A	Other superficial bite of left back wall of thorax, initial encounter
S20.472S	Other superficial bite of left back wall of thorax, sequela
S20.479A	Other superficial bite of unspecified back wall of thorax, initial encounter
S20.479S	Other superficial bite of unspecified back wall of thorax, sequela
S20.90XA	Unspecified superficial injury of unspecified parts of thorax, initial encounter
S20.90XS	Unspecified superficial injury of unspecified parts of thorax, sequela
S20.91XA	Abrasion of unspecified parts of thorax, initial encounter
S20.91XS	Abrasion of unspecified parts of thorax, sequela
S20.92XA	Blister (nonthermal) of unspecified parts of thorax, initial encounter
S20.92XS	Blister (nonthermal) of unspecified parts of thorax, sequela
S20.94XA	External constriction of unspecified parts of thorax, initial encounter
S20.94XS	External constriction of unspecified parts of thorax, sequela
S20.95XA	Superficial foreign body of unspecified parts of thorax, initial encounter
S20.95XS	Superficial foreign body of unspecified parts of thorax, sequela
S20.96XA	Insect bite (nonvenomous) of unspecified parts of thorax, initial encounter
S20.96XS	Insect bite (nonvenomous) of unspecified parts of thorax, sequela
S20.97XA	Other superficial bite of unspecified parts of thorax, initial encounter
S20.97XS	Other superficial bite of unspecified parts of thorax, sequela
S21.001S	Unspecified open wound of right breast, sequela
S21.002S	Unspecified open wound of left breast, sequela
S21.009S	Unspecified open wound of unspecified breast, sequela
S21.011S	Laceration without foreign body of right breast, sequela
S21.012S	Laceration without foreign body of left breast, sequela
S21.019S	Laceration without foreign body of unspecified breast, sequela
S21.021S	Laceration with foreign body of right breast, sequela
S21.022S	Laceration with foreign body of left breast, sequela
S21.029S	Laceration with foreign body of unspecified breast, sequela
S21.031S	Puncture wound without foreign body of right breast, sequela
S21.032S	Puncture wound without foreign body of left breast, sequela
S21.039S	Puncture wound without foreign body of unspecified breast, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S21.041S	Puncture wound with foreign body of right breast, sequela
S21.042S	Puncture wound with foreign body of left breast, sequela
S21.049S	Puncture wound with foreign body of unspecified breast, sequela
S21.051S	Open bite of right breast, sequela
S21.052S	Open bite of left breast, sequela
S21.059S	Open bite of unspecified breast, sequela
S21.101S	Unspecified open wound of right front wall of thorax without penetration into thoracic cavity, sequela
S21.102S	Unspecified open wound of left front wall of thorax without penetration into thoracic cavity, sequela
S21.109A	Unspecified open wound of unspecified front wall of thorax without penetration into thoracic cavity, initial encounter
S21.109S	Unspecified open wound of unspecified front wall of thorax without penetration into thoracic cavity, sequela
S21.111S	Laceration without foreign body of right front wall of thorax without penetration into thoracic cavity, sequela
S21.112S	Laceration without foreign body of left front wall of thorax without penetration into thoracic cavity, sequela
S21.119S	Laceration without foreign body of unspecified front wall of thorax without penetration into thoracic cavity, sequela
S21.121S	Laceration with foreign body of right front wall of thorax without penetration into thoracic cavity, sequela
S21.122S	Laceration with foreign body of left front wall of thorax without penetration into thoracic cavity, sequela
S21.129S	Laceration with foreign body of unspecified front wall of thorax without penetration into thoracic cavity, sequela
S21.131S	Puncture wound without foreign body of right front wall of thorax without penetration into thoracic cavity, sequela
S21.132S	Puncture wound without foreign body of left front wall of thorax without penetration into thoracic cavity, sequela
S21.139S	Puncture wound without foreign body of unspecified front wall of thorax without penetration into thoracic cavity, sequela
S21.141S	Puncture wound with foreign body of right front wall of thorax without penetration into thoracic cavity, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S21.142S	Puncture wound with foreign body of left front wall of thorax without penetration into thoracic cavity, sequela
S21.149S	Puncture wound with foreign body of unspecified front wall of thorax without penetration into thoracic cavity, sequela
S21.151S	Open bite of right front wall of thorax without penetration into thoracic cavity, sequela
S21.152S	Open bite of left front wall of thorax without penetration into thoracic cavity, sequela
S21.159S	Open bite of unspecified front wall of thorax without penetration into thoracic cavity, sequela
S21.201S	Unspecified open wound of right back wall of thorax without penetration into thoracic cavity, sequela
S21.202S	Unspecified open wound of left back wall of thorax without penetration into thoracic cavity, sequela
S21.209A	Unspecified open wound of unspecified back wall of thorax without penetration into thoracic cavity, initial encounter
S21.209S	Unspecified open wound of unspecified back wall of thorax without penetration into thoracic cavity, sequela
S21.211S	Laceration without foreign body of right back wall of thorax without penetration into thoracic cavity, sequela
S21.212S	Laceration without foreign body of left back wall of thorax without penetration into thoracic cavity, sequela
S21.219S	Laceration without foreign body of unspecified back wall of thorax without penetration into thoracic cavity, sequela
S21.221S	Laceration with foreign body of right back wall of thorax without penetration into thoracic cavity, sequela
S21.222S	Laceration with foreign body of left back wall of thorax without penetration into thoracic cavity, sequela
S21.229S	Laceration with foreign body of unspecified back wall of thorax without penetration into thoracic cavity, sequela
S21.231S	Puncture wound without foreign body of right back wall of thorax without penetration into thoracic cavity, sequela
S21.232S	Puncture wound without foreign body of left back wall of thorax without penetration into thoracic cavity, sequela
S21.239S	Puncture wound without foreign body of unspecified back wall of thorax without penetration into thoracic cavity, sequela
S21.241S	Puncture wound with foreign body of right back wall of thorax without penetration into thoracic cavity, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S21.242S	Puncture wound with foreign body of left back wall of thorax without penetration into thoracic cavity, sequela
S21.249S	Puncture wound with foreign body of unspecified back wall of thorax without penetration into thoracic cavity, sequela
S21.251S	Open bite of right back wall of thorax without penetration into thoracic cavity, sequela
S21.252S	Open bite of left back wall of thorax without penetration into thoracic cavity, sequela
S21.259S	Open bite of unspecified back wall of thorax without penetration into thoracic cavity, sequela
S21.301S	Unspecified open wound of right front wall of thorax with penetration into thoracic cavity, sequela
S21.302S	Unspecified open wound of left front wall of thorax with penetration into thoracic cavity, sequela
S21.309S	Unspecified open wound of unspecified front wall of thorax with penetration into thoracic cavity, sequela
S21.311S	Laceration without foreign body of right front wall of thorax with penetration into thoracic cavity, sequela
S21.312S	Laceration without foreign body of left front wall of thorax with penetration into thoracic cavity, sequela
S21.319S	Laceration without foreign body of unspecified front wall of thorax with penetration into thoracic cavity, sequela
S21.321S	Laceration with foreign body of right front wall of thorax with penetration into thoracic cavity, sequela
S21.322S	Laceration with foreign body of left front wall of thorax with penetration into thoracic cavity, sequela
S21.329S	Laceration with foreign body of unspecified front wall of thorax with penetration into thoracic cavity, sequela
S21.331S	Puncture wound without foreign body of right front wall of thorax with penetration into thoracic cavity, sequela
S21.332S	Puncture wound without foreign body of left front wall of thorax with penetration into thoracic cavity, sequela
S21.339S	Puncture wound without foreign body of unspecified front wall of thorax with penetration into thoracic cavity, sequela
S21.341S	Puncture wound with foreign body of right front wall of thorax with penetration into thoracic cavity, sequela
S21.342S	Puncture wound with foreign body of left front wall of thorax with penetration into thoracic cavity, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S21.349S	Puncture wound with foreign body of unspecified front wall of thorax with penetration into thoracic cavity, sequela
S21.351S	Open bite of right front wall of thorax with penetration into thoracic cavity, sequela
S21.352S	Open bite of left front wall of thorax with penetration into thoracic cavity, sequela
S21.359S	Open bite of unspecified front wall of thorax with penetration into thoracic cavity, sequela
S21.401S	Unspecified open wound of right back wall of thorax with penetration into thoracic cavity, sequela
S21.402S	Unspecified open wound of left back wall of thorax with penetration into thoracic cavity, sequela
S21.409S	Unspecified open wound of unspecified back wall of thorax with penetration into thoracic cavity, sequela
S21.411S	Laceration without foreign body of right back wall of thorax with penetration into thoracic cavity, sequela
S21.412S	Laceration without foreign body of left back wall of thorax with penetration into thoracic cavity, sequela
S21.419S	Laceration without foreign body of unspecified back wall of thorax with penetration into thoracic cavity, sequela
S21.421S	Laceration with foreign body of right back wall of thorax with penetration into thoracic cavity, sequela
S21.422S	Laceration with foreign body of left back wall of thorax with penetration into thoracic cavity, sequela
S21.429S	Laceration with foreign body of unspecified back wall of thorax with penetration into thoracic cavity, sequela
S21.431S	Puncture wound without foreign body of right back wall of thorax with penetration into thoracic cavity, sequela
S21.432S	Puncture wound without foreign body of left back wall of thorax with penetration into thoracic cavity, sequela
S21.439S	Puncture wound without foreign body of unspecified back wall of thorax with penetration into thoracic cavity, sequela
S21.441S	Puncture wound with foreign body of right back wall of thorax with penetration into thoracic cavity, sequela
S21.442S	Puncture wound with foreign body of left back wall of thorax with penetration into thoracic cavity, sequela
S21.449S	Puncture wound with foreign body of unspecified back wall of thorax with penetration into thoracic cavity, sequela
S21.451S	Open bite of right back wall of thorax with penetration into thoracic cavity, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S21.452S	Open bite of left back wall of thorax with penetration into thoracic cavity, sequela
S21.459S	Open bite of unspecified back wall of thorax with penetration into thoracic cavity, sequela
S21.90XS	Unspecified open wound of unspecified part of thorax, sequela
S21.91XS	Laceration without foreign body of unspecified part of thorax, sequela
S21.92XS	Laceration with foreign body of unspecified part of thorax, sequela
S21.93XS	Puncture wound without foreign body of unspecified part of thorax, sequela
S21.94XS	Puncture wound with foreign body of unspecified part of thorax, sequela
S21.95XS	Open bite of unspecified part of thorax, sequela
S22.000D	Wedge compression fracture of unspecified thoracic vertebra, subsequent encounter for fracture with routine healing
S22.000G	Wedge compression fracture of unspecified thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.000S	Wedge compression fracture of unspecified thoracic vertebra, sequela
S22.001D	Stable burst fracture of unspecified thoracic vertebra, subsequent encounter for fracture with routine healing
S22.001G	Stable burst fracture of unspecified thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.001S	Stable burst fracture of unspecified thoracic vertebra, sequela
S22.002D	Unstable burst fracture of unspecified thoracic vertebra, subsequent encounter for fracture with routine healing
S22.002G	Unstable burst fracture of unspecified thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.002S	Unstable burst fracture of unspecified thoracic vertebra, sequela
S22.008D	Other fracture of unspecified thoracic vertebra, subsequent encounter for fracture with routine healing
S22.008G	Other fracture of unspecified thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.008S	Other fracture of unspecified thoracic vertebra, sequela
S22.009D	Unspecified fracture of unspecified thoracic vertebra, subsequent encounter for fracture with routine healing
S22.009G	Unspecified fracture of unspecified thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.009S	Unspecified fracture of unspecified thoracic vertebra, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S22.010D	Wedge compression fracture of first thoracic vertebra, subsequent encounter for fracture with routine healing
S22.010G	Wedge compression fracture of first thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.010S	Wedge compression fracture of first thoracic vertebra, sequela
S22.011D	Stable burst fracture of first thoracic vertebra, subsequent encounter for fracture with routine healing
S22.011G	Stable burst fracture of first thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.011S	Stable burst fracture of first thoracic vertebra, sequela
S22.012D	Unstable burst fracture of first thoracic vertebra, subsequent encounter for fracture with routine healing
S22.012G	Unstable burst fracture of first thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.012S	Unstable burst fracture of first thoracic vertebra, sequela
S22.018D	Other fracture of first thoracic vertebra, subsequent encounter for fracture with routine healing
S22.018G	Other fracture of first thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.018S	Other fracture of first thoracic vertebra, sequela
S22.019D	Unspecified fracture of first thoracic vertebra, subsequent encounter for fracture with routine healing
S22.019G	Unspecified fracture of first thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.019S	Unspecified fracture of first thoracic vertebra, sequela
S22.020D	Wedge compression fracture of second thoracic vertebra, subsequent encounter for fracture with routine healing
S22.020G	Wedge compression fracture of second thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.020S	Wedge compression fracture of second thoracic vertebra, sequela
S22.021D	Stable burst fracture of second thoracic vertebra, subsequent encounter for fracture with routine healing
S22.021G	Stable burst fracture of second thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.021S	Stable burst fracture of second thoracic vertebra, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S22.022D	Unstable burst fracture of second thoracic vertebra, subsequent encounter for fracture with routine healing
S22.022G	Unstable burst fracture of second thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.022S	Unstable burst fracture of second thoracic vertebra, sequela
S22.028D	Other fracture of second thoracic vertebra, subsequent encounter for fracture with routine healing
S22.028G	Other fracture of second thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.028S	Other fracture of second thoracic vertebra, sequela
S22.029D	Unspecified fracture of second thoracic vertebra, subsequent encounter for fracture with routine healing
S22.029G	Unspecified fracture of second thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.029S	Unspecified fracture of second thoracic vertebra, sequela
S22.030D	Wedge compression fracture of third thoracic vertebra, subsequent encounter for fracture with routine healing
S22.030G	Wedge compression fracture of third thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.030S	Wedge compression fracture of third thoracic vertebra, sequela
S22.031D	Stable burst fracture of third thoracic vertebra, subsequent encounter for fracture with routine healing
S22.031G	Stable burst fracture of third thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.031S	Stable burst fracture of third thoracic vertebra, sequela
S22.032D	Unstable burst fracture of third thoracic vertebra, subsequent encounter for fracture with routine healing
S22.032G	Unstable burst fracture of third thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.032S	Unstable burst fracture of third thoracic vertebra, sequela
S22.038D	Other fracture of third thoracic vertebra, subsequent encounter for fracture with routine healing
S22.038G	Other fracture of third thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.038S	Other fracture of third thoracic vertebra, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S22.039D	Unspecified fracture of third thoracic vertebra, subsequent encounter for fracture with routine healing
S22.039G	Unspecified fracture of third thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.039S	Unspecified fracture of third thoracic vertebra, sequela
S22.040D	Wedge compression fracture of fourth thoracic vertebra, subsequent encounter for fracture with routine healing
S22.040G	Wedge compression fracture of fourth thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.040S	Wedge compression fracture of fourth thoracic vertebra, sequela
S22.041D	Stable burst fracture of fourth thoracic vertebra, subsequent encounter for fracture with routine healing
S22.041G	Stable burst fracture of fourth thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.041S	Stable burst fracture of fourth thoracic vertebra, sequela
S22.042D	Unstable burst fracture of fourth thoracic vertebra, subsequent encounter for fracture with routine healing
S22.042G	Unstable burst fracture of fourth thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.042S	Unstable burst fracture of fourth thoracic vertebra, sequela
S22.048D	Other fracture of fourth thoracic vertebra, subsequent encounter for fracture with routine healing
S22.048G	Other fracture of fourth thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.048S	Other fracture of fourth thoracic vertebra, sequela
S22.049D	Unspecified fracture of fourth thoracic vertebra, subsequent encounter for fracture with routine healing
S22.049G	Unspecified fracture of fourth thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.049S	Unspecified fracture of fourth thoracic vertebra, sequela
S22.050D	Wedge compression fracture of T5-T6 vertebra, subsequent encounter for fracture with routine healing
S22.050G	Wedge compression fracture of T5-T6 vertebra, subsequent encounter for fracture with delayed healing
S22.050S	Wedge compression fracture of T5-T6 vertebra, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S22.051D	Stable burst fracture of T5-T6 vertebra, subsequent encounter for fracture with routine healing
S22.051G	Stable burst fracture of T5-T6 vertebra, subsequent encounter for fracture with delayed healing
S22.051S	Stable burst fracture of T5-T6 vertebra, sequela
S22.052D	Unstable burst fracture of T5-T6 vertebra, subsequent encounter for fracture with routine healing
S22.052G	Unstable burst fracture of T5-T6 vertebra, subsequent encounter for fracture with delayed healing
S22.052S	Unstable burst fracture of T5-T6 vertebra, sequela
S22.058D	Other fracture of T5-T6 vertebra, subsequent encounter for fracture with routine healing
S22.058G	Other fracture of T5-T6 vertebra, subsequent encounter for fracture with delayed healing
S22.058S	Other fracture of T5-T6 vertebra, sequela
S22.059D	Unspecified fracture of T5-T6 vertebra, subsequent encounter for fracture with routine healing
S22.059G	Unspecified fracture of T5-T6 vertebra, subsequent encounter for fracture with delayed healing
S22.059S	Unspecified fracture of T5-T6 vertebra, sequela
S22.060D	Wedge compression fracture of T7-T8 vertebra, subsequent encounter for fracture with routine healing
S22.060G	Wedge compression fracture of T7-T8 vertebra, subsequent encounter for fracture with delayed healing
S22.060S	Wedge compression fracture of T7-T8 vertebra, sequela
S22.061D	Stable burst fracture of T7-T8 vertebra, subsequent encounter for fracture with routine healing
S22.061G	Stable burst fracture of T7-T8 vertebra, subsequent encounter for fracture with delayed healing
S22.061S	Stable burst fracture of T7-T8 vertebra, sequela
S22.062D	Unstable burst fracture of T7-T8 vertebra, subsequent encounter for fracture with routine healing
S22.062G	Unstable burst fracture of T7-T8 vertebra, subsequent encounter for fracture with delayed healing
S22.062S	Unstable burst fracture of T7-T8 vertebra, sequela
S22.068D	Other fracture of T7-T8 thoracic vertebra, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S22.068G	Other fracture of T7-T8 thoracic vertebra, subsequent encounter for fracture with delayed healing
S22.068S	Other fracture of T7-T8 thoracic vertebra, sequela
S22.069D	Unspecified fracture of T7-T8 vertebra, subsequent encounter for fracture with routine healing
S22.069G	Unspecified fracture of T7-T8 vertebra, subsequent encounter for fracture with delayed healing
S22.069S	Unspecified fracture of T7-T8 vertebra, sequela
S22.070D	Wedge compression fracture of T9-T10 vertebra, subsequent encounter for fracture with routine healing
S22.070G	Wedge compression fracture of T9-T10 vertebra, subsequent encounter for fracture with delayed healing
S22.070S	Wedge compression fracture of T9-T10 vertebra, sequela
S22.071D	Stable burst fracture of T9-T10 vertebra, subsequent encounter for fracture with routine healing
S22.071G	Stable burst fracture of T9-T10 vertebra, subsequent encounter for fracture with delayed healing
S22.071S	Stable burst fracture of T9-T10 vertebra, sequela
S22.072D	Unstable burst fracture of T9-T10 vertebra, subsequent encounter for fracture with routine healing
S22.072G	Unstable burst fracture of T9-T10 vertebra, subsequent encounter for fracture with delayed healing
S22.072S	Unstable burst fracture of T9-T10 vertebra, sequela
S22.078D	Other fracture of T9-T10 vertebra, subsequent encounter for fracture with routine healing
S22.078G	Other fracture of T9-T10 vertebra, subsequent encounter for fracture with delayed healing
S22.078S	Other fracture of T9-T10 vertebra, sequela
S22.079D	Unspecified fracture of T9-T10 vertebra, subsequent encounter for fracture with routine healing
S22.079G	Unspecified fracture of T9-T10 vertebra, subsequent encounter for fracture with delayed healing
S22.079S	Unspecified fracture of T9-T10 vertebra, sequela
S22.080D	Wedge compression fracture of T11-T12 vertebra, subsequent encounter for fracture with routine healing
S22.080G	Wedge compression fracture of T11-T12 vertebra, subsequent encounter for fracture with delayed healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S22.080S	Wedge compression fracture of T11-T12 vertebra, sequela
S22.081D	Stable burst fracture of T11-T12 vertebra, subsequent encounter for fracture with routine healing
S22.081G	Stable burst fracture of T11-T12 vertebra, subsequent encounter for fracture with delayed healing
S22.081S	Stable burst fracture of T11-T12 vertebra, sequela
S22.082D	Unstable burst fracture of T11-T12 vertebra, subsequent encounter for fracture with routine healing
S22.082G	Unstable burst fracture of T11-T12 vertebra, subsequent encounter for fracture with delayed healing
S22.082S	Unstable burst fracture of T11-T12 vertebra, sequela
S22.088D	Other fracture of T11-T12 vertebra, subsequent encounter for fracture with routine healing
S22.088G	Other fracture of T11-T12 vertebra, subsequent encounter for fracture with delayed healing
S22.088S	Other fracture of T11-T12 vertebra, sequela
S22.089D	Unspecified fracture of T11-T12 vertebra, subsequent encounter for fracture with routine healing
S22.089G	Unspecified fracture of T11-T12 vertebra, subsequent encounter for fracture with delayed healing
S22.089S	Unspecified fracture of T11-T12 vertebra, sequela
S22.20XD	Unspecified fracture of sternum, subsequent encounter for fracture with routine healing
S22.20XG	Unspecified fracture of sternum, subsequent encounter for fracture with delayed healing
S22.20XS	Unspecified fracture of sternum, sequela
S22.21XD	Fracture of manubrium, subsequent encounter for fracture with routine healing
S22.21XG	Fracture of manubrium, subsequent encounter for fracture with delayed healing
S22.21XS	Fracture of manubrium, sequela
S22.22XD	Fracture of body of sternum, subsequent encounter for fracture with routine healing
S22.22XG	Fracture of body of sternum, subsequent encounter for fracture with delayed healing
S22.22XS	Fracture of body of sternum, sequela
S22.23XD	Sternal manubrial dissociation, subsequent encounter for fracture with routine healing
S22.23XG	Sternal manubrial dissociation, subsequent encounter for fracture with delayed healing
S22.23XS	Sternal manubrial dissociation, sequela
S22.24XD	Fracture of xiphoid process, subsequent encounter for fracture with routine healing



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Code	Description
S22.24XG	Fracture of xiphoid process, subsequent encounter for fracture with delayed healing
S22.24XS	Fracture of xiphoid process, sequela
S22.31XD	Fracture of one rib, right side, subsequent encounter for fracture with routine healing
S22.31XG	Fracture of one rib, right side, subsequent encounter for fracture with delayed healing
S22.31XS	Fracture of one rib, right side, sequela
S22.32XD	Fracture of one rib, left side, subsequent encounter for fracture with routine healing
S22.32XG	Fracture of one rib, left side, subsequent encounter for fracture with delayed healing
S22.32XS	Fracture of one rib, left side, sequela
S22.39XD	Fracture of one rib, unspecified side, subsequent encounter for fracture with routine healing
S22.39XG	Fracture of one rib, unspecified side, subsequent encounter for fracture with delayed healing
S22.39XS	Fracture of one rib, unspecified side, sequela
S22.41XD	Multiple fractures of ribs, right side, subsequent encounter for fracture with routine healing
S22.41XG	Multiple fractures of ribs, right side, subsequent encounter for fracture with delayed healing
S22.41XS	Multiple fractures of ribs, right side, sequela
S22.42XD	Multiple fractures of ribs, left side, subsequent encounter for fracture with routine healing
S22.42XG	Multiple fractures of ribs, left side, subsequent encounter for fracture with delayed healing
S22.42XS	Multiple fractures of ribs, left side, sequela
S22.43XD	Multiple fractures of ribs, bilateral, subsequent encounter for fracture with routine healing
S22.43XG	Multiple fractures of ribs, bilateral, subsequent encounter for fracture with delayed healing
S22.43XS	Multiple fractures of ribs, bilateral, sequela
S22.49XD	Multiple fractures of ribs, unspecified side, subsequent encounter for fracture with routine healing
S22.49XG	Multiple fractures of ribs, unspecified side, subsequent encounter for fracture with delayed healing
S22.49XS	Multiple fractures of ribs, unspecified side, sequela
S22.5XXD	Flail chest, subsequent encounter for fracture with routine healing
S22.5XXG	Flail chest, subsequent encounter for fracture with delayed healing
S22.5XXS	Flail chest, sequela
S22.9XXD	Fracture of bony thorax, part unspecified, subsequent encounter for fracture with routine healing



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Code	Description
S22.9XXG	Fracture of bony thorax, part unspecified, subsequent encounter for fracture with delayed healing
S22.9XXS	Fracture of bony thorax, part unspecified, sequela
S23.0XXA	Traumatic rupture of thoracic intervertebral disc, initial encounter
S23.0XXS	Traumatic rupture of thoracic intervertebral disc, sequela
S23.100A	Subluxation of unspecified thoracic vertebra, initial encounter
S23.100S	Subluxation of unspecified thoracic vertebra, sequela
S23.101A	Dislocation of unspecified thoracic vertebra, initial encounter
S23.101S	Dislocation of unspecified thoracic vertebra, sequela
S23.110A	Subluxation of T1/T2 thoracic vertebra, initial encounter
S23.110S	Subluxation of T1/T2 thoracic vertebra, sequela
S23.111A	Dislocation of T1/T2 thoracic vertebra, initial encounter
S23.111S	Dislocation of T1/T2 thoracic vertebra, sequela
S23.120A	Subluxation of T2/T3 thoracic vertebra, initial encounter
S23.120S	Subluxation of T2/T3 thoracic vertebra, sequela
S23.121A	Dislocation of T2/T3 thoracic vertebra, initial encounter
S23.121S	Dislocation of T2/T3 thoracic vertebra, sequela
S23.122A	Subluxation of T3/T4 thoracic vertebra, initial encounter
S23.122S	Subluxation of T3/T4 thoracic vertebra, sequela
S23.123A	Dislocation of T3/T4 thoracic vertebra, initial encounter
S23.123S	Dislocation of T3/T4 thoracic vertebra, sequela
S23.130A	Subluxation of T4/T5 thoracic vertebra, initial encounter
S23.130S	Subluxation of T4/T5 thoracic vertebra, sequela
S23.131A	Dislocation of T4/T5 thoracic vertebra, initial encounter
S23.131S	Dislocation of T4/T5 thoracic vertebra, sequela
S23.132A	Subluxation of T5/T6 thoracic vertebra, initial encounter
S23.132S	Subluxation of T5/T6 thoracic vertebra, sequela
S23.133A	Dislocation of T5/T6 thoracic vertebra, initial encounter
S23.133S	Dislocation of T5/T6 thoracic vertebra, sequela
S23.140A	Subluxation of T6/T7 thoracic vertebra, initial encounter
S23.140S	Subluxation of T6/T7 thoracic vertebra, sequela

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Code	Description
S23.141A	Dislocation of T6/T7 thoracic vertebra, initial encounter
S23.141S	Dislocation of T6/T7 thoracic vertebra, sequela
S23.142A	Subluxation of T7/T8 thoracic vertebra, initial encounter
S23.142S	Subluxation of T7/T8 thoracic vertebra, sequela
S23.143A	Dislocation of T7/T8 thoracic vertebra, initial encounter
S23.143S	Dislocation of T7/T8 thoracic vertebra, sequela
S23.150A	Subluxation of T8/T9 thoracic vertebra, initial encounter
S23.150S	Subluxation of T8/T9 thoracic vertebra, sequela
S23.151A	Dislocation of T8/T9 thoracic vertebra, initial encounter
S23.151S	Dislocation of T8/T9 thoracic vertebra, sequela
S23.152A	Subluxation of T9/T10 thoracic vertebra, initial encounter
S23.152S	Subluxation of T9/T10 thoracic vertebra, sequela
S23.153A	Dislocation of T9/T10 thoracic vertebra, initial encounter
S23.153S	Dislocation of T9/T10 thoracic vertebra, sequela
S23.160A	Subluxation of T10/T11 thoracic vertebra, initial encounter
S23.160S	Subluxation of T10/T11 thoracic vertebra, sequela
S23.161A	Dislocation of T10/T11 thoracic vertebra, initial encounter
S23.161S	Dislocation of T10/T11 thoracic vertebra, sequela
S23.162A	Subluxation of T11/T12 thoracic vertebra, initial encounter
S23.162S	Subluxation of T11/T12 thoracic vertebra, sequela
S23.163A	Dislocation of T11/T12 thoracic vertebra, initial encounter
S23.163S	Dislocation of T11/T12 thoracic vertebra, sequela
S23.170A	Subluxation of T12/L1 thoracic vertebra, initial encounter
S23.170S	Subluxation of T12/L1 thoracic vertebra, sequela
S23.171A	Dislocation of T12/L1 thoracic vertebra, initial encounter
S23.171S	Dislocation of T12/L1 thoracic vertebra, sequela
S23.20XA	Dislocation of unspecified part of thorax, initial encounter
S23.20XS	Dislocation of unspecified part of thorax, sequela
S23.29XA	Dislocation of other parts of thorax, initial encounter
S23.29XS	Dislocation of other parts of thorax, sequela

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Code	Description
S23.3XXA	Sprain of ligaments of thoracic spine, initial encounter
S23.3XXS	Sprain of ligaments of thoracic spine, sequela
S23.41XA	Sprain of ribs, initial encounter
S23.41XS	Sprain of ribs, sequela
S23.420A	Sprain of sternoclavicular (joint) (ligament), initial encounter
S23.420S	Sprain of sternoclavicular (joint) (ligament), sequela
S23.421A	Sprain of chondrosternal joint, initial encounter
S23.421S	Sprain of chondrosternal joint, sequela
S23.428A	Other sprain of sternum, initial encounter
S23.428S	Other sprain of sternum, sequela
S23.429A	Unspecified sprain of sternum, initial encounter
S23.429S	Unspecified sprain of sternum, sequela
S23.8XXA	Sprain of other specified parts of thorax, initial encounter
S23.8XXS	Sprain of other specified parts of thorax, sequela
S23.9XXA	Sprain of unspecified parts of thorax, initial encounter
S23.9XXS	Sprain of unspecified parts of thorax, sequela
S24.0XXS	Concussion and edema of thoracic spinal cord, sequela
S24.101S	Unspecified injury at T1 level of thoracic spinal cord, sequela
S24.102S	Unspecified injury at T2-T6 level of thoracic spinal cord, sequela
S24.103S	Unspecified injury at T7-T10 level of thoracic spinal cord, sequela
S24.104S	Unspecified injury at T11-T12 level of thoracic spinal cord, sequela
S24.109S	Unspecified injury at unspecified level of thoracic spinal cord, sequela
S24.111S	Complete lesion at T1 level of thoracic spinal cord, sequela
S24.112S	Complete lesion at T2-T6 level of thoracic spinal cord, sequela
S24.113S	Complete lesion at T7-T10 level of thoracic spinal cord, sequela
S24.114S	Complete lesion at T11-T12 level of thoracic spinal cord, sequela
S24.119S	Complete lesion at unspecified level of thoracic spinal cord, sequela
S24.131S	Anterior cord syndrome at T1 level of thoracic spinal cord, sequela
S24.132S	Anterior cord syndrome at T2-T6 level of thoracic spinal cord, sequela
S24.133S	Anterior cord syndrome at T7-T10 level of thoracic spinal cord, sequela

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Code	Description
S24.134S	Anterior cord syndrome at T11-T12 level of thoracic spinal cord, sequela
S24.139S	Anterior cord syndrome at unspecified level of thoracic spinal cord, sequela
S24.141S	Brown-Sequard syndrome at T1 level of thoracic spinal cord, sequela
S24.142S	Brown-Sequard syndrome at T2-T6 level of thoracic spinal cord, sequela
S24.143S	Brown-Sequard syndrome at T7-T10 level of thoracic spinal cord, sequela
S24.144S	Brown-Sequard syndrome at T11-T12 level of thoracic spinal cord, sequela
S24.149S	Brown-Sequard syndrome at unspecified level of thoracic spinal cord, sequela
S24.151S	Other incomplete lesion at T1 level of thoracic spinal cord, sequela
S24.152S	Other incomplete lesion at T2-T6 level of thoracic spinal cord, sequela
S24.153S	Other incomplete lesion at T7-T10 level of thoracic spinal cord, sequela
S24.154S	Other incomplete lesion at T11-T12 level of thoracic spinal cord, sequela
S24.159S	Other incomplete lesion at unspecified level of thoracic spinal cord, sequela
S24.2XXS	Injury of nerve root of thoracic spine, sequela
S24.3XXS	Injury of peripheral nerves of thorax, sequela
S24.4XXS	Injury of thoracic sympathetic nervous system, sequela
S24.8XXS	Injury of other specified nerves of thorax, sequela
S24.9XXA	Injury of unspecified nerve of thorax, initial encounter
S24.9XXS	Injury of unspecified nerve of thorax, sequela
S25.00XS	Unspecified injury of thoracic aorta, sequela
S25.01XS	Minor laceration of thoracic aorta, sequela
S25.02XS	Major laceration of thoracic aorta, sequela
S25.09XS	Other specified injury of thoracic aorta, sequela
S25.101S	Unspecified injury of right innominate or subclavian artery, sequela
S25.102S	Unspecified injury of left innominate or subclavian artery, sequela
S25.109S	Unspecified injury of unspecified innominate or subclavian artery, sequela
S25.111S	Minor laceration of right innominate or subclavian artery, sequela
S25.112S	Minor laceration of left innominate or subclavian artery, sequela
S25.119S	Minor laceration of unspecified innominate or subclavian artery, sequela
S25.121S	Major laceration of right innominate or subclavian artery, sequela
S25.122S	Major laceration of left innominate or subclavian artery, sequela

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Code	Description
S25.129S	Major laceration of unspecified innominate or subclavian artery, sequela
S25.191S	Other specified injury of right innominate or subclavian artery, sequela
S25.192S	Other specified injury of left innominate or subclavian artery, sequela
S25.199S	Other specified injury of unspecified innominate or subclavian artery, sequela
S25.20XS	Unspecified injury of superior vena cava, sequela
S25.21XS	Minor laceration of superior vena cava, sequela
S25.22XS	Major laceration of superior vena cava, sequela
S25.29XS	Other specified injury of superior vena cava, sequela
S25.301S	Unspecified injury of right innominate or subclavian vein, sequela
S25.302S	Unspecified injury of left innominate or subclavian vein, sequela
S25.309S	Unspecified injury of unspecified innominate or subclavian vein, sequela
S25.311S	Minor laceration of right innominate or subclavian vein, sequela
S25.312S	Minor laceration of left innominate or subclavian vein, sequela
S25.319S	Minor laceration of unspecified innominate or subclavian vein, sequela
S25.321S	Major laceration of right innominate or subclavian vein, sequela
S25.322S	Major laceration of left innominate or subclavian vein, sequela
S25.329S	Major laceration of unspecified innominate or subclavian vein, sequela
S25.391S	Other specified injury of right innominate or subclavian vein, sequela
S25.392S	Other specified injury of left innominate or subclavian vein, sequela
S25.399S	Other specified injury of unspecified innominate or subclavian vein, sequela
S25.401S	Unspecified injury of right pulmonary blood vessels, sequela
S25.402S	Unspecified injury of left pulmonary blood vessels, sequela
S25.409S	Unspecified injury of unspecified pulmonary blood vessels, sequela
S25.411S	Minor laceration of right pulmonary blood vessels, sequela
S25.412S	Minor laceration of left pulmonary blood vessels, sequela
S25.419S	Minor laceration of unspecified pulmonary blood vessels, sequela
S25.421S	Major laceration of right pulmonary blood vessels, sequela
S25.422S	Major laceration of left pulmonary blood vessels, sequela
S25.429S	Major laceration of unspecified pulmonary blood vessels, sequela
S25.491S	Other specified injury of right pulmonary blood vessels, sequela

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Code	Description
S25.492S	Other specified injury of left pulmonary blood vessels, sequela
S25.499S	Other specified injury of unspecified pulmonary blood vessels, sequela
S25.501S	Unspecified injury of intercostal blood vessels, right side, sequela
S25.502S	Unspecified injury of intercostal blood vessels, left side, sequela
S25.509S	Unspecified injury of intercostal blood vessels, unspecified side, sequela
S25.511S	Laceration of intercostal blood vessels, right side, sequela
S25.512S	Laceration of intercostal blood vessels, left side, sequela
S25.519S	Laceration of intercostal blood vessels, unspecified side, sequela
S25.591S	Other specified injury of intercostal blood vessels, right side, sequela
S25.592S	Other specified injury of intercostal blood vessels, left side, sequela
S25.599S	Other specified injury of intercostal blood vessels, unspecified side, sequela
S25.801S	Unspecified injury of other blood vessels of thorax, right side, sequela
S25.802S	Unspecified injury of other blood vessels of thorax, left side, sequela
S25.809S	Unspecified injury of other blood vessels of thorax, unspecified side, sequela
S25.811S	Laceration of other blood vessels of thorax, right side, sequela
S25.812S	Laceration of other blood vessels of thorax, left side, sequela
S25.819S	Laceration of other blood vessels of thorax, unspecified side, sequela
S25.891S	Other specified injury of other blood vessels of thorax, right side, sequela
S25.892S	Other specified injury of other blood vessels of thorax, left side, sequela
S25.899S	Other specified injury of other blood vessels of thorax, unspecified side, sequela
S25.90XS	Unspecified injury of unspecified blood vessel of thorax, sequela
S25.91XS	Laceration of unspecified blood vessel of thorax, sequela
S25.99XS	Other specified injury of unspecified blood vessel of thorax, sequela
S26.00XS	Unspecified injury of heart with hemopericardium, sequela
S26.01XS	Contusion of heart with hemopericardium, sequela
S26.020S	Mild laceration of heart with hemopericardium, sequela
S26.021S	Moderate laceration of heart with hemopericardium, sequela
S26.022S	Major laceration of heart with hemopericardium, sequela
S26.09XS	Other injury of heart with hemopericardium, sequela
S26.10XS	Unspecified injury of heart without hemopericardium, sequela



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Code	Description
S26.11XS	Contusion of heart without hemopericardium, sequela
S26.12XS	Laceration of heart without hemopericardium, sequela
S26.19XS	Other injury of heart without hemopericardium, sequela
S26.90XS	Unspecified injury of heart, unspecified with or without hemopericardium, sequela
S26.91XS	Contusion of heart, unspecified with or without hemopericardium, sequela
S26.92XS	Laceration of heart, unspecified with or without hemopericardium, sequela
S26.99XS	Other injury of heart, unspecified with or without hemopericardium, sequela
S27.0XXS	Traumatic pneumothorax, sequela
S27.1XXS	Traumatic hemothorax, sequela
S27.2XXS	Traumatic hemopneumothorax, sequela
S27.301S	Unspecified injury of lung, unilateral, sequela
S27.302S	Unspecified injury of lung, bilateral, sequela
S27.309S	Unspecified injury of lung, unspecified, sequela
S27.311S	Primary blast injury of lung, unilateral, sequela
S27.312S	Primary blast injury of lung, bilateral, sequela
S27.319S	Primary blast injury of lung, unspecified, sequela
S27.321S	Contusion of lung, unilateral, sequela
S27.322S	Contusion of lung, bilateral, sequela
S27.329S	Contusion of lung, unspecified, sequela
S27.331S	Laceration of lung, unilateral, sequela
S27.332S	Laceration of lung, bilateral, sequela
S27.339S	Laceration of lung, unspecified, sequela
S27.391S	Other injuries of lung, unilateral, sequela
S27.392S	Other injuries of lung, bilateral, sequela
S27.399S	Other injuries of lung, unspecified, sequela
S27.401S	Unspecified injury of bronchus, unilateral, sequela
S27.402S	Unspecified injury of bronchus, bilateral, sequela
S27.409S	Unspecified injury of bronchus, unspecified, sequela
S27.411S	Primary blast injury of bronchus, unilateral, sequela
S27.412S	Primary blast injury of bronchus, bilateral, sequela

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Code	Description
S27.419S	Primary blast injury of bronchus, unspecified, sequela
S27.421S	Contusion of bronchus, unilateral, sequela
S27.422S	Contusion of bronchus, bilateral, sequela
S27.429S	Contusion of bronchus, unspecified, sequela
S27.431S	Laceration of bronchus, unilateral, sequela
S27.432S	Laceration of bronchus, bilateral, sequela
S27.439S	Laceration of bronchus, unspecified, sequela
S27.491S	Other injury of bronchus, unilateral, sequela
S27.492S	Other injury of bronchus, bilateral, sequela
S27.499S	Other injury of bronchus, unspecified, sequela
S27.50XS	Unspecified injury of thoracic trachea, sequela
S27.51XS	Primary blast injury of thoracic trachea, sequela
S27.52XS	Contusion of thoracic trachea, sequela
S27.53XS	Laceration of thoracic trachea, sequela
S27.59XS	Other injury of thoracic trachea, sequela
S27.60XS	Unspecified injury of pleura, sequela
S27.63XS	Laceration of pleura, sequela
S27.69XS	Other injury of pleura, sequela
S27.802S	Contusion of diaphragm, sequela
S27.803S	Laceration of diaphragm, sequela
S27.808S	Other injury of diaphragm, sequela
S27.809S	Unspecified injury of diaphragm, sequela
S27.812S	Contusion of esophagus (thoracic part), sequela
S27.813S	Laceration of esophagus (thoracic part), sequela
S27.818S	Other injury of esophagus (thoracic part), sequela
S27.819S	Unspecified injury of esophagus (thoracic part), sequela
S27.892S	Contusion of other specified intrathoracic organs, sequela
S27.893S	Laceration of other specified intrathoracic organs, sequela
S27.898S	Other injury of other specified intrathoracic organs, sequela
S27.899S	Unspecified injury of other specified intrathoracic organs, sequela



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Code	Description
S27.9XXS	Injury of unspecified intrathoracic organ, sequela
S28.0XXS	Crushed chest, sequela
S28.1XXS	Traumatic amputation (partial) of part of thorax, except breast, sequela
S28.211S	Complete traumatic amputation of right breast, sequela
S28.212S	Complete traumatic amputation of left breast, sequela
S28.219S	Complete traumatic amputation of unspecified breast, sequela
S28.221S	Partial traumatic amputation of right breast, sequela
S28.222S	Partial traumatic amputation of left breast, sequela
S28.229S	Partial traumatic amputation of unspecified breast, sequela
S29.001S	Unspecified injury of muscle and tendon of front wall of thorax, sequela
S29.002S	Unspecified injury of muscle and tendon of back wall of thorax, sequela
S29.009S	Unspecified injury of muscle and tendon of unspecified wall of thorax, sequela
S29.011A	Strain of muscle and tendon of front wall of thorax, initial encounter
S29.011S	Strain of muscle and tendon of front wall of thorax, sequela
S29.012A	Strain of muscle and tendon of back wall of thorax, initial encounter
S29.012S	Strain of muscle and tendon of back wall of thorax, sequela
S29.019A	Strain of muscle and tendon of unspecified wall of thorax, initial encounter
S29.019S	Strain of muscle and tendon of unspecified wall of thorax, sequela
S29.021S	Laceration of muscle and tendon of front wall of thorax, sequela
S29.022S	Laceration of muscle and tendon of back wall of thorax, sequela
S29.029S	Laceration of muscle and tendon of unspecified wall of thorax, sequela
S29.091S	Other injury of muscle and tendon of front wall of thorax, sequela
S29.092S	Other injury of muscle and tendon of back wall of thorax, sequela
S29.099S	Other injury of muscle and tendon of unspecified wall of thorax, sequela
S29.8XXS	Other specified injuries of thorax, sequela
S29.9XXS	Unspecified injury of thorax, sequela
S30.0XXS	Contusion of lower back and pelvis, sequela
S30.1XXS	Contusion of abdominal wall, sequela
S30.201S	Contusion of unspecified external genital organ, male, sequela
S30.202S	Contusion of unspecified external genital organ, female, sequela



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Code	Description
S30.21XS	Contusion of penis, sequela
S30.22XS	Contusion of scrotum and testes, sequela
S30.23XS	Contusion of vagina and vulva, sequela
S30.3XXS	Contusion of anus, sequela
S30.810A	Abrasion of lower back and pelvis, initial encounter
S30.810S	Abrasion of lower back and pelvis, sequela
S30.811A	Abrasion of abdominal wall, initial encounter
S30.811S	Abrasion of abdominal wall, sequela
S30.812A	Abrasion of penis, initial encounter
S30.812S	Abrasion of penis, sequela
S30.813A	Abrasion of scrotum and testes, initial encounter
S30.813S	Abrasion of scrotum and testes, sequela
S30.814A	Abrasion of vagina and vulva, initial encounter
S30.814S	Abrasion of vagina and vulva, sequela
S30.815A	Abrasion of unspecified external genital organs, male, initial encounter
S30.815S	Abrasion of unspecified external genital organs, male, sequela
S30.816A	Abrasion of unspecified external genital organs, female, initial encounter
S30.816S	Abrasion of unspecified external genital organs, female, sequela
S30.817A	Abrasion of anus, initial encounter
S30.817S	Abrasion of anus, sequela
S30.820A	Blister (nonthermal) of lower back and pelvis, initial encounter
S30.820S	Blister (nonthermal) of lower back and pelvis, sequela
S30.821A	Blister (nonthermal) of abdominal wall, initial encounter
S30.821S	Blister (nonthermal) of abdominal wall, sequela
S30.822A	Blister (nonthermal) of penis, initial encounter
S30.822S	Blister (nonthermal) of penis, sequela
S30.823A	Blister (nonthermal) of scrotum and testes, initial encounter
S30.823S	Blister (nonthermal) of scrotum and testes, sequela
S30.824A	Blister (nonthermal) of vagina and vulva, initial encounter
S30.824S	Blister (nonthermal) of vagina and vulva, sequela

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Code	Description
S30.825A	Blister (nonthermal) of unspecified external genital organs, male, initial encounter
S30.825S	Blister (nonthermal) of unspecified external genital organs, male, sequela
S30.826A	Blister (nonthermal) of unspecified external genital organs, female, initial encounter
S30.826S	Blister (nonthermal) of unspecified external genital organs, female, sequela
S30.827A	Blister (nonthermal) of anus, initial encounter
S30.827S	Blister (nonthermal) of anus, sequela
S30.840A	External constriction of lower back and pelvis, initial encounter
S30.840S	External constriction of lower back and pelvis, sequela
S30.841A	External constriction of abdominal wall, initial encounter
S30.841S	External constriction of abdominal wall, sequela
S30.842A	External constriction of penis, initial encounter
S30.842S	External constriction of penis, sequela
S30.843A	External constriction of scrotum and testes, initial encounter
S30.843S	External constriction of scrotum and testes, sequela
S30.844A	External constriction of vagina and vulva, initial encounter
S30.844S	External constriction of vagina and vulva, sequela
S30.845A	External constriction of unspecified external genital organs, male, initial encounter
S30.845S	External constriction of unspecified external genital organs, male, sequela
S30.846A	External constriction of unspecified external genital organs, female, initial encounter
S30.846S	External constriction of unspecified external genital organs, female, sequela
S30.850A	Superficial foreign body of lower back and pelvis, initial encounter
S30.850S	Superficial foreign body of lower back and pelvis, sequela
S30.851A	Superficial foreign body of abdominal wall, initial encounter
S30.851S	Superficial foreign body of abdominal wall, sequela
S30.852A	Superficial foreign body of penis, initial encounter
S30.852S	Superficial foreign body of penis, sequela
S30.853A	Superficial foreign body of scrotum and testes, initial encounter
S30.853S	Superficial foreign body of scrotum and testes, sequela
S30.854A	Superficial foreign body of vagina and vulva, initial encounter
S30.854S	Superficial foreign body of vagina and vulva, sequela

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Code	Description
S30.855A	Superficial foreign body of unspecified external genital organs, male, initial encounter
S30.855S	Superficial foreign body of unspecified external genital organs, male, sequela
S30.856A	Superficial foreign body of unspecified external genital organs, female, initial encounter
S30.856S	Superficial foreign body of unspecified external genital organs, female, sequela
S30.857A	Superficial foreign body of anus, initial encounter
S30.857S	Superficial foreign body of anus, sequela
S30.860A	Insect bite (nonvenomous) of lower back and pelvis, initial encounter
S30.860S	Insect bite (nonvenomous) of lower back and pelvis, sequela
S30.861A	Insect bite (nonvenomous) of abdominal wall, initial encounter
S30.861S	Insect bite (nonvenomous) of abdominal wall, sequela
S30.862A	Insect bite (nonvenomous) of penis, initial encounter
S30.862S	Insect bite (nonvenomous) of penis, sequela
S30.863A	Insect bite (nonvenomous) of scrotum and testes, initial encounter
S30.863S	Insect bite (nonvenomous) of scrotum and testes, sequela
S30.864A	Insect bite (nonvenomous) of vagina and vulva, initial encounter
S30.864S	Insect bite (nonvenomous) of vagina and vulva, sequela
S30.865A	Insect bite (nonvenomous) of unspecified external genital organs, male, initial encounter
S30.865S	Insect bite (nonvenomous) of unspecified external genital organs, male, sequela
S30.866A	Insect bite (nonvenomous) of unspecified external genital organs, female, initial encounter
S30.866S	Insect bite (nonvenomous) of unspecified external genital organs, female, sequela
S30.867A	Insect bite (nonvenomous) of anus, initial encounter
S30.867S	Insect bite (nonvenomous) of anus, sequela
S30.870A	Other superficial bite of lower back and pelvis, initial encounter
S30.870S	Other superficial bite of lower back and pelvis, sequela
S30.871A	Other superficial bite of abdominal wall, initial encounter
S30.871S	Other superficial bite of abdominal wall, sequela
S30.872A	Other superficial bite of penis, initial encounter
S30.872S	Other superficial bite of penis, sequela
S30.873A	Other superficial bite of scrotum and testes, initial encounter
S30.873S	Other superficial bite of scrotum and testes, sequela

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Code	Description
S30.874A	Other superficial bite of vagina and vulva, initial encounter
S30.874S	Other superficial bite of vagina and vulva, sequela
S30.875A	Other superficial bite of unspecified external genital organs, male, initial encounter
S30.875S	Other superficial bite of unspecified external genital organs, male, sequela
S30.876A	Other superficial bite of unspecified external genital organs, female, initial encounter
S30.876S	Other superficial bite of unspecified external genital organs, female, sequela
S30.877A	Other superficial bite of anus, initial encounter
S30.877S	Other superficial bite of anus, sequela
S30.91XA	Unspecified superficial injury of lower back and pelvis, initial encounter
S30.91XS	Unspecified superficial injury of lower back and pelvis, sequela
S30.92XA	Unspecified superficial injury of abdominal wall, initial encounter
S30.92XS	Unspecified superficial injury of abdominal wall, sequela
S30.93XA	Unspecified superficial injury of penis, initial encounter
S30.93XS	Unspecified superficial injury of penis, sequela
S30.94XA	Unspecified superficial injury of scrotum and testes, initial encounter
S30.94XS	Unspecified superficial injury of scrotum and testes, sequela
S30.95XA	Unspecified superficial injury of vagina and vulva, initial encounter
S30.95XS	Unspecified superficial injury of vagina and vulva, sequela
S30.96XA	Unspecified superficial injury of unspecified external genital organs, male, initial encounter
S30.96XS	Unspecified superficial injury of unspecified external genital organs, male, sequela
S30.97XA	Unspecified superficial injury of unspecified external genital organs, female, initial encounter
S30.97XS	Unspecified superficial injury of unspecified external genital organs, female, sequela
S30.98XA	Unspecified superficial injury of anus, initial encounter
S30.98XS	Unspecified superficial injury of anus, sequela
S31.000A	Unspecified open wound of lower back and pelvis without penetration into retroperitoneum, initial encounter
S31.000S	Unspecified open wound of lower back and pelvis without penetration into retroperitoneum, sequela
S31.001S	Unspecified open wound of lower back and pelvis with penetration into retroperitoneum, sequela



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Code	Description
S31.010S	Laceration without foreign body of lower back and pelvis without penetration into retroperitoneum, sequela
S31.011S	Laceration without foreign body of lower back and pelvis with penetration into retroperitoneum, sequela
S31.020S	Laceration with foreign body of lower back and pelvis without penetration into retroperitoneum, sequela
S31.021S	Laceration with foreign body of lower back and pelvis with penetration into retroperitoneum, sequela
S31.030S	Puncture wound without foreign body of lower back and pelvis without penetration into retroperitoneum, sequela
S31.031S	Puncture wound without foreign body of lower back and pelvis with penetration into retroperitoneum, sequela
S31.040S	Puncture wound with foreign body of lower back and pelvis without penetration into retroperitoneum, sequela
S31.041S	Puncture wound with foreign body of lower back and pelvis with penetration into retroperitoneum, sequela
S31.050S	Open bite of lower back and pelvis without penetration into retroperitoneum, sequela
S31.051S	Open bite of lower back and pelvis with penetration into retroperitoneum, sequela
S31.100S	Unspecified open wound of abdominal wall, right upper quadrant without penetration into peritoneal cavity, sequela
S31.101S	Unspecified open wound of abdominal wall, left upper quadrant without penetration into peritoneal cavity, sequela
S31.102S	Unspecified open wound of abdominal wall, epigastric region without penetration into peritoneal cavity, sequela
S31.103S	Unspecified open wound of abdominal wall, right lower quadrant without penetration into peritoneal cavity, sequela
S31.104S	Unspecified open wound of abdominal wall, left lower quadrant without penetration into peritoneal cavity, sequela
S31.105S	Unspecified open wound of abdominal wall, periumbilic region without penetration into peritoneal cavity, sequela
S31.109S	Unspecified open wound of abdominal wall, unspecified quadrant without penetration into peritoneal cavity, sequela
S31.110S	Laceration without foreign body of abdominal wall, right upper quadrant without penetration into peritoneal cavity, sequela
S31.111S	Laceration without foreign body of abdominal wall, left upper quadrant without penetration into peritoneal cavity, sequela



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Code	Description
S31.112S	Laceration without foreign body of abdominal wall, epigastric region without penetration into peritoneal cavity, sequela
S31.113S	Laceration without foreign body of abdominal wall, right lower quadrant without penetration into peritoneal cavity, sequela
S31.114S	Laceration without foreign body of abdominal wall, left lower quadrant without penetration into peritoneal cavity, sequela
S31.115S	Laceration without foreign body of abdominal wall, periumbilic region without penetration into peritoneal cavity, sequela
S31.119S	Laceration without foreign body of abdominal wall, unspecified quadrant without penetration into peritoneal cavity, sequela
S31.120S	Laceration of abdominal wall with foreign body, right upper quadrant without penetration into peritoneal cavity, sequela
S31.121S	Laceration of abdominal wall with foreign body, left upper quadrant without penetration into peritoneal cavity, sequela
S31.122S	Laceration of abdominal wall with foreign body, epigastric region without penetration into peritoneal cavity, sequela
S31.123S	Laceration of abdominal wall with foreign body, right lower quadrant without penetration into peritoneal cavity, sequela
S31.124S	Laceration of abdominal wall with foreign body, left lower quadrant without penetration into peritoneal cavity, sequela
S31.125S	Laceration of abdominal wall with foreign body, periumbilic region without penetration into peritoneal cavity, sequela
S31.129S	Laceration of abdominal wall with foreign body, unspecified quadrant without penetration into peritoneal cavity, sequela
S31.130S	Puncture wound of abdominal wall without foreign body, right upper quadrant without penetration into peritoneal cavity, sequela
S31.131S	Puncture wound of abdominal wall without foreign body, left upper quadrant without penetration into peritoneal cavity, sequela
S31.132S	Puncture wound of abdominal wall without foreign body, epigastric region without penetration into peritoneal cavity, sequela
S31.133S	Puncture wound of abdominal wall without foreign body, right lower quadrant without penetration into peritoneal cavity, sequela
S31.134S	Puncture wound of abdominal wall without foreign body, left lower quadrant without penetration into peritoneal cavity, sequela
S31.135S	Puncture wound of abdominal wall without foreign body, periumbilic region without penetration into peritoneal cavity, sequela



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Code	Description
S31.139S	Puncture wound of abdominal wall without foreign body, unspecified quadrant without penetration into peritoneal cavity, sequela
S31.140S	Puncture wound of abdominal wall with foreign body, right upper quadrant without penetration into peritoneal cavity, sequela
S31.141S	Puncture wound of abdominal wall with foreign body, left upper quadrant without penetration into peritoneal cavity, sequela
S31.142S	Puncture wound of abdominal wall with foreign body, epigastric region without penetration into peritoneal cavity, sequela
S31.143S	Puncture wound of abdominal wall with foreign body, right lower quadrant without penetration into peritoneal cavity, sequela
S31.144S	Puncture wound of abdominal wall with foreign body, left lower quadrant without penetration into peritoneal cavity, sequela
S31.145S	Puncture wound of abdominal wall with foreign body, periumbilic region without penetration into peritoneal cavity, sequela
S31.149S	Puncture wound of abdominal wall with foreign body, unspecified quadrant without penetration into peritoneal cavity, sequela
S31.150S	Open bite of abdominal wall, right upper quadrant without penetration into peritoneal cavity, sequela
S31.151S	Open bite of abdominal wall, left upper quadrant without penetration into peritoneal cavity, sequela
S31.152S	Open bite of abdominal wall, epigastric region without penetration into peritoneal cavity, sequela
S31.153S	Open bite of abdominal wall, right lower quadrant without penetration into peritoneal cavity, sequela
S31.154S	Open bite of abdominal wall, left lower quadrant without penetration into peritoneal cavity, sequela
S31.155S	Open bite of abdominal wall, periumbilic region without penetration into peritoneal cavity, sequela
S31.159S	Open bite of abdominal wall, unspecified quadrant without penetration into peritoneal cavity, sequela
S31.20XS	Unspecified open wound of penis, sequela
S31.21XS	Laceration without foreign body of penis, sequela
S31.22XS	Laceration with foreign body of penis, sequela
S31.23XS	Puncture wound without foreign body of penis, sequela
S31.24XS	Puncture wound with foreign body of penis, sequela

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Code	Description
S31.25XS	Open bite of penis, sequela
S31.30XS	Unspecified open wound of scrotum and testes, sequela
S31.31XS	Laceration without foreign body of scrotum and testes, sequela
S31.32XS	Laceration with foreign body of scrotum and testes, sequela
S31.33XS	Puncture wound without foreign body of scrotum and testes, sequela
S31.34XS	Puncture wound with foreign body of scrotum and testes, sequela
S31.35XS	Open bite of scrotum and testes, sequela
S31.40XS	Unspecified open wound of vagina and vulva, sequela
S31.41XS	Laceration without foreign body of vagina and vulva, sequela
S31.42XS	Laceration with foreign body of vagina and vulva, sequela
S31.43XS	Puncture wound without foreign body of vagina and vulva, sequela
S31.44XS	Puncture wound with foreign body of vagina and vulva, sequela
S31.45XS	Open bite of vagina and vulva, sequela
S31.501S	Unspecified open wound of unspecified external genital organs, male, sequela
S31.502S	Unspecified open wound of unspecified external genital organs, female, sequela
S31.511S	Laceration without foreign body of unspecified external genital organs, male, sequela
S31.512S	Laceration without foreign body of unspecified external genital organs, female, sequela
S31.521S	Laceration with foreign body of unspecified external genital organs, male, sequela
S31.522S	Laceration with foreign body of unspecified external genital organs, female, sequela
S31.531S	Puncture wound without foreign body of unspecified external genital organs, male, sequela
S31.532S	Puncture wound without foreign body of unspecified external genital organs, female, sequela
S31.541S	Puncture wound with foreign body of unspecified external genital organs, male, sequela
S31.542S	Puncture wound with foreign body of unspecified external genital organs, female, sequela
S31.551S	Open bite of unspecified external genital organs, male, sequela
S31.552S	Open bite of unspecified external genital organs, female, sequela
S31.600S	Unspecified open wound of abdominal wall, right upper quadrant with penetration into peritoneal cavity, sequela
S31.601S	Unspecified open wound of abdominal wall, left upper quadrant with penetration into peritoneal cavity, sequela
S31.602S	Unspecified open wound of abdominal wall, epigastric region with penetration into peritoneal cavity, sequela

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Code	Description
S31.603S	Unspecified open wound of abdominal wall, right lower quadrant with penetration into peritoneal cavity, sequela
S31.604S	Unspecified open wound of abdominal wall, left lower quadrant with penetration into peritoneal cavity, sequela
S31.605S	Unspecified open wound of abdominal wall, periumbilic region with penetration into peritoneal cavity, sequela
S31.609S	Unspecified open wound of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, sequela
S31.610S	Laceration without foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, sequela
S31.611S	Laceration without foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, sequela
S31.612S	Laceration without foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, sequela
S31.613S	Laceration without foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, sequela
S31.614S	Laceration without foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, sequela
S31.615S	Laceration without foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, sequela
S31.619S	Laceration without foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, sequela
S31.620S	Laceration with foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, sequela
S31.621S	Laceration with foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, sequela
S31.622S	Laceration with foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, sequela
S31.623S	Laceration with foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, sequela
S31.624S	Laceration with foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, sequela
S31.625S	Laceration with foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, sequela
S31.629S	Laceration with foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, sequela



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Code	Description
S31.630S	Puncture wound without foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, sequela
S31.631S	Puncture wound without foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, sequela
S31.632S	Puncture wound without foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, sequela
S31.633S	Puncture wound without foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, sequela
S31.634S	Puncture wound without foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, sequela
S31.635S	Puncture wound without foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, sequela
S31.639S	Puncture wound without foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, sequela
S31.640S	Puncture wound with foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, sequela
S31.641S	Puncture wound with foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, sequela
S31.642S	Puncture wound with foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, sequela
S31.643S	Puncture wound with foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, sequela
S31.644S	Puncture wound with foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, sequela
S31.645S	Puncture wound with foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, sequela
S31.649S	Puncture wound with foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, sequela
S31.650S	Open bite of abdominal wall, right upper quadrant with penetration into peritoneal cavity, sequela
S31.651S	Open bite of abdominal wall, left upper quadrant with penetration into peritoneal cavity, sequela
S31.652S	Open bite of abdominal wall, epigastric region with penetration into peritoneal cavity, sequela
S31.653S	Open bite of abdominal wall, right lower quadrant with penetration into peritoneal cavity, sequela



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Code	Description
S31.654S	Open bite of abdominal wall, left lower quadrant with penetration into peritoneal cavity, sequela
S31.655S	Open bite of abdominal wall, periumbilic region with penetration into peritoneal cavity, sequela
S31.659S	Open bite of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, sequela
S31.801S	Laceration without foreign body of unspecified buttock, sequela
S31.802S	Laceration with foreign body of unspecified buttock, sequela
S31.803S	Puncture wound without foreign body of unspecified buttock, sequela
S31.804S	Puncture wound with foreign body of unspecified buttock, sequela
S31.805S	Open bite of unspecified buttock, sequela
S31.809S	Unspecified open wound of unspecified buttock, sequela
S31.811S	Laceration without foreign body of right buttock, sequela
S31.812S	Laceration with foreign body of right buttock, sequela
S31.813S	Puncture wound without foreign body of right buttock, sequela
S31.814S	Puncture wound with foreign body of right buttock, sequela
S31.815S	Open bite of right buttock, sequela
S31.819S	Unspecified open wound of right buttock, sequela
S31.821S	Laceration without foreign body of left buttock, sequela
S31.822S	Laceration with foreign body of left buttock, sequela
S31.823S	Puncture wound without foreign body of left buttock, sequela
S31.824S	Puncture wound with foreign body of left buttock, sequela
S31.825S	Open bite of left buttock, sequela
S31.829S	Unspecified open wound of left buttock, sequela
S31.831S	Laceration without foreign body of anus, sequela
S31.832S	Laceration with foreign body of anus, sequela
S31.833S	Puncture wound without foreign body of anus, sequela
S31.834S	Puncture wound with foreign body of anus, sequela
S31.835S	Open bite of anus, sequela
S31.839S	Unspecified open wound of anus, sequela
S32.000D	Wedge compression fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing



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Code	Description
S32.000G	Wedge compression fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.000S	Wedge compression fracture of unspecified lumbar vertebra, sequela
S32.001D	Stable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing
S32.001G	Stable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.001S	Stable burst fracture of unspecified lumbar vertebra, sequela
S32.002D	Unstable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing
S32.002G	Unstable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.002S	Unstable burst fracture of unspecified lumbar vertebra, sequela
S32.008D	Other fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing
S32.008G	Other fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.008S	Other fracture of unspecified lumbar vertebra, sequela
S32.009D	Unspecified fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing
S32.009G	Unspecified fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.009S	Unspecified fracture of unspecified lumbar vertebra, sequela
S32.010D	Wedge compression fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
S32.010G	Wedge compression fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.010S	Wedge compression fracture of first lumbar vertebra, sequela
S32.011D	Stable burst fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
S32.011G	Stable burst fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.011S	Stable burst fracture of first lumbar vertebra, sequela
S32.012D	Unstable burst fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing

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Code	Description
S32.012G	Unstable burst fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.012S	Unstable burst fracture of first lumbar vertebra, sequela
S32.018D	Other fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
S32.018G	Other fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.018S	Other fracture of first lumbar vertebra, sequela
S32.019D	Unspecified fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
S32.019G	Unspecified fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.019S	Unspecified fracture of first lumbar vertebra, sequela
S32.020D	Wedge compression fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing
S32.020G	Wedge compression fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.020S	Wedge compression fracture of second lumbar vertebra, sequela
S32.021D	Stable burst fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing
S32.021G	Stable burst fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.021S	Stable burst fracture of second lumbar vertebra, sequela
S32.022D	Unstable burst fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing
S32.022G	Unstable burst fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.022S	Unstable burst fracture of second lumbar vertebra, sequela
S32.028D	Other fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing
S32.028G	Other fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.028S	Other fracture of second lumbar vertebra, sequela
S32.029D	Unspecified fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing

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Code	Description
S32.029G	Unspecified fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.029S	Unspecified fracture of second lumbar vertebra, sequela
S32.030D	Wedge compression fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
S32.030G	Wedge compression fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.030S	Wedge compression fracture of third lumbar vertebra, sequela
S32.031D	Stable burst fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
S32.031G	Stable burst fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.031S	Stable burst fracture of third lumbar vertebra, sequela
S32.032D	Unstable burst fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
S32.032G	Unstable burst fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.032S	Unstable burst fracture of third lumbar vertebra, sequela
S32.038D	Other fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
S32.038G	Other fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.038S	Other fracture of third lumbar vertebra, sequela
S32.039D	Unspecified fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
S32.039G	Unspecified fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.039S	Unspecified fracture of third lumbar vertebra, sequela
S32.040D	Wedge compression fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
S32.040G	Wedge compression fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.040S	Wedge compression fracture of fourth lumbar vertebra, sequela
S32.041D	Stable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing



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Code	Description
S32.041G	Stable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.041S	Stable burst fracture of fourth lumbar vertebra, sequela
S32.042D	Unstable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
S32.042G	Unstable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.042S	Unstable burst fracture of fourth lumbar vertebra, sequela
S32.048D	Other fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
S32.048G	Other fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.048S	Other fracture of fourth lumbar vertebra, sequela
S32.049D	Unspecified fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
S32.049G	Unspecified fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.049S	Unspecified fracture of fourth lumbar vertebra, sequela
S32.050D	Wedge compression fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
S32.050G	Wedge compression fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.050S	Wedge compression fracture of fifth lumbar vertebra, sequela
S32.051D	Stable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
S32.051G	Stable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.051S	Stable burst fracture of fifth lumbar vertebra, sequela
S32.052D	Unstable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
S32.052G	Unstable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.052S	Unstable burst fracture of fifth lumbar vertebra, sequela
S32.058D	Other fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S32.058G	Other fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.058S	Other fracture of fifth lumbar vertebra, sequela
S32.059D	Unspecified fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
S32.059G	Unspecified fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
S32.059S	Unspecified fracture of fifth lumbar vertebra, sequela
S32.10XD	Unspecified fracture of sacrum, subsequent encounter for fracture with routine healing
S32.10XG	Unspecified fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.10XS	Unspecified fracture of sacrum, sequela
S32.110D	Nondisplaced Zone I fracture of sacrum, subsequent encounter for fracture with routine healing
S32.110G	Nondisplaced Zone I fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.110S	Nondisplaced Zone I fracture of sacrum, sequela
S32.111D	Minimally displaced Zone I fracture of sacrum, subsequent encounter for fracture with routine healing
S32.111G	Minimally displaced Zone I fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.111S	Minimally displaced Zone I fracture of sacrum, sequela
S32.112D	Severely displaced Zone I fracture of sacrum, subsequent encounter for fracture with routine healing
S32.112G	Severely displaced Zone I fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.112S	Severely displaced Zone I fracture of sacrum, sequela
S32.119D	Unspecified Zone I fracture of sacrum, subsequent encounter for fracture with routine healing
S32.119G	Unspecified Zone I fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.119S	Unspecified Zone I fracture of sacrum, sequela
S32.120D	Nondisplaced Zone II fracture of sacrum, subsequent encounter for fracture with routine healing
S32.120G	Nondisplaced Zone II fracture of sacrum, subsequent encounter for fracture with delayed healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S32.120S	Nondisplaced Zone II fracture of sacrum, sequela
S32.121D	Minimally displaced Zone II fracture of sacrum, subsequent encounter for fracture with routine healing
S32.121G	Minimally displaced Zone II fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.121S	Minimally displaced Zone II fracture of sacrum, sequela
S32.122D	Severely displaced Zone II fracture of sacrum, subsequent encounter for fracture with routine healing
S32.122G	Severely displaced Zone II fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.122S	Severely displaced Zone II fracture of sacrum, sequela
S32.129D	Unspecified Zone II fracture of sacrum, subsequent encounter for fracture with routine healing
S32.129G	Unspecified Zone II fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.129S	Unspecified Zone II fracture of sacrum, sequela
S32.130D	Nondisplaced Zone III fracture of sacrum, subsequent encounter for fracture with routine healing
S32.130G	Nondisplaced Zone III fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.130S	Nondisplaced Zone III fracture of sacrum, sequela
S32.131D	Minimally displaced Zone III fracture of sacrum, subsequent encounter for fracture with routine healing
S32.131G	Minimally displaced Zone III fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.131S	Minimally displaced Zone III fracture of sacrum, sequela
S32.132D	Severely displaced Zone III fracture of sacrum, subsequent encounter for fracture with routine healing
S32.132G	Severely displaced Zone III fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.132S	Severely displaced Zone III fracture of sacrum, sequela
S32.139D	Unspecified Zone III fracture of sacrum, subsequent encounter for fracture with routine healing
S32.139G	Unspecified Zone III fracture of sacrum, subsequent encounter for fracture with delayed healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S32.139S	Unspecified Zone III fracture of sacrum, sequela
S32.14XD	Type 1 fracture of sacrum, subsequent encounter for fracture with routine healing
S32.14XG	Type 1 fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.14XS	Type 1 fracture of sacrum, sequela
S32.15XD	Type 2 fracture of sacrum, subsequent encounter for fracture with routine healing
S32.15XG	Type 2 fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.15XS	Type 2 fracture of sacrum, sequela
S32.16XD	Type 3 fracture of sacrum, subsequent encounter for fracture with routine healing
S32.16XG	Type 3 fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.16XS	Type 3 fracture of sacrum, sequela
S32.17XD	Type 4 fracture of sacrum, subsequent encounter for fracture with routine healing
S32.17XG	Type 4 fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.17XS	Type 4 fracture of sacrum, sequela
S32.19XD	Other fracture of sacrum, subsequent encounter for fracture with routine healing
S32.19XG	Other fracture of sacrum, subsequent encounter for fracture with delayed healing
S32.19XS	Other fracture of sacrum, sequela
S32.2XXD	Fracture of coccyx, subsequent encounter for fracture with routine healing
S32.2XXG	Fracture of coccyx, subsequent encounter for fracture with delayed healing
S32.2XXS	Fracture of coccyx, sequela
S32.301D	Unspecified fracture of right ilium, subsequent encounter for fracture with routine healing
S32.301G	Unspecified fracture of right ilium, subsequent encounter for fracture with delayed healing
S32.301S	Unspecified fracture of right ilium, sequela
S32.302D	Unspecified fracture of left ilium, subsequent encounter for fracture with routine healing
S32.302G	Unspecified fracture of left ilium, subsequent encounter for fracture with delayed healing
S32.302S	Unspecified fracture of left ilium, sequela
S32.309D	Unspecified fracture of unspecified ilium, subsequent encounter for fracture with routine healing
S32.309G	Unspecified fracture of unspecified ilium, subsequent encounter for fracture with delayed healing
S32.309S	Unspecified fracture of unspecified ilium, sequela



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Code	Description
S32.311D	Displaced avulsion fracture of right ilium, subsequent encounter for fracture with routine healing
S32.311G	Displaced avulsion fracture of right ilium, subsequent encounter for fracture with delayed healing
S32.311S	Displaced avulsion fracture of right ilium, sequela
S32.312D	Displaced avulsion fracture of left ilium, subsequent encounter for fracture with routine healing
S32.312G	Displaced avulsion fracture of left ilium, subsequent encounter for fracture with delayed healing
S32.312S	Displaced avulsion fracture of left ilium, sequela
S32.313D	Displaced avulsion fracture of unspecified ilium, subsequent encounter for fracture with routine healing
S32.313G	Displaced avulsion fracture of unspecified ilium, subsequent encounter for fracture with delayed healing
S32.313S	Displaced avulsion fracture of unspecified ilium, sequela
S32.314D	Nondisplaced avulsion fracture of right ilium, subsequent encounter for fracture with routine healing
S32.314G	Nondisplaced avulsion fracture of right ilium, subsequent encounter for fracture with delayed healing
S32.314S	Nondisplaced avulsion fracture of right ilium, sequela
S32.315D	Nondisplaced avulsion fracture of left ilium, subsequent encounter for fracture with routine healing
S32.315G	Nondisplaced avulsion fracture of left ilium, subsequent encounter for fracture with delayed healing
S32.315S	Nondisplaced avulsion fracture of left ilium, sequela
S32.316D	Nondisplaced avulsion fracture of unspecified ilium, subsequent encounter for fracture with routine healing
S32.316G	Nondisplaced avulsion fracture of unspecified ilium, subsequent encounter for fracture with delayed healing
S32.316S	Nondisplaced avulsion fracture of unspecified ilium, sequela
S32.391D	Other fracture of right ilium, subsequent encounter for fracture with routine healing
S32.391G	Other fracture of right ilium, subsequent encounter for fracture with delayed healing
S32.391S	Other fracture of right ilium, sequela
S32.392D	Other fracture of left ilium, subsequent encounter for fracture with routine healing



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Code	Description
S32.392G	Other fracture of left ilium, subsequent encounter for fracture with delayed healing
S32.392S	Other fracture of left ilium, sequela
S32.399D	Other fracture of unspecified ilium, subsequent encounter for fracture with routine healing
S32.399G	Other fracture of unspecified ilium, subsequent encounter for fracture with delayed healing
S32.399S	Other fracture of unspecified ilium, sequela
S32.401D	Unspecified fracture of right acetabulum, subsequent encounter for fracture with routine healing
S32.401G	Unspecified fracture of right acetabulum, subsequent encounter for fracture with delayed healing
S32.401S	Unspecified fracture of right acetabulum, sequela
S32.402D	Unspecified fracture of left acetabulum, subsequent encounter for fracture with routine healing
S32.402G	Unspecified fracture of left acetabulum, subsequent encounter for fracture with delayed healing
S32.402S	Unspecified fracture of left acetabulum, sequela
S32.409D	Unspecified fracture of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.409G	Unspecified fracture of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.409S	Unspecified fracture of unspecified acetabulum, sequela
S32.411D	Displaced fracture of anterior wall of right acetabulum, subsequent encounter for fracture with routine healing
S32.411G	Displaced fracture of anterior wall of right acetabulum, subsequent encounter for fracture with delayed healing
S32.411S	Displaced fracture of anterior wall of right acetabulum, sequela
S32.412D	Displaced fracture of anterior wall of left acetabulum, subsequent encounter for fracture with routine healing
S32.412G	Displaced fracture of anterior wall of left acetabulum, subsequent encounter for fracture with delayed healing
S32.412S	Displaced fracture of anterior wall of left acetabulum, sequela
S32.413D	Displaced fracture of anterior wall of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.413G	Displaced fracture of anterior wall of unspecified acetabulum, subsequent encounter for fracture with delayed healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S32.413S	Displaced fracture of anterior wall of unspecified acetabulum, sequela
S32.414D	Nondisplaced fracture of anterior wall of right acetabulum, subsequent encounter for fracture with routine healing
S32.414G	Nondisplaced fracture of anterior wall of right acetabulum, subsequent encounter for fracture with delayed healing
S32.414S	Nondisplaced fracture of anterior wall of right acetabulum, sequela
S32.415D	Nondisplaced fracture of anterior wall of left acetabulum, subsequent encounter for fracture with routine healing
S32.415G	Nondisplaced fracture of anterior wall of left acetabulum, subsequent encounter for fracture with delayed healing
S32.415S	Nondisplaced fracture of anterior wall of left acetabulum, sequela
S32.416D	Nondisplaced fracture of anterior wall of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.416G	Nondisplaced fracture of anterior wall of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.416S	Nondisplaced fracture of anterior wall of unspecified acetabulum, sequela
S32.421D	Displaced fracture of posterior wall of right acetabulum, subsequent encounter for fracture with routine healing
S32.421G	Displaced fracture of posterior wall of right acetabulum, subsequent encounter for fracture with delayed healing
S32.421S	Displaced fracture of posterior wall of right acetabulum, sequela
S32.422D	Displaced fracture of posterior wall of left acetabulum, subsequent encounter for fracture with routine healing
S32.422G	Displaced fracture of posterior wall of left acetabulum, subsequent encounter for fracture with delayed healing
S32.422S	Displaced fracture of posterior wall of left acetabulum, sequela
S32.423D	Displaced fracture of posterior wall of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.423G	Displaced fracture of posterior wall of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.423S	Displaced fracture of posterior wall of unspecified acetabulum, sequela
S32.424D	Nondisplaced fracture of posterior wall of right acetabulum, subsequent encounter for fracture with routine healing
S32.424G	Nondisplaced fracture of posterior wall of right acetabulum, subsequent encounter for fracture with delayed healing



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Code	Description
S32.424S	Nondisplaced fracture of posterior wall of right acetabulum, sequela
S32.425D	Nondisplaced fracture of posterior wall of left acetabulum, subsequent encounter for fracture with routine healing
S32.425G	Nondisplaced fracture of posterior wall of left acetabulum, subsequent encounter for fracture with delayed healing
S32.425S	Nondisplaced fracture of posterior wall of left acetabulum, sequela
S32.426D	Nondisplaced fracture of posterior wall of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.426G	Nondisplaced fracture of posterior wall of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.426S	Nondisplaced fracture of posterior wall of unspecified acetabulum, sequela
S32.431D	Displaced fracture of anterior column [iliopubic] of right acetabulum, subsequent encounter for fracture with routine healing
S32.431G	Displaced fracture of anterior column [iliopubic] of right acetabulum, subsequent encounter for fracture with delayed healing
S32.431S	Displaced fracture of anterior column [iliopubic] of right acetabulum, sequela
S32.432D	Displaced fracture of anterior column [iliopubic] of left acetabulum, subsequent encounter for fracture with routine healing
S32.432G	Displaced fracture of anterior column [iliopubic] of left acetabulum, subsequent encounter for fracture with delayed healing
S32.432S	Displaced fracture of anterior column [iliopubic] of left acetabulum, sequela
S32.433D	Displaced fracture of anterior column [iliopubic] of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.433G	Displaced fracture of anterior column [iliopubic] of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.433S	Displaced fracture of anterior column [iliopubic] of unspecified acetabulum, sequela
S32.434D	Nondisplaced fracture of anterior column [iliopubic] of right acetabulum, subsequent encounter for fracture with routine healing
S32.434G	Nondisplaced fracture of anterior column [iliopubic] of right acetabulum, subsequent encounter for fracture with delayed healing
S32.434S	Nondisplaced fracture of anterior column [iliopubic] of right acetabulum, sequela
S32.435D	Nondisplaced fracture of anterior column [iliopubic] of left acetabulum, subsequent encounter for fracture with routine healing
S32.435G	Nondisplaced fracture of anterior column [iliopubic] of left acetabulum, subsequent encounter for fracture with delayed healing



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Code	Description
S32.435S	Nondisplaced fracture of anterior column [iliopubic] of left acetabulum, sequela
S32.436D	Nondisplaced fracture of anterior column [iliopubic] of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.436G	Nondisplaced fracture of anterior column [iliopubic] of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.436S	Nondisplaced fracture of anterior column [iliopubic] of unspecified acetabulum, sequela
S32.441D	Displaced fracture of posterior column [ilioischial] of right acetabulum, subsequent encounter for fracture with routine healing
S32.441G	Displaced fracture of posterior column [ilioischial] of right acetabulum, subsequent encounter for fracture with delayed healing
S32.441S	Displaced fracture of posterior column [ilioischial] of right acetabulum, sequela
S32.442D	Displaced fracture of posterior column [ilioischial] of left acetabulum, subsequent encounter for fracture with routine healing
S32.442G	Displaced fracture of posterior column [ilioischial] of left acetabulum, subsequent encounter for fracture with delayed healing
S32.442S	Displaced fracture of posterior column [ilioischial] of left acetabulum, sequela
S32.443D	Displaced fracture of posterior column [ilioischial] of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.443G	Displaced fracture of posterior column [ilioischial] of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.443S	Displaced fracture of posterior column [ilioischial] of unspecified acetabulum, sequela
S32.444D	Nondisplaced fracture of posterior column [ilioischial] of right acetabulum, subsequent encounter for fracture with routine healing
S32.444G	Nondisplaced fracture of posterior column [ilioischial] of right acetabulum, subsequent encounter for fracture with delayed healing
S32.444S	Nondisplaced fracture of posterior column [ilioischial] of right acetabulum, sequela
S32.445D	Nondisplaced fracture of posterior column [ilioischial] of left acetabulum, subsequent encounter for fracture with routine healing
S32.445G	Nondisplaced fracture of posterior column [ilioischial] of left acetabulum, subsequent encounter for fracture with delayed healing
S32.445S	Nondisplaced fracture of posterior column [ilioischial] of left acetabulum, sequela
S32.446D	Nondisplaced fracture of posterior column [ilioischial] of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.446G	Nondisplaced fracture of posterior column [ilioischial] of unspecified acetabulum, subsequent encounter for fracture with delayed healing

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***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S32.446S	Nondisplaced fracture of posterior column [ilioischial] of unspecified acetabulum, sequela
S32.451D	Displaced transverse fracture of right acetabulum, subsequent encounter for fracture with routine healing
S32.451G	Displaced transverse fracture of right acetabulum, subsequent encounter for fracture with delayed healing
S32.451S	Displaced transverse fracture of right acetabulum, sequela
S32.452D	Displaced transverse fracture of left acetabulum, subsequent encounter for fracture with routine healing
S32.452G	Displaced transverse fracture of left acetabulum, subsequent encounter for fracture with delayed healing
S32.452S	Displaced transverse fracture of left acetabulum, sequela
S32.453D	Displaced transverse fracture of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.453G	Displaced transverse fracture of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.453S	Displaced transverse fracture of unspecified acetabulum, sequela
S32.454D	Nondisplaced transverse fracture of right acetabulum, subsequent encounter for fracture with routine healing
S32.454G	Nondisplaced transverse fracture of right acetabulum, subsequent encounter for fracture with delayed healing
S32.454S	Nondisplaced transverse fracture of right acetabulum, sequela
S32.455D	Nondisplaced transverse fracture of left acetabulum, subsequent encounter for fracture with routine healing
S32.455G	Nondisplaced transverse fracture of left acetabulum, subsequent encounter for fracture with delayed healing
S32.455S	Nondisplaced transverse fracture of left acetabulum, sequela
S32.456D	Nondisplaced transverse fracture of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.456G	Nondisplaced transverse fracture of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.456S	Nondisplaced transverse fracture of unspecified acetabulum, sequela
S32.461D	Displaced associated transverse-posterior fracture of right acetabulum, subsequent encounter for fracture with routine healing
S32.461G	Displaced associated transverse-posterior fracture of right acetabulum, subsequent encounter for fracture with delayed healing



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Code	Description
S32.461S	Displaced associated transverse-posterior fracture of right acetabulum, sequela
S32.462D	Displaced associated transverse-posterior fracture of left acetabulum, subsequent encounter for fracture with routine healing
S32.462G	Displaced associated transverse-posterior fracture of left acetabulum, subsequent encounter for fracture with delayed healing
S32.462S	Displaced associated transverse-posterior fracture of left acetabulum, sequela
S32.463D	Displaced associated transverse-posterior fracture of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.463G	Displaced associated transverse-posterior fracture of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.463S	Displaced associated transverse-posterior fracture of unspecified acetabulum, sequela
S32.464D	Nondisplaced associated transverse-posterior fracture of right acetabulum, subsequent encounter for fracture with routine healing
S32.464G	Nondisplaced associated transverse-posterior fracture of right acetabulum, subsequent encounter for fracture with delayed healing
S32.464S	Nondisplaced associated transverse-posterior fracture of right acetabulum, sequela
S32.465D	Nondisplaced associated transverse-posterior fracture of left acetabulum, subsequent encounter for fracture with routine healing
S32.465G	Nondisplaced associated transverse-posterior fracture of left acetabulum, subsequent encounter for fracture with delayed healing
S32.465S	Nondisplaced associated transverse-posterior fracture of left acetabulum, sequela
S32.466D	Nondisplaced associated transverse-posterior fracture of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.466G	Nondisplaced associated transverse-posterior fracture of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.466S	Nondisplaced associated transverse-posterior fracture of unspecified acetabulum, sequela
S32.471D	Displaced fracture of medial wall of right acetabulum, subsequent encounter for fracture with routine healing
S32.471G	Displaced fracture of medial wall of right acetabulum, subsequent encounter for fracture with delayed healing
S32.471S	Displaced fracture of medial wall of right acetabulum, sequela
S32.472D	Displaced fracture of medial wall of left acetabulum, subsequent encounter for fracture with routine healing
S32.472G	Displaced fracture of medial wall of left acetabulum, subsequent encounter for fracture with delayed healing



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Code	Description
S32.472S	Displaced fracture of medial wall of left acetabulum, sequela
S32.473D	Displaced fracture of medial wall of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.473G	Displaced fracture of medial wall of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.473S	Displaced fracture of medial wall of unspecified acetabulum, sequela
S32.474D	Nondisplaced fracture of medial wall of right acetabulum, subsequent encounter for fracture with routine healing
S32.474G	Nondisplaced fracture of medial wall of right acetabulum, subsequent encounter for fracture with delayed healing
S32.474S	Nondisplaced fracture of medial wall of right acetabulum, sequela
S32.475D	Nondisplaced fracture of medial wall of left acetabulum, subsequent encounter for fracture with routine healing
S32.475G	Nondisplaced fracture of medial wall of left acetabulum, subsequent encounter for fracture with delayed healing
S32.475S	Nondisplaced fracture of medial wall of left acetabulum, sequela
S32.476D	Nondisplaced fracture of medial wall of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.476G	Nondisplaced fracture of medial wall of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.476S	Nondisplaced fracture of medial wall of unspecified acetabulum, sequela
S32.481D	Displaced dome fracture of right acetabulum, subsequent encounter for fracture with routine healing
S32.481G	Displaced dome fracture of right acetabulum, subsequent encounter for fracture with delayed healing
S32.481S	Displaced dome fracture of right acetabulum, sequela
S32.482D	Displaced dome fracture of left acetabulum, subsequent encounter for fracture with routine healing
S32.482G	Displaced dome fracture of left acetabulum, subsequent encounter for fracture with delayed healing
S32.482S	Displaced dome fracture of left acetabulum, sequela
S32.483D	Displaced dome fracture of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.483G	Displaced dome fracture of unspecified acetabulum, subsequent encounter for fracture with delayed healing



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Code	Description
S32.483S	Displaced dome fracture of unspecified acetabulum, sequela
S32.484D	Nondisplaced dome fracture of right acetabulum, subsequent encounter for fracture with routine healing
S32.484G	Nondisplaced dome fracture of right acetabulum, subsequent encounter for fracture with delayed healing
S32.484S	Nondisplaced dome fracture of right acetabulum, sequela
S32.485D	Nondisplaced dome fracture of left acetabulum, subsequent encounter for fracture with routine healing
S32.485G	Nondisplaced dome fracture of left acetabulum, subsequent encounter for fracture with delayed healing
S32.485S	Nondisplaced dome fracture of left acetabulum, sequela
S32.486D	Nondisplaced dome fracture of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.486G	Nondisplaced dome fracture of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.486S	Nondisplaced dome fracture of unspecified acetabulum, sequela
S32.491D	Other specified fracture of right acetabulum, subsequent encounter for fracture with routine healing
S32.491G	Other specified fracture of right acetabulum, subsequent encounter for fracture with delayed healing
S32.491S	Other specified fracture of right acetabulum, sequela
S32.492D	Other specified fracture of left acetabulum, subsequent encounter for fracture with routine healing
S32.492G	Other specified fracture of left acetabulum, subsequent encounter for fracture with delayed healing
S32.492S	Other specified fracture of left acetabulum, sequela
S32.499D	Other specified fracture of unspecified acetabulum, subsequent encounter for fracture with routine healing
S32.499G	Other specified fracture of unspecified acetabulum, subsequent encounter for fracture with delayed healing
S32.499S	Other specified fracture of unspecified acetabulum, sequela
S32.501D	Unspecified fracture of right pubis, subsequent encounter for fracture with routine healing
S32.501G	Unspecified fracture of right pubis, subsequent encounter for fracture with delayed healing
S32.501S	Unspecified fracture of right pubis, sequela



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Code	Description
S32.502D	Unspecified fracture of left pubis, subsequent encounter for fracture with routine healing
S32.502G	Unspecified fracture of left pubis, subsequent encounter for fracture with delayed healing
S32.502S	Unspecified fracture of left pubis, sequela
S32.509D	Unspecified fracture of unspecified pubis, subsequent encounter for fracture with routine healing
S32.509G	Unspecified fracture of unspecified pubis, subsequent encounter for fracture with delayed healing
S32.509S	Unspecified fracture of unspecified pubis, sequela
S32.511D	Fracture of superior rim of right pubis, subsequent encounter for fracture with routine healing
S32.511G	Fracture of superior rim of right pubis, subsequent encounter for fracture with delayed healing
S32.511S	Fracture of superior rim of right pubis, sequela
S32.512D	Fracture of superior rim of left pubis, subsequent encounter for fracture with routine healing
S32.512G	Fracture of superior rim of left pubis, subsequent encounter for fracture with delayed healing
S32.512S	Fracture of superior rim of left pubis, sequela
S32.519D	Fracture of superior rim of unspecified pubis, subsequent encounter for fracture with routine healing
S32.519G	Fracture of superior rim of unspecified pubis, subsequent encounter for fracture with delayed healing
S32.519S	Fracture of superior rim of unspecified pubis, sequela
S32.591D	Other specified fracture of right pubis, subsequent encounter for fracture with routine healing
S32.591G	Other specified fracture of right pubis, subsequent encounter for fracture with delayed healing
S32.591S	Other specified fracture of right pubis, sequela
S32.592D	Other specified fracture of left pubis, subsequent encounter for fracture with routine healing
S32.592G	Other specified fracture of left pubis, subsequent encounter for fracture with delayed healing
S32.592S	Other specified fracture of left pubis, sequela
S32.599D	Other specified fracture of unspecified pubis, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S32.599G	Other specified fracture of unspecified pubis, subsequent encounter for fracture with delayed healing
S32.599S	Other specified fracture of unspecified pubis, sequela
S32.601D	Unspecified fracture of right ischium, subsequent encounter for fracture with routine healing
S32.601G	Unspecified fracture of right ischium, subsequent encounter for fracture with delayed healing
S32.601S	Unspecified fracture of right ischium, sequela
S32.602D	Unspecified fracture of left ischium, subsequent encounter for fracture with routine healing
S32.602G	Unspecified fracture of left ischium, subsequent encounter for fracture with delayed healing
S32.602S	Unspecified fracture of left ischium, sequela
S32.609D	Unspecified fracture of unspecified ischium, subsequent encounter for fracture with routine healing
S32.609G	Unspecified fracture of unspecified ischium, subsequent encounter for fracture with delayed healing
S32.609S	Unspecified fracture of unspecified ischium, sequela
S32.611D	Displaced avulsion fracture of right ischium, subsequent encounter for fracture with routine healing
S32.611G	Displaced avulsion fracture of right ischium, subsequent encounter for fracture with delayed healing
S32.611S	Displaced avulsion fracture of right ischium, sequela
S32.612D	Displaced avulsion fracture of left ischium, subsequent encounter for fracture with routine healing
S32.612G	Displaced avulsion fracture of left ischium, subsequent encounter for fracture with delayed healing
S32.612S	Displaced avulsion fracture of left ischium, sequela
S32.613D	Displaced avulsion fracture of unspecified ischium, subsequent encounter for fracture with routine healing
S32.613G	Displaced avulsion fracture of unspecified ischium, subsequent encounter for fracture with delayed healing
S32.613S	Displaced avulsion fracture of unspecified ischium, sequela
S32.614D	Nondisplaced avulsion fracture of right ischium, subsequent encounter for fracture with routine healing
S32.614G	Nondisplaced avulsion fracture of right ischium, subsequent encounter for fracture with delayed healing

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Code	Description
S32.614S	Nondisplaced avulsion fracture of right ischium, sequela
S32.615D	Nondisplaced avulsion fracture of left ischium, subsequent encounter for fracture with routine healing
S32.615G	Nondisplaced avulsion fracture of left ischium, subsequent encounter for fracture with delayed healing
S32.615S	Nondisplaced avulsion fracture of left ischium, sequela
S32.616D	Nondisplaced avulsion fracture of unspecified ischium, subsequent encounter for fracture with routine healing
S32.616G	Nondisplaced avulsion fracture of unspecified ischium, subsequent encounter for fracture with delayed healing
S32.616S	Nondisplaced avulsion fracture of unspecified ischium, sequela
S32.691D	Other specified fracture of right ischium, subsequent encounter for fracture with routine healing
S32.691G	Other specified fracture of right ischium, subsequent encounter for fracture with delayed healing
S32.691S	Other specified fracture of right ischium, sequela
S32.692D	Other specified fracture of left ischium, subsequent encounter for fracture with routine healing
S32.692G	Other specified fracture of left ischium, subsequent encounter for fracture with delayed healing
S32.692S	Other specified fracture of left ischium, sequela
S32.699D	Other specified fracture of unspecified ischium, subsequent encounter for fracture with routine healing
S32.699G	Other specified fracture of unspecified ischium, subsequent encounter for fracture with delayed healing
S32.699S	Other specified fracture of unspecified ischium, sequela
S32.810D	Multiple fractures of pelvis with stable disruption of pelvic ring, subsequent encounter for fracture with routine healing
S32.810G	Multiple fractures of pelvis with stable disruption of pelvic ring, subsequent encounter for fracture with delayed healing
S32.810S	Multiple fractures of pelvis with stable disruption of pelvic ring, sequela
S32.811D	Multiple fractures of pelvis with unstable disruption of pelvic ring, subsequent encounter for fracture with routine healing
S32.811G	Multiple fractures of pelvis with unstable disruption of pelvic ring, subsequent encounter for fracture with delayed healing

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Code	Description
S32.811S	Multiple fractures of pelvis with unstable disruption of pelvic ring, sequela
S32.82XD	Multiple fractures of pelvis without disruption of pelvic ring, subsequent encounter for fracture with routine healing
S32.82XG	Multiple fractures of pelvis without disruption of pelvic ring, subsequent encounter for fracture with delayed healing
S32.82XS	Multiple fractures of pelvis without disruption of pelvic ring, sequela
S32.89XD	Fracture of other parts of pelvis, subsequent encounter for fracture with routine healing
S32.89XG	Fracture of other parts of pelvis, subsequent encounter for fracture with delayed healing
S32.89XS	Fracture of other parts of pelvis, sequela
S32.9XXD	Fracture of unspecified parts of lumbosacral spine and pelvis, subsequent encounter for fracture with routine healing
S32.9XXG	Fracture of unspecified parts of lumbosacral spine and pelvis, subsequent encounter for fracture with delayed healing
S32.9XXS	Fracture of unspecified parts of lumbosacral spine and pelvis, sequela
S33.0XXA	Traumatic rupture of lumbar intervertebral disc, initial encounter
S33.0XXS	Traumatic rupture of lumbar intervertebral disc, sequela
S33.100A	Subluxation of unspecified lumbar vertebra, initial encounter
S33.100S	Subluxation of unspecified lumbar vertebra, sequela
S33.101A	Dislocation of unspecified lumbar vertebra, initial encounter
S33.101S	Dislocation of unspecified lumbar vertebra, sequela
S33.110A	Subluxation of L1/L2 lumbar vertebra, initial encounter
S33.110S	Subluxation of L1/L2 lumbar vertebra, sequela
S33.111A	Dislocation of L1/L2 lumbar vertebra, initial encounter
S33.111S	Dislocation of L1/L2 lumbar vertebra, sequela
S33.120A	Subluxation of L2/L3 lumbar vertebra, initial encounter
S33.120S	Subluxation of L2/L3 lumbar vertebra, sequela
S33.121A	Dislocation of L2/L3 lumbar vertebra, initial encounter
S33.121S	Dislocation of L2/L3 lumbar vertebra, sequela
S33.130A	Subluxation of L3/L4 lumbar vertebra, initial encounter
S33.130S	Subluxation of L3/L4 lumbar vertebra, sequela
S33.131A	Dislocation of L3/L4 lumbar vertebra, initial encounter
S33.131S	Dislocation of L3/L4 lumbar vertebra, sequela

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Code	Description
S33.140A	Subluxation of L4/L5 lumbar vertebra, initial encounter
S33.140S	Subluxation of L4/L5 lumbar vertebra, sequela
S33.141A	Dislocation of L4/L5 lumbar vertebra, initial encounter
S33.141S	Dislocation of L4/L5 lumbar vertebra, sequela
S33.2XXA	Dislocation of sacroiliac and sacrococcygeal joint, initial encounter
S33.2XXS	Dislocation of sacroiliac and sacrococcygeal joint, sequela
S33.30XA	Dislocation of unspecified parts of lumbar spine and pelvis, initial encounter
S33.30XS	Dislocation of unspecified parts of lumbar spine and pelvis, sequela
S33.39XA	Dislocation of other parts of lumbar spine and pelvis, initial encounter
S33.39XS	Dislocation of other parts of lumbar spine and pelvis, sequela
S33.4XXA	Traumatic rupture of symphysis pubis, initial encounter
S33.4XXS	Traumatic rupture of symphysis pubis, sequela
S33.5XXA	Sprain of ligaments of lumbar spine, initial encounter
S33.5XXS	Sprain of ligaments of lumbar spine, sequela
S33.6XXA	Sprain of sacroiliac joint, initial encounter
S33.6XXS	Sprain of sacroiliac joint, sequela
S33.8XXA	Sprain of other parts of lumbar spine and pelvis, initial encounter
S33.8XXS	Sprain of other parts of lumbar spine and pelvis, sequela
S33.9XXA	Sprain of unspecified parts of lumbar spine and pelvis, initial encounter
S33.9XXS	Sprain of unspecified parts of lumbar spine and pelvis, sequela
S34.01XS	Concussion and edema of lumbar spinal cord, sequela
S34.02XS	Concussion and edema of sacral spinal cord, sequela
S34.101S	Unspecified injury to L1 level of lumbar spinal cord, sequela
S34.102S	Unspecified injury to L2 level of lumbar spinal cord, sequela
S34.103S	Unspecified injury to L3 level of lumbar spinal cord, sequela
S34.104S	Unspecified injury to L4 level of lumbar spinal cord, sequela
S34.105S	Unspecified injury to L5 level of lumbar spinal cord, sequela
S34.109S	Unspecified injury to unspecified level of lumbar spinal cord, sequela
S34.111S	Complete lesion of L1 level of lumbar spinal cord, sequela
S34.112S	Complete lesion of L2 level of lumbar spinal cord, sequela

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Code	Description
S34.113S	Complete lesion of L3 level of lumbar spinal cord, sequela
S34.114S	Complete lesion of L4 level of lumbar spinal cord, sequela
S34.115S	Complete lesion of L5 level of lumbar spinal cord, sequela
S34.119S	Complete lesion of unspecified level of lumbar spinal cord, sequela
S34.121S	Incomplete lesion of L1 level of lumbar spinal cord, sequela
S34.122S	Incomplete lesion of L2 level of lumbar spinal cord, sequela
S34.123S	Incomplete lesion of L3 level of lumbar spinal cord, sequela
S34.124S	Incomplete lesion of L4 level of lumbar spinal cord, sequela
S34.125S	Incomplete lesion of L5 level of lumbar spinal cord, sequela
S34.129S	Incomplete lesion of unspecified level of lumbar spinal cord, sequela
S34.131S	Complete lesion of sacral spinal cord, sequela
S34.132S	Incomplete lesion of sacral spinal cord, sequela
S34.139S	Unspecified injury to sacral spinal cord, sequela
S34.21XS	Injury of nerve root of lumbar spine, sequela
S34.22XS	Injury of nerve root of sacral spine, sequela
S34.3XXS	Injury of cauda equina, sequela
S34.4XXS	Injury of lumbosacral plexus, sequela
S34.5XXS	Injury of lumbar, sacral and pelvic sympathetic nerves, sequela
S34.6XXS	Injury of peripheral nerve(s) at abdomen, lower back and pelvis level, sequela
S34.8XXS	Injury of other nerves at abdomen, lower back and pelvis level, sequela
S34.9XXA	Injury of unspecified nerves at abdomen, lower back and pelvis level, initial encounter
S34.9XXS	Injury of unspecified nerves at abdomen, lower back and pelvis level, sequela
S35.00XS	Unspecified injury of abdominal aorta, sequela
S35.01XS	Minor laceration of abdominal aorta, sequela
S35.02XS	Major laceration of abdominal aorta, sequela
S35.09XS	Other injury of abdominal aorta, sequela
S35.10XS	Unspecified injury of inferior vena cava, sequela
S35.11XS	Minor laceration of inferior vena cava, sequela
S35.12XS	Major laceration of inferior vena cava, sequela
S35.19XS	Other injury of inferior vena cava, sequela



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Code	Description
S35.211S	Minor laceration of celiac artery, sequela
S35.212S	Major laceration of celiac artery, sequela
S35.218S	Other injury of celiac artery, sequela
S35.219S	Unspecified injury of celiac artery, sequela
S35.221S	Minor laceration of superior mesenteric artery, sequela
S35.222S	Major laceration of superior mesenteric artery, sequela
S35.228S	Other injury of superior mesenteric artery, sequela
S35.229S	Unspecified injury of superior mesenteric artery, sequela
S35.231S	Minor laceration of inferior mesenteric artery, sequela
S35.232S	Major laceration of inferior mesenteric artery, sequela
S35.238S	Other injury of inferior mesenteric artery, sequela
S35.239S	Unspecified injury of inferior mesenteric artery, sequela
S35.291S	Minor laceration of branches of celiac and mesenteric artery, sequela
S35.292S	Major laceration of branches of celiac and mesenteric artery, sequela
S35.298S	Other injury of branches of celiac and mesenteric artery, sequela
S35.299S	Unspecified injury of branches of celiac and mesenteric artery, sequela
S35.311S	Laceration of portal vein, sequela
S35.318S	Other specified injury of portal vein, sequela
S35.319S	Unspecified injury of portal vein, sequela
S35.321S	Laceration of splenic vein, sequela
S35.328S	Other specified injury of splenic vein, sequela
S35.329S	Unspecified injury of splenic vein, sequela
S35.331S	Laceration of superior mesenteric vein, sequela
S35.338S	Other specified injury of superior mesenteric vein, sequela
S35.339S	Unspecified injury of superior mesenteric vein, sequela
S35.341S	Laceration of inferior mesenteric vein, sequela
S35.348S	Other specified injury of inferior mesenteric vein, sequela
S35.349S	Unspecified injury of inferior mesenteric vein, sequela
S35.401S	Unspecified injury of right renal artery, sequela
S35.402S	Unspecified injury of left renal artery, sequela

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Code	Description
S35.403S	Unspecified injury of unspecified renal artery, sequela
S35.404S	Unspecified injury of right renal vein, sequela
S35.405S	Unspecified injury of left renal vein, sequela
S35.406S	Unspecified injury of unspecified renal vein, sequela
S35.411S	Laceration of right renal artery, sequela
S35.412S	Laceration of left renal artery, sequela
S35.413S	Laceration of unspecified renal artery, sequela
S35.414S	Laceration of right renal vein, sequela
S35.415S	Laceration of left renal vein, sequela
S35.416S	Laceration of unspecified renal vein, sequela
S35.491S	Other specified injury of right renal artery, sequela
S35.492S	Other specified injury of left renal artery, sequela
S35.493S	Other specified injury of unspecified renal artery, sequela
S35.494S	Other specified injury of right renal vein, sequela
S35.495S	Other specified injury of left renal vein, sequela
S35.496S	Other specified injury of unspecified renal vein, sequela
S35.50XS	Injury of unspecified iliac blood vessel(s), sequela
S35.511S	Injury of right iliac artery, sequela
S35.512S	Injury of left iliac artery, sequela
S35.513S	Injury of unspecified iliac artery, sequela
S35.514S	Injury of right iliac vein, sequela
S35.515S	Injury of left iliac vein, sequela
S35.516S	Injury of unspecified iliac vein, sequela
S35.531S	Injury of right uterine artery, sequela
S35.532S	Injury of left uterine artery, sequela
S35.533S	Injury of unspecified uterine artery, sequela
S35.534S	Injury of right uterine vein, sequela
S35.535S	Injury of left uterine vein, sequela
S35.536S	Injury of unspecified uterine vein, sequela
S35.59XS	Injury of other iliac blood vessels, sequela



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Code	Description
S35.8X1S	Laceration of other blood vessels at abdomen, lower back and pelvis level, sequela
S35.8X8S	Other specified injury of other blood vessels at abdomen, lower back and pelvis level, sequela
S35.8X9S	Unspecified injury of other blood vessels at abdomen, lower back and pelvis level, sequela
S35.90XS	Unspecified injury of unspecified blood vessel at abdomen, lower back and pelvis level, sequela
S35.91XS	Laceration of unspecified blood vessel at abdomen, lower back and pelvis level, sequela
S35.99XS	Other specified injury of unspecified blood vessel at abdomen, lower back and pelvis level, sequela
S36.00XS	Unspecified injury of spleen, sequela
S36.020S	Minor contusion of spleen, sequela
S36.021S	Major contusion of spleen, sequela
S36.029S	Unspecified contusion of spleen, sequela
S36.030S	Superficial (capsular) laceration of spleen, sequela
S36.031S	Moderate laceration of spleen, sequela
S36.032S	Major laceration of spleen, sequela
S36.039S	Unspecified laceration of spleen, sequela
S36.09XS	Other injury of spleen, sequela
S36.112S	Contusion of liver, sequela
S36.113S	Laceration of liver, unspecified degree, sequela
S36.114S	Minor laceration of liver, sequela
S36.115S	Moderate laceration of liver, sequela
S36.116S	Major laceration of liver, sequela
S36.118S	Other injury of liver, sequela
S36.119S	Unspecified injury of liver, sequela
S36.122S	Contusion of gallbladder, sequela
S36.123S	Laceration of gallbladder, sequela
S36.128S	Other injury of gallbladder, sequela
S36.129S	Unspecified injury of gallbladder, sequela
S36.13XS	Injury of bile duct, sequela
S36.200S	Unspecified injury of head of pancreas, sequela



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Code	Description
S36.201S	Unspecified injury of body of pancreas, sequela
S36.202S	Unspecified injury of tail of pancreas, sequela
S36.209S	Unspecified injury of unspecified part of pancreas, sequela
S36.220S	Contusion of head of pancreas, sequela
S36.221S	Contusion of body of pancreas, sequela
S36.222S	Contusion of tail of pancreas, sequela
S36.229S	Contusion of unspecified part of pancreas, sequela
S36.230S	Laceration of head of pancreas, unspecified degree, sequela
S36.231S	Laceration of body of pancreas, unspecified degree, sequela
S36.232S	Laceration of tail of pancreas, unspecified degree, sequela
S36.239S	Laceration of unspecified part of pancreas, unspecified degree, sequela
S36.240S	Minor laceration of head of pancreas, sequela
S36.241S	Minor laceration of body of pancreas, sequela
S36.242S	Minor laceration of tail of pancreas, sequela
S36.249S	Minor laceration of unspecified part of pancreas, sequela
S36.250S	Moderate laceration of head of pancreas, sequela
S36.251S	Moderate laceration of body of pancreas, sequela
S36.252S	Moderate laceration of tail of pancreas, sequela
S36.259S	Moderate laceration of unspecified part of pancreas, sequela
S36.260S	Major laceration of head of pancreas, sequela
S36.261S	Major laceration of body of pancreas, sequela
S36.262S	Major laceration of tail of pancreas, sequela
S36.269S	Major laceration of unspecified part of pancreas, sequela
S36.290S	Other injury of head of pancreas, sequela
S36.291S	Other injury of body of pancreas, sequela
S36.292S	Other injury of tail of pancreas, sequela
S36.299S	Other injury of unspecified part of pancreas, sequela
S36.30XS	Unspecified injury of stomach, sequela
S36.32XS	Contusion of stomach, sequela
S36.33XS	Laceration of stomach, sequela



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Code	Description
S36.39XS	Other injury of stomach, sequela
S36.400S	Unspecified injury of duodenum, sequela
S36.408S	Unspecified injury of other part of small intestine, sequela
S36.409S	Unspecified injury of unspecified part of small intestine, sequela
S36.410S	Primary blast injury of duodenum, sequela
S36.418S	Primary blast injury of other part of small intestine, sequela
S36.419S	Primary blast injury of unspecified part of small intestine, sequela
S36.420S	Contusion of duodenum, sequela
S36.428S	Contusion of other part of small intestine, sequela
S36.429S	Contusion of unspecified part of small intestine, sequela
S36.430S	Laceration of duodenum, sequela
S36.438S	Laceration of other part of small intestine, sequela
S36.439S	Laceration of unspecified part of small intestine, sequela
S36.490S	Other injury of duodenum, sequela
S36.498S	Other injury of other part of small intestine, sequela
S36.499S	Other injury of unspecified part of small intestine, sequela
S36.500S	Unspecified injury of ascending [right] colon, sequela
S36.501S	Unspecified injury of transverse colon, sequela
S36.502S	Unspecified injury of descending [left] colon, sequela
S36.503S	Unspecified injury of sigmoid colon, sequela
S36.508S	Unspecified injury of other part of colon, sequela
S36.509S	Unspecified injury of unspecified part of colon, sequela
S36.510S	Primary blast injury of ascending [right] colon, sequela
S36.511S	Primary blast injury of transverse colon, sequela
S36.512S	Primary blast injury of descending [left] colon, sequela
S36.513S	Primary blast injury of sigmoid colon, sequela
S36.518S	Primary blast injury of other part of colon, sequela
S36.519S	Primary blast injury of unspecified part of colon, sequela
S36.520S	Contusion of ascending [right] colon, sequela
S36.521S	Contusion of transverse colon, sequela



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Code	Description
S36.522S	Contusion of descending [left] colon, sequela
S36.523S	Contusion of sigmoid colon, sequela
S36.528S	Contusion of other part of colon, sequela
S36.529S	Contusion of unspecified part of colon, sequela
S36.530S	Laceration of ascending [right] colon, sequela
S36.531S	Laceration of transverse colon, sequela
S36.532S	Laceration of descending [left] colon, sequela
S36.533S	Laceration of sigmoid colon, sequela
S36.538S	Laceration of other part of colon, sequela
S36.539S	Laceration of unspecified part of colon, sequela
S36.590S	Other injury of ascending [right] colon, sequela
S36.591S	Other injury of transverse colon, sequela
S36.592S	Other injury of descending [left] colon, sequela
S36.593S	Other injury of sigmoid colon, sequela
S36.598S	Other injury of other part of colon, sequela
S36.599S	Other injury of unspecified part of colon, sequela
S36.60XS	Unspecified injury of rectum, sequela
S36.61XS	Primary blast injury of rectum, sequela
S36.62XS	Contusion of rectum, sequela
S36.63XS	Laceration of rectum, sequela
S36.69XS	Other injury of rectum, sequela
S36.81XS	Injury of peritoneum, sequela
S36.892S	Contusion of other intra-abdominal organs, sequela
S36.893S	Laceration of other intra-abdominal organs, sequela
S36.898S	Other injury of other intra-abdominal organs, sequela
S36.899S	Unspecified injury of other intra-abdominal organs, sequela
S36.90XS	Unspecified injury of unspecified intra-abdominal organ, sequela
S36.92XS	Contusion of unspecified intra-abdominal organ, sequela
S36.93XS	Laceration of unspecified intra-abdominal organ, sequela
S36.99XS	Other injury of unspecified intra-abdominal organ, sequela

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Code	Description
S37.001S	Unspecified injury of right kidney, sequela
S37.002S	Unspecified injury of left kidney, sequela
S37.009S	Unspecified injury of unspecified kidney, sequela
S37.011S	Minor contusion of right kidney, sequela
S37.012S	Minor contusion of left kidney, sequela
S37.019S	Minor contusion of unspecified kidney, sequela
S37.021S	Major contusion of right kidney, sequela
S37.022S	Major contusion of left kidney, sequela
S37.029S	Major contusion of unspecified kidney, sequela
S37.031S	Laceration of right kidney, unspecified degree, sequela
S37.032S	Laceration of left kidney, unspecified degree, sequela
S37.039S	Laceration of unspecified kidney, unspecified degree, sequela
S37.041S	Minor laceration of right kidney, sequela
S37.042S	Minor laceration of left kidney, sequela
S37.049S	Minor laceration of unspecified kidney, sequela
S37.051S	Moderate laceration of right kidney, sequela
S37.052S	Moderate laceration of left kidney, sequela
S37.059S	Moderate laceration of unspecified kidney, sequela
S37.061S	Major laceration of right kidney, sequela
S37.062S	Major laceration of left kidney, sequela
S37.069S	Major laceration of unspecified kidney, sequela
S37.091S	Other injury of right kidney, sequela
S37.092S	Other injury of left kidney, sequela
S37.099S	Other injury of unspecified kidney, sequela
S37.10XS	Unspecified injury of ureter, sequela
S37.12XS	Contusion of ureter, sequela
S37.13XS	Laceration of ureter, sequela
S37.19XS	Other injury of ureter, sequela
S37.20XS	Unspecified injury of bladder, sequela
S37.22XS	Contusion of bladder, sequela



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Code	Description
S37.23XS	Laceration of bladder, sequela
S37.29XS	Other injury of bladder, sequela
S37.30XS	Unspecified injury of urethra, sequela
S37.32XS	Contusion of urethra, sequela
S37.33XS	Laceration of urethra, sequela
S37.39XS	Other injury of urethra, sequela
S37.401S	Unspecified injury of ovary, unilateral, sequela
S37.402S	Unspecified injury of ovary, bilateral, sequela
S37.409S	Unspecified injury of ovary, unspecified, sequela
S37.421S	Contusion of ovary, unilateral, sequela
S37.422S	Contusion of ovary, bilateral, sequela
S37.429S	Contusion of ovary, unspecified, sequela
S37.431S	Laceration of ovary, unilateral, sequela
S37.432S	Laceration of ovary, bilateral, sequela
S37.439S	Laceration of ovary, unspecified, sequela
S37.491S	Other injury of ovary, unilateral, sequela
S37.492S	Other injury of ovary, bilateral, sequela
S37.499S	Other injury of ovary, unspecified, sequela
S37.501S	Unspecified injury of fallopian tube, unilateral, sequela
S37.502S	Unspecified injury of fallopian tube, bilateral, sequela
S37.509S	Unspecified injury of fallopian tube, unspecified, sequela
S37.511S	Primary blast injury of fallopian tube, unilateral, sequela
S37.512S	Primary blast injury of fallopian tube, bilateral, sequela
S37.519S	Primary blast injury of fallopian tube, unspecified, sequela
S37.521S	Contusion of fallopian tube, unilateral, sequela
S37.522S	Contusion of fallopian tube, bilateral, sequela
S37.529S	Contusion of fallopian tube, unspecified, sequela
S37.531S	Laceration of fallopian tube, unilateral, sequela
S37.532S	Laceration of fallopian tube, bilateral, sequela
S37.539S	Laceration of fallopian tube, unspecified, sequela



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S37.591S	Other injury of fallopian tube, unilateral, sequela
S37.592S	Other injury of fallopian tube, bilateral, sequela
S37.599S	Other injury of fallopian tube, unspecified, sequela
S37.60XS	Unspecified injury of uterus, sequela
S37.62XS	Contusion of uterus, sequela
S37.63XS	Laceration of uterus, sequela
S37.69XS	Other injury of uterus, sequela
S37.812S	Contusion of adrenal gland, sequela
S37.813S	Laceration of adrenal gland, sequela
S37.818S	Other injury of adrenal gland, sequela
S37.819S	Unspecified injury of adrenal gland, sequela
S37.822S	Contusion of prostate, sequela
S37.823S	Laceration of prostate, sequela
S37.828S	Other injury of prostate, sequela
S37.829S	Unspecified injury of prostate, sequela
S37.892S	Contusion of other urinary and pelvic organ, sequela
S37.893S	Laceration of other urinary and pelvic organ, sequela
S37.898S	Other injury of other urinary and pelvic organ, sequela
S37.899S	Unspecified injury of other urinary and pelvic organ, sequela
S37.90XS	Unspecified injury of unspecified urinary and pelvic organ, sequela
S37.92XS	Contusion of unspecified urinary and pelvic organ, sequela
S37.93XS	Laceration of unspecified urinary and pelvic organ, sequela
S37.99XS	Other injury of unspecified urinary and pelvic organ, sequela
S38.001S	Crushing injury of unspecified external genital organs, male, sequela
S38.002S	Crushing injury of unspecified external genital organs, female, sequela
S38.01XS	Crushing injury of penis, sequela
S38.02XS	Crushing injury of scrotum and testis, sequela
S38.03XS	Crushing injury of vulva, sequela
S38.1XXS	Crushing injury of abdomen, lower back, and pelvis, sequela
S38.211S	Complete traumatic amputation of female external genital organs, sequela



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Code	Description
S38.212S	Partial traumatic amputation of female external genital organs, sequela
S38.221S	Complete traumatic amputation of penis, sequela
S38.222S	Partial traumatic amputation of penis, sequela
S38.231S	Complete traumatic amputation of scrotum and testis, sequela
S38.232S	Partial traumatic amputation of scrotum and testis, sequela
S38.3XXS	Transection (partial) of abdomen, sequela
S39.001S	Unspecified injury of muscle, fascia and tendon of abdomen, sequela
S39.002S	Unspecified injury of muscle, fascia and tendon of lower back, sequela
S39.003S	Unspecified injury of muscle, fascia and tendon of pelvis, sequela
S39.011A	Strain of muscle, fascia and tendon of abdomen, initial encounter
S39.011S	Strain of muscle, fascia and tendon of abdomen, sequela
S39.012A	Strain of muscle, fascia and tendon of lower back, initial encounter
S39.012S	Strain of muscle, fascia and tendon of lower back, sequela
S39.013A	Strain of muscle, fascia and tendon of pelvis, initial encounter
S39.013S	Strain of muscle, fascia and tendon of pelvis, sequela
S39.021S	Laceration of muscle, fascia and tendon of abdomen, sequela
S39.022S	Laceration of muscle, fascia and tendon of lower back, sequela
S39.023S	Laceration of muscle, fascia and tendon of pelvis, sequela
S39.091S	Other injury of muscle, fascia and tendon of abdomen, sequela
S39.092S	Other injury of muscle, fascia and tendon of lower back, sequela
S39.093S	Other injury of muscle, fascia and tendon of pelvis, sequela
S39.81XS	Other specified injuries of abdomen, sequela
S39.82XS	Other specified injuries of lower back, sequela
S39.83XS	Other specified injuries of pelvis, sequela
S39.840S	Fracture of corpus cavernosum penis, sequela
S39.848S	Other specified injuries of external genitals, sequela
S39.91XS	Unspecified injury of abdomen, sequela
S39.92XS	Unspecified injury of lower back, sequela
S39.93XS	Unspecified injury of pelvis, sequela
S39.94XS	Unspecified injury of external genitals, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S40.011S	Contusion of right shoulder, sequela
S40.012S	Contusion of left shoulder, sequela
S40.019S	Contusion of unspecified shoulder, sequela
S40.021S	Contusion of right upper arm, sequela
S40.022S	Contusion of left upper arm, sequela
S40.029S	Contusion of unspecified upper arm, sequela
S40.211A	Abrasion of right shoulder, initial encounter
S40.211S	Abrasion of right shoulder, sequela
S40.212A	Abrasion of left shoulder, initial encounter
S40.212S	Abrasion of left shoulder, sequela
S40.219A	Abrasion of unspecified shoulder, initial encounter
S40.219S	Abrasion of unspecified shoulder, sequela
S40.221A	Blister (nonthermal) of right shoulder, initial encounter
S40.221S	Blister (nonthermal) of right shoulder, sequela
S40.222A	Blister (nonthermal) of left shoulder, initial encounter
S40.222S	Blister (nonthermal) of left shoulder, sequela
S40.229A	Blister (nonthermal) of unspecified shoulder, initial encounter
S40.229S	Blister (nonthermal) of unspecified shoulder, sequela
S40.241A	External constriction of right shoulder, initial encounter
S40.241S	External constriction of right shoulder, sequela
S40.242A	External constriction of left shoulder, initial encounter
S40.242S	External constriction of left shoulder, sequela
S40.249A	External constriction of unspecified shoulder, initial encounter
S40.249S	External constriction of unspecified shoulder, sequela
S40.251A	Superficial foreign body of right shoulder, initial encounter
S40.251S	Superficial foreign body of right shoulder, sequela
S40.252A	Superficial foreign body of left shoulder, initial encounter
S40.252S	Superficial foreign body of left shoulder, sequela
S40.259A	Superficial foreign body of unspecified shoulder, initial encounter
S40.259S	Superficial foreign body of unspecified shoulder, sequela



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Code	Description
S40.261A	Insect bite (nonvenomous) of right shoulder, initial encounter
S40.261S	Insect bite (nonvenomous) of right shoulder, sequela
S40.262A	Insect bite (nonvenomous) of left shoulder, initial encounter
S40.262S	Insect bite (nonvenomous) of left shoulder, sequela
S40.269A	Insect bite (nonvenomous) of unspecified shoulder, initial encounter
S40.269S	Insect bite (nonvenomous) of unspecified shoulder, sequela
S40.271A	Other superficial bite of right shoulder, initial encounter
S40.271S	Other superficial bite of right shoulder, sequela
S40.272A	Other superficial bite of left shoulder, initial encounter
S40.272S	Other superficial bite of left shoulder, sequela
S40.279A	Other superficial bite of unspecified shoulder, initial encounter
S40.279S	Other superficial bite of unspecified shoulder, sequela
S40.811A	Abrasion of right upper arm, initial encounter
S40.811S	Abrasion of right upper arm, sequela
S40.812A	Abrasion of left upper arm, initial encounter
S40.812S	Abrasion of left upper arm, sequela
S40.819A	Abrasion of unspecified upper arm, initial encounter
S40.819S	Abrasion of unspecified upper arm, sequela
S40.821A	Blister (nonthermal) of right upper arm, initial encounter
S40.821S	Blister (nonthermal) of right upper arm, sequela
S40.822A	Blister (nonthermal) of left upper arm, initial encounter
S40.822S	Blister (nonthermal) of left upper arm, sequela
S40.829A	Blister (nonthermal) of unspecified upper arm, initial encounter
S40.829S	Blister (nonthermal) of unspecified upper arm, sequela
S40.841A	External constriction of right upper arm, initial encounter
S40.841S	External constriction of right upper arm, sequela
S40.842A	External constriction of left upper arm, initial encounter
S40.842S	External constriction of left upper arm, sequela
S40.849A	External constriction of unspecified upper arm, initial encounter
S40.849S	External constriction of unspecified upper arm, sequela

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Code	Description
S40.851A	Superficial foreign body of right upper arm, initial encounter
S40.851S	Superficial foreign body of right upper arm, sequela
S40.852A	Superficial foreign body of left upper arm, initial encounter
S40.852S	Superficial foreign body of left upper arm, sequela
S40.859A	Superficial foreign body of unspecified upper arm, initial encounter
S40.859S	Superficial foreign body of unspecified upper arm, sequela
S40.861A	Insect bite (nonvenomous) of right upper arm, initial encounter
S40.861S	Insect bite (nonvenomous) of right upper arm, sequela
S40.862A	Insect bite (nonvenomous) of left upper arm, initial encounter
S40.862S	Insect bite (nonvenomous) of left upper arm, sequela
S40.869A	Insect bite (nonvenomous) of unspecified upper arm, initial encounter
S40.869S	Insect bite (nonvenomous) of unspecified upper arm, sequela
S40.871A	Other superficial bite of right upper arm, initial encounter
S40.871S	Other superficial bite of right upper arm, sequela
S40.872A	Other superficial bite of left upper arm, initial encounter
S40.872S	Other superficial bite of left upper arm, sequela
S40.879A	Other superficial bite of unspecified upper arm, initial encounter
S40.879S	Other superficial bite of unspecified upper arm, sequela
S40.911A	Unspecified superficial injury of right shoulder, initial encounter
S40.911S	Unspecified superficial injury of right shoulder, sequela
S40.912A	Unspecified superficial injury of left shoulder, initial encounter
S40.912S	Unspecified superficial injury of left shoulder, sequela
S40.919A	Unspecified superficial injury of unspecified shoulder, initial encounter
S40.919S	Unspecified superficial injury of unspecified shoulder, sequela
S40.921A	Unspecified superficial injury of right upper arm, initial encounter
S40.921S	Unspecified superficial injury of right upper arm, sequela
S40.922A	Unspecified superficial injury of left upper arm, initial encounter
S40.922S	Unspecified superficial injury of left upper arm, sequela
S40.929A	Unspecified superficial injury of unspecified upper arm, initial encounter
S40.929S	Unspecified superficial injury of unspecified upper arm, sequela



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Code	Description
S41.001S	Unspecified open wound of right shoulder, sequela
S41.002S	Unspecified open wound of left shoulder, sequela
S41.009A	Unspecified open wound of unspecified shoulder, initial encounter
S41.009S	Unspecified open wound of unspecified shoulder, sequela
S41.011S	Laceration without foreign body of right shoulder, sequela
S41.012S	Laceration without foreign body of left shoulder, sequela
S41.019S	Laceration without foreign body of unspecified shoulder, sequela
S41.021S	Laceration with foreign body of right shoulder, sequela
S41.022S	Laceration with foreign body of left shoulder, sequela
S41.029S	Laceration with foreign body of unspecified shoulder, sequela
S41.031S	Puncture wound without foreign body of right shoulder, sequela
S41.032S	Puncture wound without foreign body of left shoulder, sequela
S41.039S	Puncture wound without foreign body of unspecified shoulder, sequela
S41.041S	Puncture wound with foreign body of right shoulder, sequela
S41.042S	Puncture wound with foreign body of left shoulder, sequela
S41.049S	Puncture wound with foreign body of unspecified shoulder, sequela
S41.051S	Open bite of right shoulder, sequela
S41.052S	Open bite of left shoulder, sequela
S41.059S	Open bite of unspecified shoulder, sequela
S41.101S	Unspecified open wound of right upper arm, sequela
S41.102S	Unspecified open wound of left upper arm, sequela
S41.109A	Unspecified open wound of unspecified upper arm, initial encounter
S41.109S	Unspecified open wound of unspecified upper arm, sequela
S41.111S	Laceration without foreign body of right upper arm, sequela
S41.112S	Laceration without foreign body of left upper arm, sequela
S41.119S	Laceration without foreign body of unspecified upper arm, sequela
S41.121S	Laceration with foreign body of right upper arm, sequela
S41.122S	Laceration with foreign body of left upper arm, sequela
S41.129S	Laceration with foreign body of unspecified upper arm, sequela
S41.131S	Puncture wound without foreign body of right upper arm, sequela



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Code	Description
S41.132S	Puncture wound without foreign body of left upper arm, sequela
S41.139S	Puncture wound without foreign body of unspecified upper arm, sequela
S41.141S	Puncture wound with foreign body of right upper arm, sequela
S41.142S	Puncture wound with foreign body of left upper arm, sequela
S41.149S	Puncture wound with foreign body of unspecified upper arm, sequela
S41.151S	Open bite of right upper arm, sequela
S41.152S	Open bite of left upper arm, sequela
S41.159S	Open bite of unspecified upper arm, sequela
S42.001D	Fracture of unspecified part of right clavicle, subsequent encounter for fracture with routine healing
S42.001G	Fracture of unspecified part of right clavicle, subsequent encounter for fracture with delayed healing
S42.001S	Fracture of unspecified part of right clavicle, sequela
S42.002D	Fracture of unspecified part of left clavicle, subsequent encounter for fracture with routine healing
S42.002G	Fracture of unspecified part of left clavicle, subsequent encounter for fracture with delayed healing
S42.002S	Fracture of unspecified part of left clavicle, sequela
S42.009D	Fracture of unspecified part of unspecified clavicle, subsequent encounter for fracture with routine healing
S42.009G	Fracture of unspecified part of unspecified clavicle, subsequent encounter for fracture with delayed healing
S42.009S	Fracture of unspecified part of unspecified clavicle, sequela
S42.011D	Anterior displaced fracture of sternal end of right clavicle, subsequent encounter for fracture with routine healing
S42.011G	Anterior displaced fracture of sternal end of right clavicle, subsequent encounter for fracture with delayed healing
S42.011S	Anterior displaced fracture of sternal end of right clavicle, sequela
S42.012D	Anterior displaced fracture of sternal end of left clavicle, subsequent encounter for fracture with routine healing
S42.012G	Anterior displaced fracture of sternal end of left clavicle, subsequent encounter for fracture with delayed healing
S42.012S	Anterior displaced fracture of sternal end of left clavicle, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.013D	Anterior displaced fracture of sternal end of unspecified clavicle, subsequent encounter for fracture with routine healing
S42.013G	Anterior displaced fracture of sternal end of unspecified clavicle, subsequent encounter for fracture with delayed healing
S42.013S	Anterior displaced fracture of sternal end of unspecified clavicle, sequela
S42.014D	Posterior displaced fracture of sternal end of right clavicle, subsequent encounter for fracture with routine healing
S42.014G	Posterior displaced fracture of sternal end of right clavicle, subsequent encounter for fracture with delayed healing
S42.014S	Posterior displaced fracture of sternal end of right clavicle, sequela
S42.015D	Posterior displaced fracture of sternal end of left clavicle, subsequent encounter for fracture with routine healing
S42.015G	Posterior displaced fracture of sternal end of left clavicle, subsequent encounter for fracture with delayed healing
S42.015S	Posterior displaced fracture of sternal end of left clavicle, sequela
S42.016D	Posterior displaced fracture of sternal end of unspecified clavicle, subsequent encounter for fracture with routine healing
S42.016G	Posterior displaced fracture of sternal end of unspecified clavicle, subsequent encounter for fracture with delayed healing
S42.016S	Posterior displaced fracture of sternal end of unspecified clavicle, sequela
S42.017D	Nondisplaced fracture of sternal end of right clavicle, subsequent encounter for fracture with routine healing
S42.017G	Nondisplaced fracture of sternal end of right clavicle, subsequent encounter for fracture with delayed healing
S42.017S	Nondisplaced fracture of sternal end of right clavicle, sequela
S42.018D	Nondisplaced fracture of sternal end of left clavicle, subsequent encounter for fracture with routine healing
S42.018G	Nondisplaced fracture of sternal end of left clavicle, subsequent encounter for fracture with delayed healing
S42.018S	Nondisplaced fracture of sternal end of left clavicle, sequela
S42.019D	Nondisplaced fracture of sternal end of unspecified clavicle, subsequent encounter for fracture with routine healing
S42.019G	Nondisplaced fracture of sternal end of unspecified clavicle, subsequent encounter for fracture with delayed healing
S42.019S	Nondisplaced fracture of sternal end of unspecified clavicle, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.021D	Displaced fracture of shaft of right clavicle, subsequent encounter for fracture with routine healing
S42.021G	Displaced fracture of shaft of right clavicle, subsequent encounter for fracture with delayed healing
S42.021S	Displaced fracture of shaft of right clavicle, sequela
S42.022D	Displaced fracture of shaft of left clavicle, subsequent encounter for fracture with routine healing
S42.022G	Displaced fracture of shaft of left clavicle, subsequent encounter for fracture with delayed healing
S42.022S	Displaced fracture of shaft of left clavicle, sequela
S42.023D	Displaced fracture of shaft of unspecified clavicle, subsequent encounter for fracture with routine healing
S42.023G	Displaced fracture of shaft of unspecified clavicle, subsequent encounter for fracture with delayed healing
S42.023S	Displaced fracture of shaft of unspecified clavicle, sequela
S42.024D	Nondisplaced fracture of shaft of right clavicle, subsequent encounter for fracture with routine healing
S42.024G	Nondisplaced fracture of shaft of right clavicle, subsequent encounter for fracture with delayed healing
S42.024S	Nondisplaced fracture of shaft of right clavicle, sequela
S42.025D	Nondisplaced fracture of shaft of left clavicle, subsequent encounter for fracture with routine healing
S42.025G	Nondisplaced fracture of shaft of left clavicle, subsequent encounter for fracture with delayed healing
S42.025S	Nondisplaced fracture of shaft of left clavicle, sequela
S42.026D	Nondisplaced fracture of shaft of unspecified clavicle, subsequent encounter for fracture with routine healing
S42.026G	Nondisplaced fracture of shaft of unspecified clavicle, subsequent encounter for fracture with delayed healing
S42.026S	Nondisplaced fracture of shaft of unspecified clavicle, sequela
S42.031D	Displaced fracture of lateral end of right clavicle, subsequent encounter for fracture with routine healing
S42.031G	Displaced fracture of lateral end of right clavicle, subsequent encounter for fracture with delayed healing
S42.031S	Displaced fracture of lateral end of right clavicle, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.032D	Displaced fracture of lateral end of left clavicle, subsequent encounter for fracture with routine healing
S42.032G	Displaced fracture of lateral end of left clavicle, subsequent encounter for fracture with delayed healing
S42.032S	Displaced fracture of lateral end of left clavicle, sequela
S42.033D	Displaced fracture of lateral end of unspecified clavicle, subsequent encounter for fracture with routine healing
S42.033G	Displaced fracture of lateral end of unspecified clavicle, subsequent encounter for fracture with delayed healing
S42.033S	Displaced fracture of lateral end of unspecified clavicle, sequela
S42.034D	Nondisplaced fracture of lateral end of right clavicle, subsequent encounter for fracture with routine healing
S42.034G	Nondisplaced fracture of lateral end of right clavicle, subsequent encounter for fracture with delayed healing
S42.034S	Nondisplaced fracture of lateral end of right clavicle, sequela
S42.035D	Nondisplaced fracture of lateral end of left clavicle, subsequent encounter for fracture with routine healing
S42.035G	Nondisplaced fracture of lateral end of left clavicle, subsequent encounter for fracture with delayed healing
S42.035S	Nondisplaced fracture of lateral end of left clavicle, sequela
S42.036D	Nondisplaced fracture of lateral end of unspecified clavicle, subsequent encounter for fracture with routine healing
S42.036G	Nondisplaced fracture of lateral end of unspecified clavicle, subsequent encounter for fracture with delayed healing
S42.036S	Nondisplaced fracture of lateral end of unspecified clavicle, sequela
S42.101D	Fracture of unspecified part of scapula, right shoulder, subsequent encounter for fracture with routine healing
S42.101G	Fracture of unspecified part of scapula, right shoulder, subsequent encounter for fracture with delayed healing
S42.101S	Fracture of unspecified part of scapula, right shoulder, sequela
S42.102D	Fracture of unspecified part of scapula, left shoulder, subsequent encounter for fracture with routine healing
S42.102G	Fracture of unspecified part of scapula, left shoulder, subsequent encounter for fracture with delayed healing
S42.102S	Fracture of unspecified part of scapula, left shoulder, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.109D	Fracture of unspecified part of scapula, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.109G	Fracture of unspecified part of scapula, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.109S	Fracture of unspecified part of scapula, unspecified shoulder, sequela
S42.111D	Displaced fracture of body of scapula, right shoulder, subsequent encounter for fracture with routine healing
S42.111G	Displaced fracture of body of scapula, right shoulder, subsequent encounter for fracture with delayed healing
S42.111S	Displaced fracture of body of scapula, right shoulder, sequela
S42.112D	Displaced fracture of body of scapula, left shoulder, subsequent encounter for fracture with routine healing
S42.112G	Displaced fracture of body of scapula, left shoulder, subsequent encounter for fracture with delayed healing
S42.112S	Displaced fracture of body of scapula, left shoulder, sequela
S42.113D	Displaced fracture of body of scapula, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.113G	Displaced fracture of body of scapula, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.113S	Displaced fracture of body of scapula, unspecified shoulder, sequela
S42.114D	Nondisplaced fracture of body of scapula, right shoulder, subsequent encounter for fracture with routine healing
S42.114G	Nondisplaced fracture of body of scapula, right shoulder, subsequent encounter for fracture with delayed healing
S42.114S	Nondisplaced fracture of body of scapula, right shoulder, sequela
S42.115D	Nondisplaced fracture of body of scapula, left shoulder, subsequent encounter for fracture with routine healing
S42.115G	Nondisplaced fracture of body of scapula, left shoulder, subsequent encounter for fracture with delayed healing
S42.115S	Nondisplaced fracture of body of scapula, left shoulder, sequela
S42.116D	Nondisplaced fracture of body of scapula, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.116G	Nondisplaced fracture of body of scapula, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.116S	Nondisplaced fracture of body of scapula, unspecified shoulder, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.121D	Displaced fracture of acromial process, right shoulder, subsequent encounter for fracture with routine healing
S42.121G	Displaced fracture of acromial process, right shoulder, subsequent encounter for fracture with delayed healing
S42.121S	Displaced fracture of acromial process, right shoulder, sequela
S42.122D	Displaced fracture of acromial process, left shoulder, subsequent encounter for fracture with routine healing
S42.122G	Displaced fracture of acromial process, left shoulder, subsequent encounter for fracture with delayed healing
S42.122S	Displaced fracture of acromial process, left shoulder, sequela
S42.123D	Displaced fracture of acromial process, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.123G	Displaced fracture of acromial process, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.123S	Displaced fracture of acromial process, unspecified shoulder, sequela
S42.124D	Nondisplaced fracture of acromial process, right shoulder, subsequent encounter for fracture with routine healing
S42.124G	Nondisplaced fracture of acromial process, right shoulder, subsequent encounter for fracture with delayed healing
S42.124S	Nondisplaced fracture of acromial process, right shoulder, sequela
S42.125D	Nondisplaced fracture of acromial process, left shoulder, subsequent encounter for fracture with routine healing
S42.125G	Nondisplaced fracture of acromial process, left shoulder, subsequent encounter for fracture with delayed healing
S42.125S	Nondisplaced fracture of acromial process, left shoulder, sequela
S42.126D	Nondisplaced fracture of acromial process, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.126G	Nondisplaced fracture of acromial process, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.126S	Nondisplaced fracture of acromial process, unspecified shoulder, sequela
S42.131D	Displaced fracture of coracoid process, right shoulder, subsequent encounter for fracture with routine healing
S42.131G	Displaced fracture of coracoid process, right shoulder, subsequent encounter for fracture with delayed healing
S42.131S	Displaced fracture of coracoid process, right shoulder, sequela

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Code	Description
S42.132D	Displaced fracture of coracoid process, left shoulder, subsequent encounter for fracture with routine healing
S42.132G	Displaced fracture of coracoid process, left shoulder, subsequent encounter for fracture with delayed healing
S42.132S	Displaced fracture of coracoid process, left shoulder, sequela
S42.133D	Displaced fracture of coracoid process, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.133G	Displaced fracture of coracoid process, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.133S	Displaced fracture of coracoid process, unspecified shoulder, sequela
S42.134D	Nondisplaced fracture of coracoid process, right shoulder, subsequent encounter for fracture with routine healing
S42.134G	Nondisplaced fracture of coracoid process, right shoulder, subsequent encounter for fracture with delayed healing
S42.134S	Nondisplaced fracture of coracoid process, right shoulder, sequela
S42.135D	Nondisplaced fracture of coracoid process, left shoulder, subsequent encounter for fracture with routine healing
S42.135G	Nondisplaced fracture of coracoid process, left shoulder, subsequent encounter for fracture with delayed healing
S42.135S	Nondisplaced fracture of coracoid process, left shoulder, sequela
S42.136D	Nondisplaced fracture of coracoid process, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.136G	Nondisplaced fracture of coracoid process, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.136S	Nondisplaced fracture of coracoid process, unspecified shoulder, sequela
S42.141D	Displaced fracture of glenoid cavity of scapula, right shoulder, subsequent encounter for fracture with routine healing
S42.141G	Displaced fracture of glenoid cavity of scapula, right shoulder, subsequent encounter for fracture with delayed healing
S42.141S	Displaced fracture of glenoid cavity of scapula, right shoulder, sequela
S42.142D	Displaced fracture of glenoid cavity of scapula, left shoulder, subsequent encounter for fracture with routine healing
S42.142G	Displaced fracture of glenoid cavity of scapula, left shoulder, subsequent encounter for fracture with delayed healing
S42.142S	Displaced fracture of glenoid cavity of scapula, left shoulder, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.143D	Displaced fracture of glenoid cavity of scapula, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.143G	Displaced fracture of glenoid cavity of scapula, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.143S	Displaced fracture of glenoid cavity of scapula, unspecified shoulder, sequela
S42.144D	Nondisplaced fracture of glenoid cavity of scapula, right shoulder, subsequent encounter for fracture with routine healing
S42.144G	Nondisplaced fracture of glenoid cavity of scapula, right shoulder, subsequent encounter for fracture with delayed healing
S42.144S	Nondisplaced fracture of glenoid cavity of scapula, right shoulder, sequela
S42.145D	Nondisplaced fracture of glenoid cavity of scapula, left shoulder, subsequent encounter for fracture with routine healing
S42.145G	Nondisplaced fracture of glenoid cavity of scapula, left shoulder, subsequent encounter for fracture with delayed healing
S42.145S	Nondisplaced fracture of glenoid cavity of scapula, left shoulder, sequela
S42.146D	Nondisplaced fracture of glenoid cavity of scapula, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.146G	Nondisplaced fracture of glenoid cavity of scapula, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.146S	Nondisplaced fracture of glenoid cavity of scapula, unspecified shoulder, sequela
S42.151D	Displaced fracture of neck of scapula, right shoulder, subsequent encounter for fracture with routine healing
S42.151G	Displaced fracture of neck of scapula, right shoulder, subsequent encounter for fracture with delayed healing
S42.151S	Displaced fracture of neck of scapula, right shoulder, sequela
S42.152D	Displaced fracture of neck of scapula, left shoulder, subsequent encounter for fracture with routine healing
S42.152G	Displaced fracture of neck of scapula, left shoulder, subsequent encounter for fracture with delayed healing
S42.152S	Displaced fracture of neck of scapula, left shoulder, sequela
S42.153D	Displaced fracture of neck of scapula, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.153G	Displaced fracture of neck of scapula, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.153S	Displaced fracture of neck of scapula, unspecified shoulder, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.154D	Nondisplaced fracture of neck of scapula, right shoulder, subsequent encounter for fracture with routine healing
S42.154G	Nondisplaced fracture of neck of scapula, right shoulder, subsequent encounter for fracture with delayed healing
S42.154S	Nondisplaced fracture of neck of scapula, right shoulder, sequela
S42.155D	Nondisplaced fracture of neck of scapula, left shoulder, subsequent encounter for fracture with routine healing
S42.155G	Nondisplaced fracture of neck of scapula, left shoulder, subsequent encounter for fracture with delayed healing
S42.155S	Nondisplaced fracture of neck of scapula, left shoulder, sequela
S42.156D	Nondisplaced fracture of neck of scapula, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.156G	Nondisplaced fracture of neck of scapula, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.156S	Nondisplaced fracture of neck of scapula, unspecified shoulder, sequela
S42.191D	Fracture of other part of scapula, right shoulder, subsequent encounter for fracture with routine healing
S42.191G	Fracture of other part of scapula, right shoulder, subsequent encounter for fracture with delayed healing
S42.191S	Fracture of other part of scapula, right shoulder, sequela
S42.192D	Fracture of other part of scapula, left shoulder, subsequent encounter for fracture with routine healing
S42.192G	Fracture of other part of scapula, left shoulder, subsequent encounter for fracture with delayed healing
S42.192S	Fracture of other part of scapula, left shoulder, sequela
S42.199D	Fracture of other part of scapula, unspecified shoulder, subsequent encounter for fracture with routine healing
S42.199G	Fracture of other part of scapula, unspecified shoulder, subsequent encounter for fracture with delayed healing
S42.199S	Fracture of other part of scapula, unspecified shoulder, sequela
S42.201D	Unspecified fracture of upper end of right humerus, subsequent encounter for fracture with routine healing
S42.201G	Unspecified fracture of upper end of right humerus, subsequent encounter for fracture with delayed healing
S42.201S	Unspecified fracture of upper end of right humerus, sequela

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***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.202D	Unspecified fracture of upper end of left humerus, subsequent encounter for fracture with routine healing
S42.202G	Unspecified fracture of upper end of left humerus, subsequent encounter for fracture with delayed healing
S42.202S	Unspecified fracture of upper end of left humerus, sequela
S42.209D	Unspecified fracture of upper end of unspecified humerus, subsequent encounter for fracture with routine healing
S42.209G	Unspecified fracture of upper end of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.209S	Unspecified fracture of upper end of unspecified humerus, sequela
S42.211D	Unspecified displaced fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing
S42.211G	Unspecified displaced fracture of surgical neck of right humerus, subsequent encounter for fracture with delayed healing
S42.211S	Unspecified displaced fracture of surgical neck of right humerus, sequela
S42.212D	Unspecified displaced fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing
S42.212G	Unspecified displaced fracture of surgical neck of left humerus, subsequent encounter for fracture with delayed healing
S42.212S	Unspecified displaced fracture of surgical neck of left humerus, sequela
S42.213D	Unspecified displaced fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with routine healing
S42.213G	Unspecified displaced fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.213S	Unspecified displaced fracture of surgical neck of unspecified humerus, sequela
S42.214D	Unspecified nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing
S42.214G	Unspecified nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with delayed healing
S42.214S	Unspecified nondisplaced fracture of surgical neck of right humerus, sequela
S42.215D	Unspecified nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing
S42.215G	Unspecified nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with delayed healing
S42.215S	Unspecified nondisplaced fracture of surgical neck of left humerus, sequela



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Code	Description
S42.216D	Unspecified nondisplaced fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with routine healing
S42.216G	Unspecified nondisplaced fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.216S	Unspecified nondisplaced fracture of surgical neck of unspecified humerus, sequela
S42.221D	2-part displaced fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing
S42.221G	2-part displaced fracture of surgical neck of right humerus, subsequent encounter for fracture with delayed healing
S42.221S	2-part displaced fracture of surgical neck of right humerus, sequela
S42.222D	2-part displaced fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing
S42.222G	2-part displaced fracture of surgical neck of left humerus, subsequent encounter for fracture with delayed healing
S42.222S	2-part displaced fracture of surgical neck of left humerus, sequela
S42.223D	2-part displaced fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with routine healing
S42.223G	2-part displaced fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.223S	2-part displaced fracture of surgical neck of unspecified humerus, sequela
S42.224D	2-part nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing
S42.224G	2-part nondisplaced fracture of surgical neck of right humerus, subsequent encounter for fracture with delayed healing
S42.224S	2-part nondisplaced fracture of surgical neck of right humerus, sequela
S42.225D	2-part nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing
S42.225G	2-part nondisplaced fracture of surgical neck of left humerus, subsequent encounter for fracture with delayed healing
S42.225S	2-part nondisplaced fracture of surgical neck of left humerus, sequela
S42.226D	2-part nondisplaced fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with routine healing
S42.226G	2-part nondisplaced fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.226S	2-part nondisplaced fracture of surgical neck of unspecified humerus, sequela



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Code	Description
S42.231D	3-part fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing
S42.231G	3-part fracture of surgical neck of right humerus, subsequent encounter for fracture with delayed healing
S42.231S	3-part fracture of surgical neck of right humerus, sequela
S42.232D	3-part fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing
S42.232G	3-part fracture of surgical neck of left humerus, subsequent encounter for fracture with delayed healing
S42.232S	3-part fracture of surgical neck of left humerus, sequela
S42.239D	3-part fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with routine healing
S42.239G	3-part fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.239S	3-part fracture of surgical neck of unspecified humerus, sequela
S42.241D	4-part fracture of surgical neck of right humerus, subsequent encounter for fracture with routine healing
S42.241G	4-part fracture of surgical neck of right humerus, subsequent encounter for fracture with delayed healing
S42.241S	4-part fracture of surgical neck of right humerus, sequela
S42.242D	4-part fracture of surgical neck of left humerus, subsequent encounter for fracture with routine healing
S42.242G	4-part fracture of surgical neck of left humerus, subsequent encounter for fracture with delayed healing
S42.242S	4-part fracture of surgical neck of left humerus, sequela
S42.249D	4-part fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with routine healing
S42.249G	4-part fracture of surgical neck of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.249S	4-part fracture of surgical neck of unspecified humerus, sequela
S42.251D	Displaced fracture of greater tuberosity of right humerus, subsequent encounter for fracture with routine healing
S42.251G	Displaced fracture of greater tuberosity of right humerus, subsequent encounter for fracture with delayed healing
S42.251S	Displaced fracture of greater tuberosity of right humerus, sequela

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Code	Description
S42.252D	Displaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with routine healing
S42.252G	Displaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with delayed healing
S42.252S	Displaced fracture of greater tuberosity of left humerus, sequela
S42.253D	Displaced fracture of greater tuberosity of unspecified humerus, subsequent encounter for fracture with routine healing
S42.253G	Displaced fracture of greater tuberosity of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.253S	Displaced fracture of greater tuberosity of unspecified humerus, sequela
S42.254D	Nondisplaced fracture of greater tuberosity of right humerus, subsequent encounter for fracture with routine healing
S42.254G	Nondisplaced fracture of greater tuberosity of right humerus, subsequent encounter for fracture with delayed healing
S42.254S	Nondisplaced fracture of greater tuberosity of right humerus, sequela
S42.255D	Nondisplaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with routine healing
S42.255G	Nondisplaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with delayed healing
S42.255S	Nondisplaced fracture of greater tuberosity of left humerus, sequela
S42.256D	Nondisplaced fracture of greater tuberosity of unspecified humerus, subsequent encounter for fracture with routine healing
S42.256G	Nondisplaced fracture of greater tuberosity of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.256S	Nondisplaced fracture of greater tuberosity of unspecified humerus, sequela
S42.261D	Displaced fracture of lesser tuberosity of right humerus, subsequent encounter for fracture with routine healing
S42.261G	Displaced fracture of lesser tuberosity of right humerus, subsequent encounter for fracture with delayed healing
S42.261S	Displaced fracture of lesser tuberosity of right humerus, sequela
S42.262D	Displaced fracture of lesser tuberosity of left humerus, subsequent encounter for fracture with routine healing
S42.262G	Displaced fracture of lesser tuberosity of left humerus, subsequent encounter for fracture with delayed healing
S42.262S	Displaced fracture of lesser tuberosity of left humerus, sequela



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Code	Description
S42.263D	Displaced fracture of lesser tuberosity of unspecified humerus, subsequent encounter for fracture with routine healing
S42.263G	Displaced fracture of lesser tuberosity of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.263S	Displaced fracture of lesser tuberosity of unspecified humerus, sequela
S42.264D	Nondisplaced fracture of lesser tuberosity of right humerus, subsequent encounter for fracture with routine healing
S42.264G	Nondisplaced fracture of lesser tuberosity of right humerus, subsequent encounter for fracture with delayed healing
S42.264S	Nondisplaced fracture of lesser tuberosity of right humerus, sequela
S42.265D	Nondisplaced fracture of lesser tuberosity of left humerus, subsequent encounter for fracture with routine healing
S42.265G	Nondisplaced fracture of lesser tuberosity of left humerus, subsequent encounter for fracture with delayed healing
S42.265S	Nondisplaced fracture of lesser tuberosity of left humerus, sequela
S42.266D	Nondisplaced fracture of lesser tuberosity of unspecified humerus, subsequent encounter for fracture with routine healing
S42.266G	Nondisplaced fracture of lesser tuberosity of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.266S	Nondisplaced fracture of lesser tuberosity of unspecified humerus, sequela
S42.271D	Torus fracture of upper end of right humerus, subsequent encounter for fracture with routine healing
S42.271G	Torus fracture of upper end of right humerus, subsequent encounter for fracture with delayed healing
S42.271S	Torus fracture of upper end of right humerus, sequela
S42.272D	Torus fracture of upper end of left humerus, subsequent encounter for fracture with routine healing
S42.272G	Torus fracture of upper end of left humerus, subsequent encounter for fracture with delayed healing
S42.272S	Torus fracture of upper end of left humerus, sequela
S42.279D	Torus fracture of upper end of unspecified humerus, subsequent encounter for fracture with routine healing
S42.279G	Torus fracture of upper end of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.279S	Torus fracture of upper end of unspecified humerus, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.291D	Other displaced fracture of upper end of right humerus, subsequent encounter for fracture with routine healing
S42.291G	Other displaced fracture of upper end of right humerus, subsequent encounter for fracture with delayed healing
S42.291S	Other displaced fracture of upper end of right humerus, sequela
S42.292D	Other displaced fracture of upper end of left humerus, subsequent encounter for fracture with routine healing
S42.292G	Other displaced fracture of upper end of left humerus, subsequent encounter for fracture with delayed healing
S42.292S	Other displaced fracture of upper end of left humerus, sequela
S42.293D	Other displaced fracture of upper end of unspecified humerus, subsequent encounter for fracture with routine healing
S42.293G	Other displaced fracture of upper end of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.293S	Other displaced fracture of upper end of unspecified humerus, sequela
S42.294D	Other nondisplaced fracture of upper end of right humerus, subsequent encounter for fracture with routine healing
S42.294G	Other nondisplaced fracture of upper end of right humerus, subsequent encounter for fracture with delayed healing
S42.294S	Other nondisplaced fracture of upper end of right humerus, sequela
S42.295D	Other nondisplaced fracture of upper end of left humerus, subsequent encounter for fracture with routine healing
S42.295G	Other nondisplaced fracture of upper end of left humerus, subsequent encounter for fracture with delayed healing
S42.295S	Other nondisplaced fracture of upper end of left humerus, sequela
S42.296D	Other nondisplaced fracture of upper end of unspecified humerus, subsequent encounter for fracture with routine healing
S42.296G	Other nondisplaced fracture of upper end of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.296S	Other nondisplaced fracture of upper end of unspecified humerus, sequela
S42.301D	Unspecified fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.301G	Unspecified fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.301S	Unspecified fracture of shaft of humerus, right arm, sequela



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Code	Description
S42.302D	Unspecified fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.302G	Unspecified fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.302S	Unspecified fracture of shaft of humerus, left arm, sequela
S42.309D	Unspecified fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.309G	Unspecified fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.309S	Unspecified fracture of shaft of humerus, unspecified arm, sequela
S42.311D	Greenstick fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.311G	Greenstick fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.311S	Greenstick fracture of shaft of humerus, right arm, sequela
S42.312D	Greenstick fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.312G	Greenstick fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.312S	Greenstick fracture of shaft of humerus, left arm, sequela
S42.319D	Greenstick fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.319G	Greenstick fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.319S	Greenstick fracture of shaft of humerus, unspecified arm, sequela
S42.321D	Displaced transverse fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.321G	Displaced transverse fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.321S	Displaced transverse fracture of shaft of humerus, right arm, sequela
S42.322D	Displaced transverse fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.322G	Displaced transverse fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.322S	Displaced transverse fracture of shaft of humerus, left arm, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.323D	Displaced transverse fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.323G	Displaced transverse fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.323S	Displaced transverse fracture of shaft of humerus, unspecified arm, sequela
S42.324D	Nondisplaced transverse fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.324G	Nondisplaced transverse fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.324S	Nondisplaced transverse fracture of shaft of humerus, right arm, sequela
S42.325D	Nondisplaced transverse fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.325G	Nondisplaced transverse fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.325S	Nondisplaced transverse fracture of shaft of humerus, left arm, sequela
S42.326D	Nondisplaced transverse fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.326G	Nondisplaced transverse fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.326S	Nondisplaced transverse fracture of shaft of humerus, unspecified arm, sequela
S42.331D	Displaced oblique fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.331G	Displaced oblique fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.331S	Displaced oblique fracture of shaft of humerus, right arm, sequela
S42.332D	Displaced oblique fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.332G	Displaced oblique fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.332S	Displaced oblique fracture of shaft of humerus, left arm, sequela
S42.333D	Displaced oblique fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.333G	Displaced oblique fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.333S	Displaced oblique fracture of shaft of humerus, unspecified arm, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.334D	Nondisplaced oblique fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.334G	Nondisplaced oblique fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.334S	Nondisplaced oblique fracture of shaft of humerus, right arm, sequela
S42.335D	Nondisplaced oblique fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.335G	Nondisplaced oblique fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.335S	Nondisplaced oblique fracture of shaft of humerus, left arm, sequela
S42.336D	Nondisplaced oblique fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.336G	Nondisplaced oblique fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.336S	Nondisplaced oblique fracture of shaft of humerus, unspecified arm, sequela
S42.341D	Displaced spiral fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.341G	Displaced spiral fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.341S	Displaced spiral fracture of shaft of humerus, right arm, sequela
S42.342D	Displaced spiral fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.342G	Displaced spiral fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.342S	Displaced spiral fracture of shaft of humerus, left arm, sequela
S42.343D	Displaced spiral fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.343G	Displaced spiral fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.343S	Displaced spiral fracture of shaft of humerus, unspecified arm, sequela
S42.344D	Nondisplaced spiral fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.344G	Nondisplaced spiral fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.344S	Nondisplaced spiral fracture of shaft of humerus, right arm, sequela



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Code	Description
S42.345D	Nondisplaced spiral fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.345G	Nondisplaced spiral fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.345S	Nondisplaced spiral fracture of shaft of humerus, left arm, sequela
S42.346D	Nondisplaced spiral fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.346G	Nondisplaced spiral fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.346S	Nondisplaced spiral fracture of shaft of humerus, unspecified arm, sequela
S42.351D	Displaced comminuted fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.351G	Displaced comminuted fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.351S	Displaced comminuted fracture of shaft of humerus, right arm, sequela
S42.352D	Displaced comminuted fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.352G	Displaced comminuted fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.352S	Displaced comminuted fracture of shaft of humerus, left arm, sequela
S42.353D	Displaced comminuted fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.353G	Displaced comminuted fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.353S	Displaced comminuted fracture of shaft of humerus, unspecified arm, sequela
S42.354D	Nondisplaced comminuted fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.354G	Nondisplaced comminuted fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.354S	Nondisplaced comminuted fracture of shaft of humerus, right arm, sequela
S42.355D	Nondisplaced comminuted fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.355G	Nondisplaced comminuted fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.355S	Nondisplaced comminuted fracture of shaft of humerus, left arm, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.356D	Nondisplaced comminuted fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.356G	Nondisplaced comminuted fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.356S	Nondisplaced comminuted fracture of shaft of humerus, unspecified arm, sequela
S42.361D	Displaced segmental fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.361G	Displaced segmental fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.361S	Displaced segmental fracture of shaft of humerus, right arm, sequela
S42.362D	Displaced segmental fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.362G	Displaced segmental fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.362S	Displaced segmental fracture of shaft of humerus, left arm, sequela
S42.363D	Displaced segmental fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.363G	Displaced segmental fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.363S	Displaced segmental fracture of shaft of humerus, unspecified arm, sequela
S42.364D	Nondisplaced segmental fracture of shaft of humerus, right arm, subsequent encounter for fracture with routine healing
S42.364G	Nondisplaced segmental fracture of shaft of humerus, right arm, subsequent encounter for fracture with delayed healing
S42.364S	Nondisplaced segmental fracture of shaft of humerus, right arm, sequela
S42.365D	Nondisplaced segmental fracture of shaft of humerus, left arm, subsequent encounter for fracture with routine healing
S42.365G	Nondisplaced segmental fracture of shaft of humerus, left arm, subsequent encounter for fracture with delayed healing
S42.365S	Nondisplaced segmental fracture of shaft of humerus, left arm, sequela
S42.366D	Nondisplaced segmental fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S42.366G	Nondisplaced segmental fracture of shaft of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S42.366S	Nondisplaced segmental fracture of shaft of humerus, unspecified arm, sequela



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Code	Description
S42.391D	Other fracture of shaft of right humerus, subsequent encounter for fracture with routine healing
S42.391G	Other fracture of shaft of right humerus, subsequent encounter for fracture with delayed healing
S42.391S	Other fracture of shaft of right humerus, sequela
S42.392D	Other fracture of shaft of left humerus, subsequent encounter for fracture with routine healing
S42.392G	Other fracture of shaft of left humerus, subsequent encounter for fracture with delayed healing
S42.392S	Other fracture of shaft of left humerus, sequela
S42.399D	Other fracture of shaft of unspecified humerus, subsequent encounter for fracture with routine healing
S42.399G	Other fracture of shaft of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.399S	Other fracture of shaft of unspecified humerus, sequela
S42.401D	Unspecified fracture of lower end of right humerus, subsequent encounter for fracture with routine healing
S42.401G	Unspecified fracture of lower end of right humerus, subsequent encounter for fracture with delayed healing
S42.401S	Unspecified fracture of lower end of right humerus, sequela
S42.402D	Unspecified fracture of lower end of left humerus, subsequent encounter for fracture with routine healing
S42.402G	Unspecified fracture of lower end of left humerus, subsequent encounter for fracture with delayed healing
S42.402S	Unspecified fracture of lower end of left humerus, sequela
S42.409D	Unspecified fracture of lower end of unspecified humerus, subsequent encounter for fracture with routine healing
S42.409G	Unspecified fracture of lower end of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.409S	Unspecified fracture of lower end of unspecified humerus, sequela
S42.411D	Displaced simple supracondylar fracture without intercondylar fracture of right humerus, subsequent encounter for fracture with routine healing
S42.411G	Displaced simple supracondylar fracture without intercondylar fracture of right humerus, subsequent encounter for fracture with delayed healing



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Code	Description
S42.411S	Displaced simple supracondylar fracture without intercondylar fracture of right humerus, sequela
S42.412D	Displaced simple supracondylar fracture without intercondylar fracture of left humerus, subsequent encounter for fracture with routine healing
S42.412G	Displaced simple supracondylar fracture without intercondylar fracture of left humerus, subsequent encounter for fracture with delayed healing
S42.412S	Displaced simple supracondylar fracture without intercondylar fracture of left humerus, sequela
S42.413D	Displaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, subsequent encounter for fracture with routine healing
S42.413G	Displaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.413S	Displaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, sequela
S42.414D	Nondisplaced simple supracondylar fracture without intercondylar fracture of right humerus, subsequent encounter for fracture with routine healing
S42.414G	Nondisplaced simple supracondylar fracture without intercondylar fracture of right humerus, subsequent encounter for fracture with delayed healing
S42.414S	Nondisplaced simple supracondylar fracture without intercondylar fracture of right humerus, sequela
S42.415D	Nondisplaced simple supracondylar fracture without intercondylar fracture of left humerus, subsequent encounter for fracture with routine healing
S42.415G	Nondisplaced simple supracondylar fracture without intercondylar fracture of left humerus, subsequent encounter for fracture with delayed healing
S42.415S	Nondisplaced simple supracondylar fracture without intercondylar fracture of left humerus, sequela
S42.416D	Nondisplaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, subsequent encounter for fracture with routine healing
S42.416G	Nondisplaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.416S	Nondisplaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, sequela
S42.421D	Displaced comminuted supracondylar fracture without intercondylar fracture of right humerus, subsequent encounter for fracture with routine healing
S42.421G	Displaced comminuted supracondylar fracture without intercondylar fracture of right humerus, subsequent encounter for fracture with delayed healing



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.421S	Displaced comminuted supracondylar fracture without intercondylar fracture of right humerus, sequela
S42.422D	Displaced comminuted supracondylar fracture without intercondylar fracture of left humerus, subsequent encounter for fracture with routine healing
S42.422G	Displaced comminuted supracondylar fracture without intercondylar fracture of left humerus, subsequent encounter for fracture with delayed healing
S42.422S	Displaced comminuted supracondylar fracture without intercondylar fracture of left humerus, sequela
S42.423D	Displaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, subsequent encounter for fracture with routine healing
S42.423G	Displaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.423S	Displaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, sequela
S42.424D	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of right humerus, subsequent encounter for fracture with routine healing
S42.424G	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of right humerus, subsequent encounter for fracture with delayed healing
S42.424S	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of right humerus, sequela
S42.425D	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of left humerus, subsequent encounter for fracture with routine healing
S42.425G	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of left humerus, subsequent encounter for fracture with delayed healing
S42.425S	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of left humerus, sequela
S42.426D	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, subsequent encounter for fracture with routine healing
S42.426G	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.426S	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, sequela
S42.431D	Displaced fracture (avulsion) of lateral epicondyle of right humerus, subsequent encounter for fracture with routine healing
S42.431G	Displaced fracture (avulsion) of lateral epicondyle of right humerus, subsequent encounter for fracture with delayed healing



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Code	Description
S42.431S	Displaced fracture (avulsion) of lateral epicondyle of right humerus, sequela
S42.432D	Displaced fracture (avulsion) of lateral epicondyle of left humerus, subsequent encounter for fracture with routine healing
S42.432G	Displaced fracture (avulsion) of lateral epicondyle of left humerus, subsequent encounter for fracture with delayed healing
S42.432S	Displaced fracture (avulsion) of lateral epicondyle of left humerus, sequela
S42.433D	Displaced fracture (avulsion) of lateral epicondyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.433G	Displaced fracture (avulsion) of lateral epicondyle of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.433S	Displaced fracture (avulsion) of lateral epicondyle of unspecified humerus, sequela
S42.434D	Nondisplaced fracture (avulsion) of lateral epicondyle of right humerus, subsequent encounter for fracture with routine healing
S42.434G	Nondisplaced fracture (avulsion) of lateral epicondyle of right humerus, subsequent encounter for fracture with delayed healing
S42.434S	Nondisplaced fracture (avulsion) of lateral epicondyle of right humerus, sequela
S42.435D	Nondisplaced fracture (avulsion) of lateral epicondyle of left humerus, subsequent encounter for fracture with routine healing
S42.435G	Nondisplaced fracture (avulsion) of lateral epicondyle of left humerus, subsequent encounter for fracture with delayed healing
S42.435S	Nondisplaced fracture (avulsion) of lateral epicondyle of left humerus, sequela
S42.436D	Nondisplaced fracture (avulsion) of lateral epicondyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.436G	Nondisplaced fracture (avulsion) of lateral epicondyle of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.436S	Nondisplaced fracture (avulsion) of lateral epicondyle of unspecified humerus, sequela
S42.441D	Displaced fracture (avulsion) of medial epicondyle of right humerus, subsequent encounter for fracture with routine healing
S42.441G	Displaced fracture (avulsion) of medial epicondyle of right humerus, subsequent encounter for fracture with delayed healing
S42.441S	Displaced fracture (avulsion) of medial epicondyle of right humerus, sequela
S42.442D	Displaced fracture (avulsion) of medial epicondyle of left humerus, subsequent encounter for fracture with routine healing
S42.442G	Displaced fracture (avulsion) of medial epicondyle of left humerus, subsequent encounter for fracture with delayed healing



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Code	Description
S42.442S	Displaced fracture (avulsion) of medial epicondyle of left humerus, sequela
S42.443D	Displaced fracture (avulsion) of medial epicondyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.443G	Displaced fracture (avulsion) of medial epicondyle of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.443S	Displaced fracture (avulsion) of medial epicondyle of unspecified humerus, sequela
S42.444D	Nondisplaced fracture (avulsion) of medial epicondyle of right humerus, subsequent encounter for fracture with routine healing
S42.444G	Nondisplaced fracture (avulsion) of medial epicondyle of right humerus, subsequent encounter for fracture with delayed healing
S42.444S	Nondisplaced fracture (avulsion) of medial epicondyle of right humerus, sequela
S42.445D	Nondisplaced fracture (avulsion) of medial epicondyle of left humerus, subsequent encounter for fracture with routine healing
S42.445G	Nondisplaced fracture (avulsion) of medial epicondyle of left humerus, subsequent encounter for fracture with delayed healing
S42.445S	Nondisplaced fracture (avulsion) of medial epicondyle of left humerus, sequela
S42.446D	Nondisplaced fracture (avulsion) of medial epicondyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.446G	Nondisplaced fracture (avulsion) of medial epicondyle of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.446S	Nondisplaced fracture (avulsion) of medial epicondyle of unspecified humerus, sequela
S42.447D	Incarcerated fracture (avulsion) of medial epicondyle of right humerus, subsequent encounter for fracture with routine healing
S42.447G	Incarcerated fracture (avulsion) of medial epicondyle of right humerus, subsequent encounter for fracture with delayed healing
S42.447S	Incarcerated fracture (avulsion) of medial epicondyle of right humerus, sequela
S42.448D	Incarcerated fracture (avulsion) of medial epicondyle of left humerus, subsequent encounter for fracture with routine healing
S42.448G	Incarcerated fracture (avulsion) of medial epicondyle of left humerus, subsequent encounter for fracture with delayed healing
S42.448S	Incarcerated fracture (avulsion) of medial epicondyle of left humerus, sequela
S42.449D	Incarcerated fracture (avulsion) of medial epicondyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.449G	Incarcerated fracture (avulsion) of medial epicondyle of unspecified humerus, subsequent encounter for fracture with delayed healing

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Code	Description
S42.449S	Incarcerated fracture (avulsion) of medial epicondyle of unspecified humerus, sequela
S42.451D	Displaced fracture of lateral condyle of right humerus, subsequent encounter for fracture with routine healing
S42.451G	Displaced fracture of lateral condyle of right humerus, subsequent encounter for fracture with delayed healing
S42.451S	Displaced fracture of lateral condyle of right humerus, sequela
S42.452D	Displaced fracture of lateral condyle of left humerus, subsequent encounter for fracture with routine healing
S42.452G	Displaced fracture of lateral condyle of left humerus, subsequent encounter for fracture with delayed healing
S42.452S	Displaced fracture of lateral condyle of left humerus, sequela
S42.453D	Displaced fracture of lateral condyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.453G	Displaced fracture of lateral condyle of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.453S	Displaced fracture of lateral condyle of unspecified humerus, sequela
S42.454D	Nondisplaced fracture of lateral condyle of right humerus, subsequent encounter for fracture with routine healing
S42.454G	Nondisplaced fracture of lateral condyle of right humerus, subsequent encounter for fracture with delayed healing
S42.454S	Nondisplaced fracture of lateral condyle of right humerus, sequela
S42.455D	Nondisplaced fracture of lateral condyle of left humerus, subsequent encounter for fracture with routine healing
S42.455G	Nondisplaced fracture of lateral condyle of left humerus, subsequent encounter for fracture with delayed healing
S42.455S	Nondisplaced fracture of lateral condyle of left humerus, sequela
S42.456D	Nondisplaced fracture of lateral condyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.456G	Nondisplaced fracture of lateral condyle of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.456S	Nondisplaced fracture of lateral condyle of unspecified humerus, sequela
S42.461D	Displaced fracture of medial condyle of right humerus, subsequent encounter for fracture with routine healing
S42.461G	Displaced fracture of medial condyle of right humerus, subsequent encounter for fracture with delayed healing

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Code	Description
S42.461S	Displaced fracture of medial condyle of right humerus, sequela
S42.462D	Displaced fracture of medial condyle of left humerus, subsequent encounter for fracture with routine healing
S42.462G	Displaced fracture of medial condyle of left humerus, subsequent encounter for fracture with delayed healing
S42.462S	Displaced fracture of medial condyle of left humerus, sequela
S42.463D	Displaced fracture of medial condyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.463G	Displaced fracture of medial condyle of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.463S	Displaced fracture of medial condyle of unspecified humerus, sequela
S42.464D	Nondisplaced fracture of medial condyle of right humerus, subsequent encounter for fracture with routine healing
S42.464G	Nondisplaced fracture of medial condyle of right humerus, subsequent encounter for fracture with delayed healing
S42.464S	Nondisplaced fracture of medial condyle of right humerus, sequela
S42.465D	Nondisplaced fracture of medial condyle of left humerus, subsequent encounter for fracture with routine healing
S42.465G	Nondisplaced fracture of medial condyle of left humerus, subsequent encounter for fracture with delayed healing
S42.465S	Nondisplaced fracture of medial condyle of left humerus, sequela
S42.466D	Nondisplaced fracture of medial condyle of unspecified humerus, subsequent encounter for fracture with routine healing
S42.466G	Nondisplaced fracture of medial condyle of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.466S	Nondisplaced fracture of medial condyle of unspecified humerus, sequela
S42.471D	Displaced transcondylar fracture of right humerus, subsequent encounter for fracture with routine healing
S42.471G	Displaced transcondylar fracture of right humerus, subsequent encounter for fracture with delayed healing
S42.471S	Displaced transcondylar fracture of right humerus, sequela
S42.472D	Displaced transcondylar fracture of left humerus, subsequent encounter for fracture with routine healing
S42.472G	Displaced transcondylar fracture of left humerus, subsequent encounter for fracture with delayed healing



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Code	Description
S42.472S	Displaced transcondylar fracture of left humerus, sequela
S42.473D	Displaced transcondylar fracture of unspecified humerus, subsequent encounter for fracture with routine healing
S42.473G	Displaced transcondylar fracture of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.473S	Displaced transcondylar fracture of unspecified humerus, sequela
S42.474D	Nondisplaced transcondylar fracture of right humerus, subsequent encounter for fracture with routine healing
S42.474G	Nondisplaced transcondylar fracture of right humerus, subsequent encounter for fracture with delayed healing
S42.474S	Nondisplaced transcondylar fracture of right humerus, sequela
S42.475D	Nondisplaced transcondylar fracture of left humerus, subsequent encounter for fracture with routine healing
S42.475G	Nondisplaced transcondylar fracture of left humerus, subsequent encounter for fracture with delayed healing
S42.475S	Nondisplaced transcondylar fracture of left humerus, sequela
S42.476D	Nondisplaced transcondylar fracture of unspecified humerus, subsequent encounter for fracture with routine healing
S42.476G	Nondisplaced transcondylar fracture of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.476S	Nondisplaced transcondylar fracture of unspecified humerus, sequela
S42.481D	Torus fracture of lower end of right humerus, subsequent encounter for fracture with routine healing
S42.481G	Torus fracture of lower end of right humerus, subsequent encounter for fracture with delayed healing
S42.481S	Torus fracture of lower end of right humerus, sequela
S42.482D	Torus fracture of lower end of left humerus, subsequent encounter for fracture with routine healing
S42.482G	Torus fracture of lower end of left humerus, subsequent encounter for fracture with delayed healing
S42.482S	Torus fracture of lower end of left humerus, sequela
S42.489D	Torus fracture of lower end of unspecified humerus, subsequent encounter for fracture with routine healing
S42.489G	Torus fracture of lower end of unspecified humerus, subsequent encounter for fracture with delayed healing

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Code	Description
S42.489S	Torus fracture of lower end of unspecified humerus, sequela
S42.491D	Other displaced fracture of lower end of right humerus, subsequent encounter for fracture with routine healing
S42.491G	Other displaced fracture of lower end of right humerus, subsequent encounter for fracture with delayed healing
S42.491S	Other displaced fracture of lower end of right humerus, sequela
S42.492D	Other displaced fracture of lower end of left humerus, subsequent encounter for fracture with routine healing
S42.492G	Other displaced fracture of lower end of left humerus, subsequent encounter for fracture with delayed healing
S42.492S	Other displaced fracture of lower end of left humerus, sequela
S42.493D	Other displaced fracture of lower end of unspecified humerus, subsequent encounter for fracture with routine healing
S42.493G	Other displaced fracture of lower end of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.493S	Other displaced fracture of lower end of unspecified humerus, sequela
S42.494D	Other nondisplaced fracture of lower end of right humerus, subsequent encounter for fracture with routine healing
S42.494G	Other nondisplaced fracture of lower end of right humerus, subsequent encounter for fracture with delayed healing
S42.494S	Other nondisplaced fracture of lower end of right humerus, sequela
S42.495D	Other nondisplaced fracture of lower end of left humerus, subsequent encounter for fracture with routine healing
S42.495G	Other nondisplaced fracture of lower end of left humerus, subsequent encounter for fracture with delayed healing
S42.495S	Other nondisplaced fracture of lower end of left humerus, sequela
S42.496D	Other nondisplaced fracture of lower end of unspecified humerus, subsequent encounter for fracture with routine healing
S42.496G	Other nondisplaced fracture of lower end of unspecified humerus, subsequent encounter for fracture with delayed healing
S42.496S	Other nondisplaced fracture of lower end of unspecified humerus, sequela
S42.90XD	Fracture of unspecified shoulder girdle, part unspecified, subsequent encounter for fracture with routine healing
S42.90XG	Fracture of unspecified shoulder girdle, part unspecified, subsequent encounter for fracture with delayed healing



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Code	Description
S42.90XS	Fracture of unspecified shoulder girdle, part unspecified, sequela
S42.91XD	Fracture of right shoulder girdle, part unspecified, subsequent encounter for fracture with routine healing
S42.91XG	Fracture of right shoulder girdle, part unspecified, subsequent encounter for fracture with delayed healing
S42.91XS	Fracture of right shoulder girdle, part unspecified, sequela
S42.92XD	Fracture of left shoulder girdle, part unspecified, subsequent encounter for fracture with routine healing
S42.92XG	Fracture of left shoulder girdle, part unspecified, subsequent encounter for fracture with delayed healing
S42.92XS	Fracture of left shoulder girdle, part unspecified, sequela
S43.001A	Unspecified subluxation of right shoulder joint, initial encounter
S43.001S	Unspecified subluxation of right shoulder joint, sequela
S43.002A	Unspecified subluxation of left shoulder joint, initial encounter
S43.002S	Unspecified subluxation of left shoulder joint, sequela
S43.003A	Unspecified subluxation of unspecified shoulder joint, initial encounter
S43.003S	Unspecified subluxation of unspecified shoulder joint, sequela
S43.004A	Unspecified dislocation of right shoulder joint, initial encounter
S43.004S	Unspecified dislocation of right shoulder joint, sequela
S43.005A	Unspecified dislocation of left shoulder joint, initial encounter
S43.005S	Unspecified dislocation of left shoulder joint, sequela
S43.006A	Unspecified dislocation of unspecified shoulder joint, initial encounter
S43.006S	Unspecified dislocation of unspecified shoulder joint, sequela
S43.011A	Anterior subluxation of right humerus, initial encounter
S43.011S	Anterior subluxation of right humerus, sequela
S43.012A	Anterior subluxation of left humerus, initial encounter
S43.012S	Anterior subluxation of left humerus, sequela
S43.013A	Anterior subluxation of unspecified humerus, initial encounter
S43.013S	Anterior subluxation of unspecified humerus, sequela
S43.014A	Anterior dislocation of right humerus, initial encounter
S43.014S	Anterior dislocation of right humerus, sequela
S43.015A	Anterior dislocation of left humerus, initial encounter

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Code	Description
S43.015S	Anterior dislocation of left humerus, sequela
S43.016A	Anterior dislocation of unspecified humerus, initial encounter
S43.016S	Anterior dislocation of unspecified humerus, sequela
S43.021A	Posterior subluxation of right humerus, initial encounter
S43.021S	Posterior subluxation of right humerus, sequela
S43.022A	Posterior subluxation of left humerus, initial encounter
S43.022S	Posterior subluxation of left humerus, sequela
S43.023A	Posterior subluxation of unspecified humerus, initial encounter
S43.023S	Posterior subluxation of unspecified humerus, sequela
S43.024A	Posterior dislocation of right humerus, initial encounter
S43.024S	Posterior dislocation of right humerus, sequela
S43.025A	Posterior dislocation of left humerus, initial encounter
S43.025S	Posterior dislocation of left humerus, sequela
S43.026A	Posterior dislocation of unspecified humerus, initial encounter
S43.026S	Posterior dislocation of unspecified humerus, sequela
S43.031A	Inferior subluxation of right humerus, initial encounter
S43.031S	Inferior subluxation of right humerus, sequela
S43.032A	Inferior subluxation of left humerus, initial encounter
S43.032S	Inferior subluxation of left humerus, sequela
S43.033A	Inferior subluxation of unspecified humerus, initial encounter
S43.033S	Inferior subluxation of unspecified humerus, sequela
S43.034A	Inferior dislocation of right humerus, initial encounter
S43.034S	Inferior dislocation of right humerus, sequela
S43.035A	Inferior dislocation of left humerus, initial encounter
S43.035S	Inferior dislocation of left humerus, sequela
S43.036A	Inferior dislocation of unspecified humerus, initial encounter
S43.036S	Inferior dislocation of unspecified humerus, sequela
S43.081A	Other subluxation of right shoulder joint, initial encounter
S43.081S	Other subluxation of right shoulder joint, sequela
S43.082A	Other subluxation of left shoulder joint, initial encounter

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Code	Description
S43.082S	Other subluxation of left shoulder joint, sequela
S43.083A	Other subluxation of unspecified shoulder joint, initial encounter
S43.083S	Other subluxation of unspecified shoulder joint, sequela
S43.084A	Other dislocation of right shoulder joint, initial encounter
S43.084S	Other dislocation of right shoulder joint, sequela
S43.085A	Other dislocation of left shoulder joint, initial encounter
S43.085S	Other dislocation of left shoulder joint, sequela
S43.086A	Other dislocation of unspecified shoulder joint, initial encounter
S43.086S	Other dislocation of unspecified shoulder joint, sequela
S43.101A	Unspecified dislocation of right acromioclavicular joint, initial encounter
S43.101S	Unspecified dislocation of right acromioclavicular joint, sequela
S43.102A	Unspecified dislocation of left acromioclavicular joint, initial encounter
S43.102S	Unspecified dislocation of left acromioclavicular joint, sequela
S43.109A	Unspecified dislocation of unspecified acromioclavicular joint, initial encounter
S43.109S	Unspecified dislocation of unspecified acromioclavicular joint, sequela
S43.111A	Subluxation of right acromioclavicular joint, initial encounter
S43.111S	Subluxation of right acromioclavicular joint, sequela
S43.112A	Subluxation of left acromioclavicular joint, initial encounter
S43.112S	Subluxation of left acromioclavicular joint, sequela
S43.119A	Subluxation of unspecified acromioclavicular joint, initial encounter
S43.119S	Subluxation of unspecified acromioclavicular joint, sequela
S43.121A	Dislocation of right acromioclavicular joint, 100%-200% displacement, initial encounter
S43.121S	Dislocation of right acromioclavicular joint, 100%-200% displacement, sequela
S43.122A	Dislocation of left acromioclavicular joint, 100%-200% displacement, initial encounter
S43.122S	Dislocation of left acromioclavicular joint, 100%-200% displacement, sequela
S43.129A	Dislocation of unspecified acromioclavicular joint, 100%-200% displacement, initial encounter
S43.129S	Dislocation of unspecified acromioclavicular joint, 100%-200% displacement, sequela
S43.131A	Dislocation of right acromioclavicular joint, greater than 200% displacement, initial encounter
S43.131S	Dislocation of right acromioclavicular joint, greater than 200% displacement, sequela

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Code	Description
S43.132A	Dislocation of left acromioclavicular joint, greater than 200% displacement, initial encounter
S43.132S	Dislocation of left acromioclavicular joint, greater than 200% displacement, sequela
S43.139A	Dislocation of unspecified acromioclavicular joint, greater than 200% displacement, initial encounter
S43.139S	Dislocation of unspecified acromioclavicular joint, greater than 200% displacement, sequela
S43.141A	Inferior dislocation of right acromioclavicular joint, initial encounter
S43.141S	Inferior dislocation of right acromioclavicular joint, sequela
S43.142A	Inferior dislocation of left acromioclavicular joint, initial encounter
S43.142S	Inferior dislocation of left acromioclavicular joint, sequela
S43.149A	Inferior dislocation of unspecified acromioclavicular joint, initial encounter
S43.149S	Inferior dislocation of unspecified acromioclavicular joint, sequela
S43.151A	Posterior dislocation of right acromioclavicular joint, initial encounter
S43.151S	Posterior dislocation of right acromioclavicular joint, sequela
S43.152A	Posterior dislocation of left acromioclavicular joint, initial encounter
S43.152S	Posterior dislocation of left acromioclavicular joint, sequela
S43.159A	Posterior dislocation of unspecified acromioclavicular joint, initial encounter
S43.159S	Posterior dislocation of unspecified acromioclavicular joint, sequela
S43.201A	Unspecified subluxation of right sternoclavicular joint, initial encounter
S43.201S	Unspecified subluxation of right sternoclavicular joint, sequela
S43.202A	Unspecified subluxation of left sternoclavicular joint, initial encounter
S43.202S	Unspecified subluxation of left sternoclavicular joint, sequela
S43.203A	Unspecified subluxation of unspecified sternoclavicular joint, initial encounter
S43.203S	Unspecified subluxation of unspecified sternoclavicular joint, sequela
S43.204A	Unspecified dislocation of right sternoclavicular joint, initial encounter
S43.204S	Unspecified dislocation of right sternoclavicular joint, sequela
S43.205A	Unspecified dislocation of left sternoclavicular joint, initial encounter
S43.205S	Unspecified dislocation of left sternoclavicular joint, sequela
S43.206A	Unspecified dislocation of unspecified sternoclavicular joint, initial encounter
S43.206S	Unspecified dislocation of unspecified sternoclavicular joint, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S43.211A	Anterior subluxation of right sternoclavicular joint, initial encounter
S43.211S	Anterior subluxation of right sternoclavicular joint, sequela
S43.212A	Anterior subluxation of left sternoclavicular joint, initial encounter
S43.212S	Anterior subluxation of left sternoclavicular joint, sequela
S43.213A	Anterior subluxation of unspecified sternoclavicular joint, initial encounter
S43.213S	Anterior subluxation of unspecified sternoclavicular joint, sequela
S43.214A	Anterior dislocation of right sternoclavicular joint, initial encounter
S43.214S	Anterior dislocation of right sternoclavicular joint, sequela
S43.215A	Anterior dislocation of left sternoclavicular joint, initial encounter
S43.215S	Anterior dislocation of left sternoclavicular joint, sequela
S43.216A	Anterior dislocation of unspecified sternoclavicular joint, initial encounter
S43.216S	Anterior dislocation of unspecified sternoclavicular joint, sequela
S43.221A	Posterior subluxation of right sternoclavicular joint, initial encounter
S43.221S	Posterior subluxation of right sternoclavicular joint, sequela
S43.222A	Posterior subluxation of left sternoclavicular joint, initial encounter
S43.222S	Posterior subluxation of left sternoclavicular joint, sequela
S43.223A	Posterior subluxation of unspecified sternoclavicular joint, initial encounter
S43.223S	Posterior subluxation of unspecified sternoclavicular joint, sequela
S43.224A	Posterior dislocation of right sternoclavicular joint, initial encounter
S43.224S	Posterior dislocation of right sternoclavicular joint, sequela
S43.225A	Posterior dislocation of left sternoclavicular joint, initial encounter
S43.225S	Posterior dislocation of left sternoclavicular joint, sequela
S43.226A	Posterior dislocation of unspecified sternoclavicular joint, initial encounter
S43.226S	Posterior dislocation of unspecified sternoclavicular joint, sequela
S43.301A	Subluxation of unspecified parts of right shoulder girdle, initial encounter
S43.301S	Subluxation of unspecified parts of right shoulder girdle, sequela
S43.302A	Subluxation of unspecified parts of left shoulder girdle, initial encounter
S43.302S	Subluxation of unspecified parts of left shoulder girdle, sequela
S43.303A	Subluxation of unspecified parts of unspecified shoulder girdle, initial encounter
S43.303S	Subluxation of unspecified parts of unspecified shoulder girdle, sequela

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Code	Description
S43.304A	Dislocation of unspecified parts of right shoulder girdle, initial encounter
S43.304S	Dislocation of unspecified parts of right shoulder girdle, sequela
S43.305A	Dislocation of unspecified parts of left shoulder girdle, initial encounter
S43.305S	Dislocation of unspecified parts of left shoulder girdle, sequela
S43.306A	Dislocation of unspecified parts of unspecified shoulder girdle, initial encounter
S43.306S	Dislocation of unspecified parts of unspecified shoulder girdle, sequela
S43.311A	Subluxation of right scapula, initial encounter
S43.311S	Subluxation of right scapula, sequela
S43.312A	Subluxation of left scapula, initial encounter
S43.312S	Subluxation of left scapula, sequela
S43.313A	Subluxation of unspecified scapula, initial encounter
S43.313S	Subluxation of unspecified scapula, sequela
S43.314A	Dislocation of right scapula, initial encounter
S43.314S	Dislocation of right scapula, sequela
S43.315A	Dislocation of left scapula, initial encounter
S43.315S	Dislocation of left scapula, sequela
S43.316A	Dislocation of unspecified scapula, initial encounter
S43.316S	Dislocation of unspecified scapula, sequela
S43.391A	Subluxation of other parts of right shoulder girdle, initial encounter
S43.391S	Subluxation of other parts of right shoulder girdle, sequela
S43.392A	Subluxation of other parts of left shoulder girdle, initial encounter
S43.392S	Subluxation of other parts of left shoulder girdle, sequela
S43.393A	Subluxation of other parts of unspecified shoulder girdle, initial encounter
S43.393S	Subluxation of other parts of unspecified shoulder girdle, sequela
S43.394A	Dislocation of other parts of right shoulder girdle, initial encounter
S43.394S	Dislocation of other parts of right shoulder girdle, sequela
S43.395A	Dislocation of other parts of left shoulder girdle, initial encounter
S43.395S	Dislocation of other parts of left shoulder girdle, sequela
S43.396A	Dislocation of other parts of unspecified shoulder girdle, initial encounter
S43.396S	Dislocation of other parts of unspecified shoulder girdle, sequela

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Code	Description
S43.401A	Unspecified sprain of right shoulder joint, initial encounter
S43.401S	Unspecified sprain of right shoulder joint, sequela
S43.402A	Unspecified sprain of left shoulder joint, initial encounter
S43.402S	Unspecified sprain of left shoulder joint, sequela
S43.409A	Unspecified sprain of unspecified shoulder joint, initial encounter
S43.409S	Unspecified sprain of unspecified shoulder joint, sequela
S43.411A	Sprain of right coracohumeral (ligament), initial encounter
S43.411S	Sprain of right coracohumeral (ligament), sequela
S43.412A	Sprain of left coracohumeral (ligament), initial encounter
S43.412S	Sprain of left coracohumeral (ligament), sequela
S43.419A	Sprain of unspecified coracohumeral (ligament), initial encounter
S43.419S	Sprain of unspecified coracohumeral (ligament), sequela
S43.421A	Sprain of right rotator cuff capsule, initial encounter
S43.421S	Sprain of right rotator cuff capsule, sequela
S43.422A	Sprain of left rotator cuff capsule, initial encounter
S43.422S	Sprain of left rotator cuff capsule, sequela
S43.429A	Sprain of unspecified rotator cuff capsule, initial encounter
S43.429S	Sprain of unspecified rotator cuff capsule, sequela
S43.431A	Superior glenoid labrum lesion of right shoulder, initial encounter
S43.431S	Superior glenoid labrum lesion of right shoulder, sequela
S43.432A	Superior glenoid labrum lesion of left shoulder, initial encounter
S43.432S	Superior glenoid labrum lesion of left shoulder, sequela
S43.439A	Superior glenoid labrum lesion of unspecified shoulder, initial encounter
S43.439S	Superior glenoid labrum lesion of unspecified shoulder, sequela
S43.491A	Other sprain of right shoulder joint, initial encounter
S43.491S	Other sprain of right shoulder joint, sequela
S43.492A	Other sprain of left shoulder joint, initial encounter
S43.492S	Other sprain of left shoulder joint, sequela
S43.499A	Other sprain of unspecified shoulder joint, initial encounter
S43.499S	Other sprain of unspecified shoulder joint, sequela



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Code	Description
S43.50XA	Sprain of unspecified acromioclavicular joint, initial encounter
S43.50XS	Sprain of unspecified acromioclavicular joint, sequela
S43.51XA	Sprain of right acromioclavicular joint, initial encounter
S43.51XS	Sprain of right acromioclavicular joint, sequela
S43.52XA	Sprain of left acromioclavicular joint, initial encounter
S43.52XS	Sprain of left acromioclavicular joint, sequela
S43.60XA	Sprain of unspecified sternoclavicular joint, initial encounter
S43.60XS	Sprain of unspecified sternoclavicular joint, sequela
S43.61XA	Sprain of right sternoclavicular joint, initial encounter
S43.61XS	Sprain of right sternoclavicular joint, sequela
S43.62XA	Sprain of left sternoclavicular joint, initial encounter
S43.62XS	Sprain of left sternoclavicular joint, sequela
S43.80XA	Sprain of other specified parts of unspecified shoulder girdle, initial encounter
S43.80XS	Sprain of other specified parts of unspecified shoulder girdle, sequela
S43.81XA	Sprain of other specified parts of right shoulder girdle, initial encounter
S43.81XS	Sprain of other specified parts of right shoulder girdle, sequela
S43.82XA	Sprain of other specified parts of left shoulder girdle, initial encounter
S43.82XS	Sprain of other specified parts of left shoulder girdle, sequela
S43.90XA	Sprain of unspecified parts of unspecified shoulder girdle, initial encounter
S43.90XS	Sprain of unspecified parts of unspecified shoulder girdle, sequela
S43.91XA	Sprain of unspecified parts of right shoulder girdle, initial encounter
S43.91XS	Sprain of unspecified parts of right shoulder girdle, sequela
S43.92XA	Sprain of unspecified parts of left shoulder girdle, initial encounter
S43.92XS	Sprain of unspecified parts of left shoulder girdle, sequela
S44.00XA	Injury of ulnar nerve at upper arm level, unspecified arm, initial encounter
S44.00XS	Injury of ulnar nerve at upper arm level, unspecified arm, sequela
S44.01XA	Injury of ulnar nerve at upper arm level, right arm, initial encounter
S44.01XS	Injury of ulnar nerve at upper arm level, right arm, sequela
S44.02XA	Injury of ulnar nerve at upper arm level, left arm, initial encounter
S44.02XS	Injury of ulnar nerve at upper arm level, left arm, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S44.10XA	Injury of median nerve at upper arm level, unspecified arm, initial encounter
S44.10XS	Injury of median nerve at upper arm level, unspecified arm, sequela
S44.11XA	Injury of median nerve at upper arm level, right arm, initial encounter
S44.11XS	Injury of median nerve at upper arm level, right arm, sequela
S44.12XA	Injury of median nerve at upper arm level, left arm, initial encounter
S44.12XS	Injury of median nerve at upper arm level, left arm, sequela
S44.20XA	Injury of radial nerve at upper arm level, unspecified arm, initial encounter
S44.20XS	Injury of radial nerve at upper arm level, unspecified arm, sequela
S44.21XA	Injury of radial nerve at upper arm level, right arm, initial encounter
S44.21XS	Injury of radial nerve at upper arm level, right arm, sequela
S44.22XA	Injury of radial nerve at upper arm level, left arm, initial encounter
S44.22XS	Injury of radial nerve at upper arm level, left arm, sequela
S44.30XA	Injury of axillary nerve, unspecified arm, initial encounter
S44.30XS	Injury of axillary nerve, unspecified arm, sequela
S44.31XA	Injury of axillary nerve, right arm, initial encounter
S44.31XS	Injury of axillary nerve, right arm, sequela
S44.32XA	Injury of axillary nerve, left arm, initial encounter
S44.32XS	Injury of axillary nerve, left arm, sequela
S44.40XA	Injury of musculocutaneous nerve, unspecified arm, initial encounter
S44.40XS	Injury of musculocutaneous nerve, unspecified arm, sequela
S44.41XA	Injury of musculocutaneous nerve, right arm, initial encounter
S44.41XS	Injury of musculocutaneous nerve, right arm, sequela
S44.42XA	Injury of musculocutaneous nerve, left arm, initial encounter
S44.42XS	Injury of musculocutaneous nerve, left arm, sequela
S44.50XA	Injury of cutaneous sensory nerve at shoulder and upper arm level, unspecified arm, initial encounter
S44.50XS	Injury of cutaneous sensory nerve at shoulder and upper arm level, unspecified arm, sequela
S44.51XA	Injury of cutaneous sensory nerve at shoulder and upper arm level, right arm, initial encounter
S44.51XS	Injury of cutaneous sensory nerve at shoulder and upper arm level, right arm, sequela



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Code	Description
S44.52XA	Injury of cutaneous sensory nerve at shoulder and upper arm level, left arm, initial encounter
S44.52XS	Injury of cutaneous sensory nerve at shoulder and upper arm level, left arm, sequela
S44.8X1A	Injury of other nerves at shoulder and upper arm level, right arm, initial encounter
S44.8X1S	Injury of other nerves at shoulder and upper arm level, right arm, sequela
S44.8X2A	Injury of other nerves at shoulder and upper arm level, left arm, initial encounter
S44.8X2S	Injury of other nerves at shoulder and upper arm level, left arm, sequela
S44.8X9A	Injury of other nerves at shoulder and upper arm level, unspecified arm, initial encounter
S44.8X9S	Injury of other nerves at shoulder and upper arm level, unspecified arm, sequela
S44.90XA	Injury of unspecified nerve at shoulder and upper arm level, unspecified arm, initial encounter
S44.90XS	Injury of unspecified nerve at shoulder and upper arm level, unspecified arm, sequela
S44.91XA	Injury of unspecified nerve at shoulder and upper arm level, right arm, initial encounter
S44.91XS	Injury of unspecified nerve at shoulder and upper arm level, right arm, sequela
S44.92XA	Injury of unspecified nerve at shoulder and upper arm level, left arm, initial encounter
S44.92XS	Injury of unspecified nerve at shoulder and upper arm level, left arm, sequela
S45.001S	Unspecified injury of axillary artery, right side, sequela
S45.002S	Unspecified injury of axillary artery, left side, sequela
S45.009S	Unspecified injury of axillary artery, unspecified side, sequela
S45.011S	Laceration of axillary artery, right side, sequela
S45.012S	Laceration of axillary artery, left side, sequela
S45.019S	Laceration of axillary artery, unspecified side, sequela
S45.091S	Other specified injury of axillary artery, right side, sequela
S45.092S	Other specified injury of axillary artery, left side, sequela
S45.099S	Other specified injury of axillary artery, unspecified side, sequela
S45.101S	Unspecified injury of brachial artery, right side, sequela
S45.102S	Unspecified injury of brachial artery, left side, sequela
S45.109S	Unspecified injury of brachial artery, unspecified side, sequela
S45.111S	Laceration of brachial artery, right side, sequela
S45.112S	Laceration of brachial artery, left side, sequela
S45.119S	Laceration of brachial artery, unspecified side, sequela

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Code	Description
S45.191S	Other specified injury of brachial artery, right side, sequela
S45.192S	Other specified injury of brachial artery, left side, sequela
S45.199S	Other specified injury of brachial artery, unspecified side, sequela
S45.201S	Unspecified injury of axillary or brachial vein, right side, sequela
S45.202S	Unspecified injury of axillary or brachial vein, left side, sequela
S45.209S	Unspecified injury of axillary or brachial vein, unspecified side, sequela
S45.211S	Laceration of axillary or brachial vein, right side, sequela
S45.212S	Laceration of axillary or brachial vein, left side, sequela
S45.219S	Laceration of axillary or brachial vein, unspecified side, sequela
S45.291S	Other specified injury of axillary or brachial vein, right side, sequela
S45.292S	Other specified injury of axillary or brachial vein, left side, sequela
S45.299S	Other specified injury of axillary or brachial vein, unspecified side, sequela
S45.301S	Unspecified injury of superficial vein at shoulder and upper arm level, right arm, sequela
S45.302S	Unspecified injury of superficial vein at shoulder and upper arm level, left arm, sequela
S45.309S	Unspecified injury of superficial vein at shoulder and upper arm level, unspecified arm, sequela
S45.311S	Laceration of superficial vein at shoulder and upper arm level, right arm, sequela
S45.312S	Laceration of superficial vein at shoulder and upper arm level, left arm, sequela
S45.319S	Laceration of superficial vein at shoulder and upper arm level, unspecified arm, sequela
S45.391S	Other specified injury of superficial vein at shoulder and upper arm level, right arm, sequela
S45.392S	Other specified injury of superficial vein at shoulder and upper arm level, left arm, sequela
S45.399S	Other specified injury of superficial vein at shoulder and upper arm level, unspecified arm, sequela
S45.801S	Unspecified injury of other specified blood vessels at shoulder and upper arm level, right arm, sequela
S45.802S	Unspecified injury of other specified blood vessels at shoulder and upper arm level, left arm, sequela
S45.809S	Unspecified injury of other specified blood vessels at shoulder and upper arm level, unspecified arm, sequela
S45.811S	Laceration of other specified blood vessels at shoulder and upper arm level, right arm, sequela



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Code	Description
S45.812S	Laceration of other specified blood vessels at shoulder and upper arm level, left arm, sequela
S45.819S	Laceration of other specified blood vessels at shoulder and upper arm level, unspecified arm, sequela
S45.891S	Other specified injury of other specified blood vessels at shoulder and upper arm level, right arm, sequela
S45.892S	Other specified injury of other specified blood vessels at shoulder and upper arm level, left arm, sequela
S45.899S	Other specified injury of other specified blood vessels at shoulder and upper arm level, unspecified arm, sequela
S45.901S	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, right arm, sequela
S45.902S	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, left arm, sequela
S45.909S	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, unspecified arm, sequela
S45.911S	Laceration of unspecified blood vessel at shoulder and upper arm level, right arm, sequela
S45.912S	Laceration of unspecified blood vessel at shoulder and upper arm level, left arm, sequela
S45.919S	Laceration of unspecified blood vessel at shoulder and upper arm level, unspecified arm, sequela
S45.991S	Other specified injury of unspecified blood vessel at shoulder and upper arm level, right arm, sequela
S45.992S	Other specified injury of unspecified blood vessel at shoulder and upper arm level, left arm, sequela
S45.999S	Other specified injury of unspecified blood vessel at shoulder and upper arm level, unspecified arm, sequela
S46.001S	Unspecified injury of muscle(s) and tendon(s) of the rotator cuff of right shoulder, sequela
S46.002S	Unspecified injury of muscle(s) and tendon(s) of the rotator cuff of left shoulder, sequela
S46.009S	Unspecified injury of muscle(s) and tendon(s) of the rotator cuff of unspecified shoulder, sequela
S46.011A	Strain of muscle(s) and tendon(s) of the rotator cuff of right shoulder, initial encounter
S46.011S	Strain of muscle(s) and tendon(s) of the rotator cuff of right shoulder, sequela
S46.012A	Strain of muscle(s) and tendon(s) of the rotator cuff of left shoulder, initial encounter
S46.012S	Strain of muscle(s) and tendon(s) of the rotator cuff of left shoulder, sequela



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Code	Description
S46.019A	Strain of muscle(s) and tendon(s) of the rotator cuff of unspecified shoulder, initial encounter
S46.019S	Strain of muscle(s) and tendon(s) of the rotator cuff of unspecified shoulder, sequela
S46.021S	Laceration of muscle(s) and tendon(s) of the rotator cuff of right shoulder, sequela
S46.022S	Laceration of muscle(s) and tendon(s) of the rotator cuff of left shoulder, sequela
S46.029S	Laceration of muscle(s) and tendon(s) of the rotator cuff of unspecified shoulder, sequela
S46.091S	Other injury of muscle(s) and tendon(s) of the rotator cuff of right shoulder, sequela
S46.092S	Other injury of muscle(s) and tendon(s) of the rotator cuff of left shoulder, sequela
S46.099S	Other injury of muscle(s) and tendon(s) of the rotator cuff of unspecified shoulder, sequela
S46.101S	Unspecified injury of muscle, fascia and tendon of long head of biceps, right arm, sequela
S46.102S	Unspecified injury of muscle, fascia and tendon of long head of biceps, left arm, sequela
S46.109S	Unspecified injury of muscle, fascia and tendon of long head of biceps, unspecified arm, sequela
S46.111A	Strain of muscle, fascia and tendon of long head of biceps, right arm, initial encounter
S46.111S	Strain of muscle, fascia and tendon of long head of biceps, right arm, sequela
S46.112A	Strain of muscle, fascia and tendon of long head of biceps, left arm, initial encounter
S46.112S	Strain of muscle, fascia and tendon of long head of biceps, left arm, sequela
S46.119A	Strain of muscle, fascia and tendon of long head of biceps, unspecified arm, initial encounter
S46.119S	Strain of muscle, fascia and tendon of long head of biceps, unspecified arm, sequela
S46.121S	Laceration of muscle, fascia and tendon of long head of biceps, right arm, sequela
S46.122S	Laceration of muscle, fascia and tendon of long head of biceps, left arm, sequela
S46.129S	Laceration of muscle, fascia and tendon of long head of biceps, unspecified arm, sequela
S46.191S	Other injury of muscle, fascia and tendon of long head of biceps, right arm, sequela
S46.192S	Other injury of muscle, fascia and tendon of long head of biceps, left arm, sequela
S46.199S	Other injury of muscle, fascia and tendon of long head of biceps, unspecified arm, sequela
S46.201S	Unspecified injury of muscle, fascia and tendon of other parts of biceps, right arm, sequela
S46.202S	Unspecified injury of muscle, fascia and tendon of other parts of biceps, left arm, sequela
S46.209S	Unspecified injury of muscle, fascia and tendon of other parts of biceps, unspecified arm, sequela
S46.211A	Strain of muscle, fascia and tendon of other parts of biceps, right arm, initial encounter
S46.211S	Strain of muscle, fascia and tendon of other parts of biceps, right arm, sequela

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Code	Description
S46.212A	Strain of muscle, fascia and tendon of other parts of biceps, left arm, initial encounter
S46.212S	Strain of muscle, fascia and tendon of other parts of biceps, left arm, sequela
S46.219A	Strain of muscle, fascia and tendon of other parts of biceps, unspecified arm, initial encounter
S46.219S	Strain of muscle, fascia and tendon of other parts of biceps, unspecified arm, sequela
S46.221S	Laceration of muscle, fascia and tendon of other parts of biceps, right arm, sequela
S46.222S	Laceration of muscle, fascia and tendon of other parts of biceps, left arm, sequela
S46.229S	Laceration of muscle, fascia and tendon of other parts of biceps, unspecified arm, sequela
S46.291S	Other injury of muscle, fascia and tendon of other parts of biceps, right arm, sequela
S46.292S	Other injury of muscle, fascia and tendon of other parts of biceps, left arm, sequela
S46.299S	Other injury of muscle, fascia and tendon of other parts of biceps, unspecified arm, sequela
S46.301S	Unspecified injury of muscle, fascia and tendon of triceps, right arm, sequela
S46.302S	Unspecified injury of muscle, fascia and tendon of triceps, left arm, sequela
S46.309S	Unspecified injury of muscle, fascia and tendon of triceps, unspecified arm, sequela
S46.311A	Strain of muscle, fascia and tendon of triceps, right arm, initial encounter
S46.311S	Strain of muscle, fascia and tendon of triceps, right arm, sequela
S46.312A	Strain of muscle, fascia and tendon of triceps, left arm, initial encounter
S46.312S	Strain of muscle, fascia and tendon of triceps, left arm, sequela
S46.319A	Strain of muscle, fascia and tendon of triceps, unspecified arm, initial encounter
S46.319S	Strain of muscle, fascia and tendon of triceps, unspecified arm, sequela
S46.321S	Laceration of muscle, fascia and tendon of triceps, right arm, sequela
S46.322S	Laceration of muscle, fascia and tendon of triceps, left arm, sequela
S46.329S	Laceration of muscle, fascia and tendon of triceps, unspecified arm, sequela
S46.391S	Other injury of muscle, fascia and tendon of triceps, right arm, sequela
S46.392S	Other injury of muscle, fascia and tendon of triceps, left arm, sequela
S46.399S	Other injury of muscle, fascia and tendon of triceps, unspecified arm, sequela
S46.801S	Unspecified injury of other muscles, fascia and tendons at shoulder and upper arm level, right arm, sequela
S46.802S	Unspecified injury of other muscles, fascia and tendons at shoulder and upper arm level, left arm, sequela



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Code	Description
S46.809S	Unspecified injury of other muscles, fascia and tendons at shoulder and upper arm level, unspecified arm, sequela
S46.811A	Strain of other muscles, fascia and tendons at shoulder and upper arm level, right arm, initial encounter
S46.811S	Strain of other muscles, fascia and tendons at shoulder and upper arm level, right arm, sequela
S46.812A	Strain of other muscles, fascia and tendons at shoulder and upper arm level, left arm, initial encounter
S46.812S	Strain of other muscles, fascia and tendons at shoulder and upper arm level, left arm, sequela
S46.819A	Strain of other muscles, fascia and tendons at shoulder and upper arm level, unspecified arm, initial encounter
S46.819S	Strain of other muscles, fascia and tendons at shoulder and upper arm level, unspecified arm, sequela
S46.821S	Laceration of other muscles, fascia and tendons at shoulder and upper arm level, right arm, sequela
S46.822S	Laceration of other muscles, fascia and tendons at shoulder and upper arm level, left arm, sequela
S46.829S	Laceration of other muscles, fascia and tendons at shoulder and upper arm level, unspecified arm, sequela
S46.891S	Other injury of other muscles, fascia and tendons at shoulder and upper arm level, right arm, sequela
S46.892S	Other injury of other muscles, fascia and tendons at shoulder and upper arm level, left arm, sequela
S46.899S	Other injury of other muscles, fascia and tendons at shoulder and upper arm level, unspecified arm, sequela
S46.901S	Unspecified injury of unspecified muscle, fascia and tendon at shoulder and upper arm level, right arm, sequela
S46.902S	Unspecified injury of unspecified muscle, fascia and tendon at shoulder and upper arm level, left arm, sequela
S46.909S	Unspecified injury of unspecified muscle, fascia and tendon at shoulder and upper arm level, unspecified arm, sequela
S46.911A	Strain of unspecified muscle, fascia and tendon at shoulder and upper arm level, right arm, initial encounter
S46.911S	Strain of unspecified muscle, fascia and tendon at shoulder and upper arm level, right arm, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S46.912A	Strain of unspecified muscle, fascia and tendon at shoulder and upper arm level, left arm, initial encounter
S46.912S	Strain of unspecified muscle, fascia and tendon at shoulder and upper arm level, left arm, sequela
S46.919A	Strain of unspecified muscle, fascia and tendon at shoulder and upper arm level, unspecified arm, initial encounter
S46.919S	Strain of unspecified muscle, fascia and tendon at shoulder and upper arm level, unspecified arm, sequela
S46.921S	Laceration of unspecified muscle, fascia and tendon at shoulder and upper arm level, right arm, sequela
S46.922S	Laceration of unspecified muscle, fascia and tendon at shoulder and upper arm level, left arm, sequela
S46.929S	Laceration of unspecified muscle, fascia and tendon at shoulder and upper arm level, unspecified arm, sequela
S46.991S	Other injury of unspecified muscle, fascia and tendon at shoulder and upper arm level, right arm, sequela
S46.992S	Other injury of unspecified muscle, fascia and tendon at shoulder and upper arm level, left arm, sequela
S46.999S	Other injury of unspecified muscle, fascia and tendon at shoulder and upper arm level, unspecified arm, sequela
S47.1XXS	Crushing injury of right shoulder and upper arm, sequela
S47.2XXS	Crushing injury of left shoulder and upper arm, sequela
S47.9XXS	Crushing injury of shoulder and upper arm, unspecified arm, sequela
S48.011S	Complete traumatic amputation at right shoulder joint, sequela
S48.012S	Complete traumatic amputation at left shoulder joint, sequela
S48.019S	Complete traumatic amputation at unspecified shoulder joint, sequela
S48.021S	Partial traumatic amputation at right shoulder joint, sequela
S48.022S	Partial traumatic amputation at left shoulder joint, sequela
S48.029S	Partial traumatic amputation at unspecified shoulder joint, sequela
S48.111S	Complete traumatic amputation at level between right shoulder and elbow, sequela
S48.112S	Complete traumatic amputation at level between left shoulder and elbow, sequela
S48.119S	Complete traumatic amputation at level between unspecified shoulder and elbow, sequela
S48.121S	Partial traumatic amputation at level between right shoulder and elbow, sequela
S48.122S	Partial traumatic amputation at level between left shoulder and elbow, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S48.129S	Partial traumatic amputation at level between unspecified shoulder and elbow, sequela
S48.911S	Complete traumatic amputation of right shoulder and upper arm, level unspecified, sequela
S48.912S	Complete traumatic amputation of left shoulder and upper arm, level unspecified, sequela
S48.919S	Complete traumatic amputation of unspecified shoulder and upper arm, level unspecified, sequela
S48.921S	Partial traumatic amputation of right shoulder and upper arm, level unspecified, sequela
S48.922S	Partial traumatic amputation of left shoulder and upper arm, level unspecified, sequela
S48.929S	Partial traumatic amputation of unspecified shoulder and upper arm, level unspecified, sequela
S49.001D	Unspecified physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.001G	Unspecified physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.001S	Unspecified physeal fracture of upper end of humerus, right arm, sequela
S49.002D	Unspecified physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.002G	Unspecified physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.002S	Unspecified physeal fracture of upper end of humerus, left arm, sequela
S49.009D	Unspecified physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.009G	Unspecified physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.009S	Unspecified physeal fracture of upper end of humerus, unspecified arm, sequela
S49.011D	Salter-Harris Type I physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.011G	Salter-Harris Type I physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.011S	Salter-Harris Type I physeal fracture of upper end of humerus, right arm, sequela
S49.012D	Salter-Harris Type I physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.012G	Salter-Harris Type I physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.012S	Salter-Harris Type I physeal fracture of upper end of humerus, left arm, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S49.019D	Salter-Harris Type I physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.019G	Salter-Harris Type I physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.019S	Salter-Harris Type I physeal fracture of upper end of humerus, unspecified arm, sequela
S49.021D	Salter-Harris Type II physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.021G	Salter-Harris Type II physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.021S	Salter-Harris Type II physeal fracture of upper end of humerus, right arm, sequela
S49.022D	Salter-Harris Type II physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.022G	Salter-Harris Type II physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.022S	Salter-Harris Type II physeal fracture of upper end of humerus, left arm, sequela
S49.029D	Salter-Harris Type II physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.029G	Salter-Harris Type II physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.029S	Salter-Harris Type II physeal fracture of upper end of humerus, unspecified arm, sequela
S49.031D	Salter-Harris Type III physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.031G	Salter-Harris Type III physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.031S	Salter-Harris Type III physeal fracture of upper end of humerus, right arm, sequela
S49.032D	Salter-Harris Type III physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.032G	Salter-Harris Type III physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.032S	Salter-Harris Type III physeal fracture of upper end of humerus, left arm, sequela
S49.039D	Salter-Harris Type III physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.039G	Salter-Harris Type III physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.039S	Salter-Harris Type III physeal fracture of upper end of humerus, unspecified arm, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S49.041D	Salter-Harris Type IV physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.041G	Salter-Harris Type IV physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.041S	Salter-Harris Type IV physeal fracture of upper end of humerus, right arm, sequela
S49.042D	Salter-Harris Type IV physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.042G	Salter-Harris Type IV physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.042S	Salter-Harris Type IV physeal fracture of upper end of humerus, left arm, sequela
S49.049D	Salter-Harris Type IV physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.049G	Salter-Harris Type IV physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.049S	Salter-Harris Type IV physeal fracture of upper end of humerus, unspecified arm, sequela
S49.091D	Other physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.091G	Other physeal fracture of upper end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.091S	Other physeal fracture of upper end of humerus, right arm, sequela
S49.092D	Other physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.092G	Other physeal fracture of upper end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.092S	Other physeal fracture of upper end of humerus, left arm, sequela
S49.099D	Other physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.099G	Other physeal fracture of upper end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.099S	Other physeal fracture of upper end of humerus, unspecified arm, sequela
S49.101D	Unspecified physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.101G	Unspecified physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.101S	Unspecified physeal fracture of lower end of humerus, right arm, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S49.102D	Unspecified physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.102G	Unspecified physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.102S	Unspecified physeal fracture of lower end of humerus, left arm, sequela
S49.109D	Unspecified physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.109G	Unspecified physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.109S	Unspecified physeal fracture of lower end of humerus, unspecified arm, sequela
S49.111D	Salter-Harris Type I physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.111G	Salter-Harris Type I physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.111S	Salter-Harris Type I physeal fracture of lower end of humerus, right arm, sequela
S49.112D	Salter-Harris Type I physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.112G	Salter-Harris Type I physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.112S	Salter-Harris Type I physeal fracture of lower end of humerus, left arm, sequela
S49.119D	Salter-Harris Type I physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.119G	Salter-Harris Type I physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.119S	Salter-Harris Type I physeal fracture of lower end of humerus, unspecified arm, sequela
S49.121D	Salter-Harris Type II physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.121G	Salter-Harris Type II physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.121S	Salter-Harris Type II physeal fracture of lower end of humerus, right arm, sequela
S49.122D	Salter-Harris Type II physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.122G	Salter-Harris Type II physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.122S	Salter-Harris Type II physeal fracture of lower end of humerus, left arm, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S49.129D	Salter-Harris Type II physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.129G	Salter-Harris Type II physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.129S	Salter-Harris Type II physeal fracture of lower end of humerus, unspecified arm, sequela
S49.131D	Salter-Harris Type III physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.131G	Salter-Harris Type III physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.131S	Salter-Harris Type III physeal fracture of lower end of humerus, right arm, sequela
S49.132D	Salter-Harris Type III physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.132G	Salter-Harris Type III physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.132S	Salter-Harris Type III physeal fracture of lower end of humerus, left arm, sequela
S49.139D	Salter-Harris Type III physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.139G	Salter-Harris Type III physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.139S	Salter-Harris Type III physeal fracture of lower end of humerus, unspecified arm, sequela
S49.141D	Salter-Harris Type IV physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.141G	Salter-Harris Type IV physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.141S	Salter-Harris Type IV physeal fracture of lower end of humerus, right arm, sequela
S49.142D	Salter-Harris Type IV physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.142G	Salter-Harris Type IV physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.142S	Salter-Harris Type IV physeal fracture of lower end of humerus, left arm, sequela
S49.149D	Salter-Harris Type IV physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.149G	Salter-Harris Type IV physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.149S	Salter-Harris Type IV physeal fracture of lower end of humerus, unspecified arm, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S49.191D	Other physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with routine healing
S49.191G	Other physeal fracture of lower end of humerus, right arm, subsequent encounter for fracture with delayed healing
S49.191S	Other physeal fracture of lower end of humerus, right arm, sequela
S49.192D	Other physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with routine healing
S49.192G	Other physeal fracture of lower end of humerus, left arm, subsequent encounter for fracture with delayed healing
S49.192S	Other physeal fracture of lower end of humerus, left arm, sequela
S49.199D	Other physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with routine healing
S49.199G	Other physeal fracture of lower end of humerus, unspecified arm, subsequent encounter for fracture with delayed healing
S49.199S	Other physeal fracture of lower end of humerus, unspecified arm, sequela
S49.80XS	Other specified injuries of shoulder and upper arm, unspecified arm, sequela
S49.81XS	Other specified injuries of right shoulder and upper arm, sequela
S49.82XS	Other specified injuries of left shoulder and upper arm, sequela
S49.90XS	Unspecified injury of shoulder and upper arm, unspecified arm, sequela
S49.91XS	Unspecified injury of right shoulder and upper arm, sequela
S49.92XS	Unspecified injury of left shoulder and upper arm, sequela
S50.00XS	Contusion of unspecified elbow, sequela
S50.01XS	Contusion of right elbow, sequela
S50.02XS	Contusion of left elbow, sequela
S50.10XS	Contusion of unspecified forearm, sequela
S50.11XS	Contusion of right forearm, sequela
S50.12XS	Contusion of left forearm, sequela
S50.311A	Abrasion of right elbow, initial encounter
S50.311S	Abrasion of right elbow, sequela
S50.312A	Abrasion of left elbow, initial encounter
S50.312S	Abrasion of left elbow, sequela
S50.319A	Abrasion of unspecified elbow, initial encounter

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S50.319S	Abrasion of unspecified elbow, sequela
S50.321A	Blister (nonthermal) of right elbow, initial encounter
S50.321S	Blister (nonthermal) of right elbow, sequela
S50.322A	Blister (nonthermal) of left elbow, initial encounter
S50.322S	Blister (nonthermal) of left elbow, sequela
S50.329A	Blister (nonthermal) of unspecified elbow, initial encounter
S50.329S	Blister (nonthermal) of unspecified elbow, sequela
S50.341A	External constriction of right elbow, initial encounter
S50.341S	External constriction of right elbow, sequela
S50.342A	External constriction of left elbow, initial encounter
S50.342S	External constriction of left elbow, sequela
S50.349A	External constriction of unspecified elbow, initial encounter
S50.349S	External constriction of unspecified elbow, sequela
S50.351A	Superficial foreign body of right elbow, initial encounter
S50.351S	Superficial foreign body of right elbow, sequela
S50.352A	Superficial foreign body of left elbow, initial encounter
S50.352S	Superficial foreign body of left elbow, sequela
S50.359A	Superficial foreign body of unspecified elbow, initial encounter
S50.359S	Superficial foreign body of unspecified elbow, sequela
S50.361A	Insect bite (nonvenomous) of right elbow, initial encounter
S50.361S	Insect bite (nonvenomous) of right elbow, sequela
S50.362A	Insect bite (nonvenomous) of left elbow, initial encounter
S50.362S	Insect bite (nonvenomous) of left elbow, sequela
S50.369A	Insect bite (nonvenomous) of unspecified elbow, initial encounter
S50.369S	Insect bite (nonvenomous) of unspecified elbow, sequela
S50.371A	Other superficial bite of right elbow, initial encounter
S50.371S	Other superficial bite of right elbow, sequela
S50.372A	Other superficial bite of left elbow, initial encounter
S50.372S	Other superficial bite of left elbow, sequela
S50.379A	Other superficial bite of unspecified elbow, initial encounter



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S50.379S	Other superficial bite of unspecified elbow, sequela
S50.811A	Abrasion of right forearm, initial encounter
S50.811S	Abrasion of right forearm, sequela
S50.812A	Abrasion of left forearm, initial encounter
S50.812S	Abrasion of left forearm, sequela
S50.819A	Abrasion of unspecified forearm, initial encounter
S50.819S	Abrasion of unspecified forearm, sequela
S50.821A	Blister (nonthermal) of right forearm, initial encounter
S50.821S	Blister (nonthermal) of right forearm, sequela
S50.822A	Blister (nonthermal) of left forearm, initial encounter
S50.822S	Blister (nonthermal) of left forearm, sequela
S50.829A	Blister (nonthermal) of unspecified forearm, initial encounter
S50.829S	Blister (nonthermal) of unspecified forearm, sequela
S50.841A	External constriction of right forearm, initial encounter
S50.841S	External constriction of right forearm, sequela
S50.842A	External constriction of left forearm, initial encounter
S50.842S	External constriction of left forearm, sequela
S50.849A	External constriction of unspecified forearm, initial encounter
S50.849S	External constriction of unspecified forearm, sequela
S50.851A	Superficial foreign body of right forearm, initial encounter
S50.851S	Superficial foreign body of right forearm, sequela
S50.852A	Superficial foreign body of left forearm, initial encounter
S50.852S	Superficial foreign body of left forearm, sequela
S50.859A	Superficial foreign body of unspecified forearm, initial encounter
S50.859S	Superficial foreign body of unspecified forearm, sequela
S50.861A	Insect bite (nonvenomous) of right forearm, initial encounter
S50.861S	Insect bite (nonvenomous) of right forearm, sequela
S50.862A	Insect bite (nonvenomous) of left forearm, initial encounter
S50.862S	Insect bite (nonvenomous) of left forearm, sequela
S50.869A	Insect bite (nonvenomous) of unspecified forearm, initial encounter



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Code	Description
S50.869S	Insect bite (nonvenomous) of unspecified forearm, sequela
S50.871A	Other superficial bite of right forearm, initial encounter
S50.871S	Other superficial bite of right forearm, sequela
S50.872A	Other superficial bite of left forearm, initial encounter
S50.872S	Other superficial bite of left forearm, sequela
S50.879A	Other superficial bite of unspecified forearm, initial encounter
S50.879S	Other superficial bite of unspecified forearm, sequela
S50.901A	Unspecified superficial injury of right elbow, initial encounter
S50.901S	Unspecified superficial injury of right elbow, sequela
S50.902A	Unspecified superficial injury of left elbow, initial encounter
S50.902S	Unspecified superficial injury of left elbow, sequela
S50.909A	Unspecified superficial injury of unspecified elbow, initial encounter
S50.909S	Unspecified superficial injury of unspecified elbow, sequela
S50.911A	Unspecified superficial injury of right forearm, initial encounter
S50.911S	Unspecified superficial injury of right forearm, sequela
S50.912A	Unspecified superficial injury of left forearm, initial encounter
S50.912S	Unspecified superficial injury of left forearm, sequela
S50.919A	Unspecified superficial injury of unspecified forearm, initial encounter
S50.919S	Unspecified superficial injury of unspecified forearm, sequela
S51.001S	Unspecified open wound of right elbow, sequela
S51.002S	Unspecified open wound of left elbow, sequela
S51.009A	Unspecified open wound of unspecified elbow, initial encounter
S51.009S	Unspecified open wound of unspecified elbow, sequela
S51.011S	Laceration without foreign body of right elbow, sequela
S51.012S	Laceration without foreign body of left elbow, sequela
S51.019S	Laceration without foreign body of unspecified elbow, sequela
S51.021S	Laceration with foreign body of right elbow, sequela
S51.022S	Laceration with foreign body of left elbow, sequela
S51.029S	Laceration with foreign body of unspecified elbow, sequela
S51.031S	Puncture wound without foreign body of right elbow, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S51.032S	Puncture wound without foreign body of left elbow, sequela
S51.039S	Puncture wound without foreign body of unspecified elbow, sequela
S51.041S	Puncture wound with foreign body of right elbow, sequela
S51.042S	Puncture wound with foreign body of left elbow, sequela
S51.049S	Puncture wound with foreign body of unspecified elbow, sequela
S51.051S	Open bite, right elbow, sequela
S51.052S	Open bite, left elbow, sequela
S51.059S	Open bite, unspecified elbow, sequela
S51.801S	Unspecified open wound of right forearm, sequela
S51.802S	Unspecified open wound of left forearm, sequela
S51.809S	Unspecified open wound of unspecified forearm, sequela
S51.811S	Laceration without foreign body of right forearm, sequela
S51.812S	Laceration without foreign body of left forearm, sequela
S51.819S	Laceration without foreign body of unspecified forearm, sequela
S51.821S	Laceration with foreign body of right forearm, sequela
S51.822S	Laceration with foreign body of left forearm, sequela
S51.829S	Laceration with foreign body of unspecified forearm, sequela
S51.831S	Puncture wound without foreign body of right forearm, sequela
S51.832S	Puncture wound without foreign body of left forearm, sequela
S51.839S	Puncture wound without foreign body of unspecified forearm, sequela
S51.841S	Puncture wound with foreign body of right forearm, sequela
S51.842S	Puncture wound with foreign body of left forearm, sequela
S51.849S	Puncture wound with foreign body of unspecified forearm, sequela
S51.851S	Open bite of right forearm, sequela
S51.852S	Open bite of left forearm, sequela
S51.859S	Open bite of unspecified forearm, sequela
S52.001D	Unspecified fracture of upper end of right ulna, subsequent encounter for closed fracture with routine healing
S52.001E	Unspecified fracture of upper end of right ulna, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.001F	Unspecified fracture of upper end of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.001G	Unspecified fracture of upper end of right ulna, subsequent encounter for closed fracture with delayed healing
S52.001H	Unspecified fracture of upper end of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.001J	Unspecified fracture of upper end of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.001S	Unspecified fracture of upper end of right ulna, sequela
S52.002D	Unspecified fracture of upper end of left ulna, subsequent encounter for closed fracture with routine healing
S52.002E	Unspecified fracture of upper end of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.002F	Unspecified fracture of upper end of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.002G	Unspecified fracture of upper end of left ulna, subsequent encounter for closed fracture with delayed healing
S52.002H	Unspecified fracture of upper end of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.002J	Unspecified fracture of upper end of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.002S	Unspecified fracture of upper end of left ulna, sequela
S52.009D	Unspecified fracture of upper end of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.009E	Unspecified fracture of upper end of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.009F	Unspecified fracture of upper end of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.009G	Unspecified fracture of upper end of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.009H	Unspecified fracture of upper end of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.009J	Unspecified fracture of upper end of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.009S	Unspecified fracture of upper end of unspecified ulna, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.011D	Torus fracture of upper end of right ulna, subsequent encounter for fracture with routine healing
S52.011G	Torus fracture of upper end of right ulna, subsequent encounter for fracture with delayed healing
S52.011S	Torus fracture of upper end of right ulna, sequela
S52.012D	Torus fracture of upper end of left ulna, subsequent encounter for fracture with routine healing
S52.012G	Torus fracture of upper end of left ulna, subsequent encounter for fracture with delayed healing
S52.012S	Torus fracture of upper end of left ulna, sequela
S52.019D	Torus fracture of upper end of unspecified ulna, subsequent encounter for fracture with routine healing
S52.019G	Torus fracture of upper end of unspecified ulna, subsequent encounter for fracture with delayed healing
S52.019S	Torus fracture of upper end of unspecified ulna, sequela
S52.021D	Displaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for closed fracture with routine healing
S52.021E	Displaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.021F	Displaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.021G	Displaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for closed fracture with delayed healing
S52.021H	Displaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.021J	Displaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.021S	Displaced fracture of olecranon process without intraarticular extension of right ulna, sequela
S52.022D	Displaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for closed fracture with routine healing
S52.022E	Displaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.022F	Displaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.022G	Displaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for closed fracture with delayed healing
S52.022H	Displaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.022J	Displaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.022S	Displaced fracture of olecranon process without intraarticular extension of left ulna, sequela
S52.023D	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.023E	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.023F	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.023G	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.023H	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.023J	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.023S	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, sequela
S52.024D	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for closed fracture with routine healing
S52.024E	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.024F	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.024G	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for closed fracture with delayed healing
S52.024H	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.024J	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.024S	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, sequela

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.025D	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for closed fracture with routine healing
S52.025E	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.025F	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.025G	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for closed fracture with delayed healing
S52.025H	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.025J	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.025S	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, sequela
S52.026D	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.026E	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.026F	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.026G	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.026H	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.026J	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.026S	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, sequela
S52.031D	Displaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for closed fracture with routine healing
S52.031E	Displaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.031F	Displaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.031G	Displaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.031H	Displaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.031J	Displaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.031S	Displaced fracture of olecranon process with intraarticular extension of right ulna, sequela
S52.032D	Displaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for closed fracture with routine healing
S52.032E	Displaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.032F	Displaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.032G	Displaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for closed fracture with delayed healing
S52.032H	Displaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.032J	Displaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.032S	Displaced fracture of olecranon process with intraarticular extension of left ulna, sequela
S52.033D	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.033E	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.033F	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.033G	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.033H	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.033J	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.033S	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, sequela
S52.034D	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for closed fracture with routine healing
S52.034E	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.034F	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.034G	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for closed fracture with delayed healing
S52.034H	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.034J	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.034S	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, sequela
S52.035D	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for closed fracture with routine healing
S52.035E	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.035F	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.035G	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for closed fracture with delayed healing
S52.035H	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.035J	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.035S	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, sequela
S52.036D	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.036E	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.036F	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.036G	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.036H	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.036J	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.036S	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, sequela
S52.041D	Displaced fracture of coronoid process of right ulna, subsequent encounter for closed fracture with routine healing
S52.041E	Displaced fracture of coronoid process of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.041F	Displaced fracture of coronoid process of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.041G	Displaced fracture of coronoid process of right ulna, subsequent encounter for closed fracture with delayed healing
S52.041H	Displaced fracture of coronoid process of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.041J	Displaced fracture of coronoid process of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.041S	Displaced fracture of coronoid process of right ulna, sequela
S52.042D	Displaced fracture of coronoid process of left ulna, subsequent encounter for closed fracture with routine healing
S52.042E	Displaced fracture of coronoid process of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.042F	Displaced fracture of coronoid process of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.042G	Displaced fracture of coronoid process of left ulna, subsequent encounter for closed fracture with delayed healing
S52.042H	Displaced fracture of coronoid process of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.042J	Displaced fracture of coronoid process of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.042S	Displaced fracture of coronoid process of left ulna, sequela
S52.043D	Displaced fracture of coronoid process of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.043E	Displaced fracture of coronoid process of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.043F	Displaced fracture of coronoid process of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.043G	Displaced fracture of coronoid process of unspecified ulna, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.043H	Displaced fracture of coronoid process of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.043J	Displaced fracture of coronoid process of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.043S	Displaced fracture of coronoid process of unspecified ulna, sequela
S52.044D	Nondisplaced fracture of coronoid process of right ulna, subsequent encounter for closed fracture with routine healing
S52.044E	Nondisplaced fracture of coronoid process of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.044F	Nondisplaced fracture of coronoid process of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.044G	Nondisplaced fracture of coronoid process of right ulna, subsequent encounter for closed fracture with delayed healing
S52.044H	Nondisplaced fracture of coronoid process of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.044J	Nondisplaced fracture of coronoid process of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.044S	Nondisplaced fracture of coronoid process of right ulna, sequela
S52.045D	Nondisplaced fracture of coronoid process of left ulna, subsequent encounter for closed fracture with routine healing
S52.045E	Nondisplaced fracture of coronoid process of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.045F	Nondisplaced fracture of coronoid process of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.045G	Nondisplaced fracture of coronoid process of left ulna, subsequent encounter for closed fracture with delayed healing
S52.045H	Nondisplaced fracture of coronoid process of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.045J	Nondisplaced fracture of coronoid process of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.045S	Nondisplaced fracture of coronoid process of left ulna, sequela
S52.046D	Nondisplaced fracture of coronoid process of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.046E	Nondisplaced fracture of coronoid process of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.046F	Nondisplaced fracture of coronoid process of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.046G	Nondisplaced fracture of coronoid process of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.046H	Nondisplaced fracture of coronoid process of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.046J	Nondisplaced fracture of coronoid process of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.046S	Nondisplaced fracture of coronoid process of unspecified ulna, sequela
S52.091D	Other fracture of upper end of right ulna, subsequent encounter for closed fracture with routine healing
S52.091E	Other fracture of upper end of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.091F	Other fracture of upper end of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.091G	Other fracture of upper end of right ulna, subsequent encounter for closed fracture with delayed healing
S52.091H	Other fracture of upper end of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.091J	Other fracture of upper end of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.091S	Other fracture of upper end of right ulna, sequela
S52.092D	Other fracture of upper end of left ulna, subsequent encounter for closed fracture with routine healing
S52.092E	Other fracture of upper end of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.092F	Other fracture of upper end of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.092G	Other fracture of upper end of left ulna, subsequent encounter for closed fracture with delayed healing
S52.092H	Other fracture of upper end of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.092J	Other fracture of upper end of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.092S	Other fracture of upper end of left ulna, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.099D	Other fracture of upper end of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.099E	Other fracture of upper end of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.099F	Other fracture of upper end of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.099G	Other fracture of upper end of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.099H	Other fracture of upper end of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.099J	Other fracture of upper end of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.099S	Other fracture of upper end of unspecified ulna, sequela
S52.101D	Unspecified fracture of upper end of right radius, subsequent encounter for closed fracture with routine healing
S52.101E	Unspecified fracture of upper end of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.101F	Unspecified fracture of upper end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.101G	Unspecified fracture of upper end of right radius, subsequent encounter for closed fracture with delayed healing
S52.101H	Unspecified fracture of upper end of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.101J	Unspecified fracture of upper end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.101S	Unspecified fracture of upper end of right radius, sequela
S52.102D	Unspecified fracture of upper end of left radius, subsequent encounter for closed fracture with routine healing
S52.102E	Unspecified fracture of upper end of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.102F	Unspecified fracture of upper end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.102G	Unspecified fracture of upper end of left radius, subsequent encounter for closed fracture with delayed healing
S52.102H	Unspecified fracture of upper end of left radius, subsequent encounter for open fracture type I or II with delayed healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.102J	Unspecified fracture of upper end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.102S	Unspecified fracture of upper end of left radius, sequela
S52.109D	Unspecified fracture of upper end of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.109E	Unspecified fracture of upper end of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.109F	Unspecified fracture of upper end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.109G	Unspecified fracture of upper end of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.109H	Unspecified fracture of upper end of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.109J	Unspecified fracture of upper end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.109S	Unspecified fracture of upper end of unspecified radius, sequela
S52.111D	Torus fracture of upper end of right radius, subsequent encounter for fracture with routine healing
S52.111G	Torus fracture of upper end of right radius, subsequent encounter for fracture with delayed healing
S52.111S	Torus fracture of upper end of right radius, sequela
S52.112D	Torus fracture of upper end of left radius, subsequent encounter for fracture with routine healing
S52.112G	Torus fracture of upper end of left radius, subsequent encounter for fracture with delayed healing
S52.112S	Torus fracture of upper end of left radius, sequela
S52.119D	Torus fracture of upper end of unspecified radius, subsequent encounter for fracture with routine healing
S52.119G	Torus fracture of upper end of unspecified radius, subsequent encounter for fracture with delayed healing
S52.119S	Torus fracture of upper end of unspecified radius, sequela
S52.121D	Displaced fracture of head of right radius, subsequent encounter for closed fracture with routine healing
S52.121E	Displaced fracture of head of right radius, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.121F	Displaced fracture of head of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.121G	Displaced fracture of head of right radius, subsequent encounter for closed fracture with delayed healing
S52.121H	Displaced fracture of head of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.121J	Displaced fracture of head of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.121S	Displaced fracture of head of right radius, sequela
S52.122D	Displaced fracture of head of left radius, subsequent encounter for closed fracture with routine healing
S52.122E	Displaced fracture of head of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.122F	Displaced fracture of head of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.122G	Displaced fracture of head of left radius, subsequent encounter for closed fracture with delayed healing
S52.122H	Displaced fracture of head of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.122J	Displaced fracture of head of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.122S	Displaced fracture of head of left radius, sequela
S52.123D	Displaced fracture of head of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.123E	Displaced fracture of head of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.123F	Displaced fracture of head of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.123G	Displaced fracture of head of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.123H	Displaced fracture of head of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.123J	Displaced fracture of head of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.123S	Displaced fracture of head of unspecified radius, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.124D	Nondisplaced fracture of head of right radius, subsequent encounter for closed fracture with routine healing
S52.124E	Nondisplaced fracture of head of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.124F	Nondisplaced fracture of head of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.124G	Nondisplaced fracture of head of right radius, subsequent encounter for closed fracture with delayed healing
S52.124H	Nondisplaced fracture of head of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.124J	Nondisplaced fracture of head of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.124S	Nondisplaced fracture of head of right radius, sequela
S52.125D	Nondisplaced fracture of head of left radius, subsequent encounter for closed fracture with routine healing
S52.125E	Nondisplaced fracture of head of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.125F	Nondisplaced fracture of head of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.125G	Nondisplaced fracture of head of left radius, subsequent encounter for closed fracture with delayed healing
S52.125H	Nondisplaced fracture of head of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.125J	Nondisplaced fracture of head of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.125S	Nondisplaced fracture of head of left radius, sequela
S52.126D	Nondisplaced fracture of head of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.126E	Nondisplaced fracture of head of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.126F	Nondisplaced fracture of head of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.126G	Nondisplaced fracture of head of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.126H	Nondisplaced fracture of head of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing

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April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.126J	Nondisplaced fracture of head of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.126S	Nondisplaced fracture of head of unspecified radius, sequela
S52.131D	Displaced fracture of neck of right radius, subsequent encounter for closed fracture with routine healing
S52.131E	Displaced fracture of neck of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.131F	Displaced fracture of neck of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.131G	Displaced fracture of neck of right radius, subsequent encounter for closed fracture with delayed healing
S52.131H	Displaced fracture of neck of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.131J	Displaced fracture of neck of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.131S	Displaced fracture of neck of right radius, sequela
S52.132D	Displaced fracture of neck of left radius, subsequent encounter for closed fracture with routine healing
S52.132E	Displaced fracture of neck of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.132F	Displaced fracture of neck of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.132G	Displaced fracture of neck of left radius, subsequent encounter for closed fracture with delayed healing
S52.132H	Displaced fracture of neck of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.132J	Displaced fracture of neck of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.132S	Displaced fracture of neck of left radius, sequela
S52.133D	Displaced fracture of neck of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.133E	Displaced fracture of neck of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.133F	Displaced fracture of neck of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.133G	Displaced fracture of neck of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.133H	Displaced fracture of neck of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.133J	Displaced fracture of neck of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.133S	Displaced fracture of neck of unspecified radius, sequela
S52.134D	Nondisplaced fracture of neck of right radius, subsequent encounter for closed fracture with routine healing
S52.134E	Nondisplaced fracture of neck of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.134F	Nondisplaced fracture of neck of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.134G	Nondisplaced fracture of neck of right radius, subsequent encounter for closed fracture with delayed healing
S52.134H	Nondisplaced fracture of neck of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.134J	Nondisplaced fracture of neck of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.134S	Nondisplaced fracture of neck of right radius, sequela
S52.135D	Nondisplaced fracture of neck of left radius, subsequent encounter for closed fracture with routine healing
S52.135E	Nondisplaced fracture of neck of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.135F	Nondisplaced fracture of neck of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.135G	Nondisplaced fracture of neck of left radius, subsequent encounter for closed fracture with delayed healing
S52.135H	Nondisplaced fracture of neck of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.135J	Nondisplaced fracture of neck of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.135S	Nondisplaced fracture of neck of left radius, sequela
S52.136D	Nondisplaced fracture of neck of unspecified radius, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.136E	Nondisplaced fracture of neck of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.136F	Nondisplaced fracture of neck of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.136G	Nondisplaced fracture of neck of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.136H	Nondisplaced fracture of neck of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.136J	Nondisplaced fracture of neck of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.136S	Nondisplaced fracture of neck of unspecified radius, sequela
S52.181D	Other fracture of upper end of right radius, subsequent encounter for closed fracture with routine healing
S52.181E	Other fracture of upper end of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.181F	Other fracture of upper end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.181G	Other fracture of upper end of right radius, subsequent encounter for closed fracture with delayed healing
S52.181H	Other fracture of upper end of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.181J	Other fracture of upper end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.181S	Other fracture of upper end of right radius, sequela
S52.182D	Other fracture of upper end of left radius, subsequent encounter for closed fracture with routine healing
S52.182E	Other fracture of upper end of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.182F	Other fracture of upper end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.182G	Other fracture of upper end of left radius, subsequent encounter for closed fracture with delayed healing
S52.182H	Other fracture of upper end of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.182J	Other fracture of upper end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.182S	Other fracture of upper end of left radius, sequela
S52.189D	Other fracture of upper end of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.189E	Other fracture of upper end of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.189F	Other fracture of upper end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.189G	Other fracture of upper end of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.189H	Other fracture of upper end of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.189J	Other fracture of upper end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.189S	Other fracture of upper end of unspecified radius, sequela
S52.201D	Unspecified fracture of shaft of right ulna, subsequent encounter for closed fracture with routine healing
S52.201E	Unspecified fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.201F	Unspecified fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.201G	Unspecified fracture of shaft of right ulna, subsequent encounter for closed fracture with delayed healing
S52.201H	Unspecified fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.201J	Unspecified fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.201S	Unspecified fracture of shaft of right ulna, sequela
S52.202D	Unspecified fracture of shaft of left ulna, subsequent encounter for closed fracture with routine healing
S52.202E	Unspecified fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.202F	Unspecified fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.202G	Unspecified fracture of shaft of left ulna, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.202H	Unspecified fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.202J	Unspecified fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.202S	Unspecified fracture of shaft of left ulna, sequela
S52.209D	Unspecified fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.209E	Unspecified fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.209F	Unspecified fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.209G	Unspecified fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.209H	Unspecified fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.209J	Unspecified fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.209S	Unspecified fracture of shaft of unspecified ulna, sequela
S52.211D	Greenstick fracture of shaft of right ulna, subsequent encounter for fracture with routine healing
S52.211G	Greenstick fracture of shaft of right ulna, subsequent encounter for fracture with delayed healing
S52.211S	Greenstick fracture of shaft of right ulna, sequela
S52.212D	Greenstick fracture of shaft of left ulna, subsequent encounter for fracture with routine healing
S52.212G	Greenstick fracture of shaft of left ulna, subsequent encounter for fracture with delayed healing
S52.212S	Greenstick fracture of shaft of left ulna, sequela
S52.219D	Greenstick fracture of shaft of unspecified ulna, subsequent encounter for fracture with routine healing
S52.219G	Greenstick fracture of shaft of unspecified ulna, subsequent encounter for fracture with delayed healing
S52.219S	Greenstick fracture of shaft of unspecified ulna, sequela
S52.221D	Displaced transverse fracture of shaft of right ulna, subsequent encounter for closed fracture with routine healing



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Code	Description
S52.221E	Displaced transverse fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.221F	Displaced transverse fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.221G	Displaced transverse fracture of shaft of right ulna, subsequent encounter for closed fracture with delayed healing
S52.221H	Displaced transverse fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.221J	Displaced transverse fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.221S	Displaced transverse fracture of shaft of right ulna, sequela
S52.222D	Displaced transverse fracture of shaft of left ulna, subsequent encounter for closed fracture with routine healing
S52.222E	Displaced transverse fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.222F	Displaced transverse fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.222G	Displaced transverse fracture of shaft of left ulna, subsequent encounter for closed fracture with delayed healing
S52.222H	Displaced transverse fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.222J	Displaced transverse fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.222S	Displaced transverse fracture of shaft of left ulna, sequela
S52.223D	Displaced transverse fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.223E	Displaced transverse fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.223F	Displaced transverse fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.223G	Displaced transverse fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.223H	Displaced transverse fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.223J	Displaced transverse fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.223S	Displaced transverse fracture of shaft of unspecified ulna, sequela
S52.224D	Nondisplaced transverse fracture of shaft of right ulna, subsequent encounter for closed fracture with routine healing
S52.224E	Nondisplaced transverse fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.224F	Nondisplaced transverse fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.224G	Nondisplaced transverse fracture of shaft of right ulna, subsequent encounter for closed fracture with delayed healing
S52.224H	Nondisplaced transverse fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.224J	Nondisplaced transverse fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.224S	Nondisplaced transverse fracture of shaft of right ulna, sequela
S52.225D	Nondisplaced transverse fracture of shaft of left ulna, subsequent encounter for closed fracture with routine healing
S52.225E	Nondisplaced transverse fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.225F	Nondisplaced transverse fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.225G	Nondisplaced transverse fracture of shaft of left ulna, subsequent encounter for closed fracture with delayed healing
S52.225H	Nondisplaced transverse fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.225J	Nondisplaced transverse fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.225S	Nondisplaced transverse fracture of shaft of left ulna, sequela
S52.226D	Nondisplaced transverse fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.226E	Nondisplaced transverse fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.226F	Nondisplaced transverse fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.226G	Nondisplaced transverse fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.226H	Nondisplaced transverse fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.226J	Nondisplaced transverse fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.226S	Nondisplaced transverse fracture of shaft of unspecified ulna, sequela
S52.231D	Displaced oblique fracture of shaft of right ulna, subsequent encounter for closed fracture with routine healing
S52.231E	Displaced oblique fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.231F	Displaced oblique fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.231G	Displaced oblique fracture of shaft of right ulna, subsequent encounter for closed fracture with delayed healing
S52.231H	Displaced oblique fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.231J	Displaced oblique fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.231S	Displaced oblique fracture of shaft of right ulna, sequela
S52.232D	Displaced oblique fracture of shaft of left ulna, subsequent encounter for closed fracture with routine healing
S52.232E	Displaced oblique fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.232F	Displaced oblique fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.232G	Displaced oblique fracture of shaft of left ulna, subsequent encounter for closed fracture with delayed healing
S52.232H	Displaced oblique fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.232J	Displaced oblique fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.232S	Displaced oblique fracture of shaft of left ulna, sequela
S52.233D	Displaced oblique fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.233E	Displaced oblique fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S52.233F	Displaced oblique fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.233G	Displaced oblique fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.233H	Displaced oblique fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.233J	Displaced oblique fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.233S	Displaced oblique fracture of shaft of unspecified ulna, sequela
S52.234D	Nondisplaced oblique fracture of shaft of right ulna, subsequent encounter for closed fracture with routine healing
S52.234E	Nondisplaced oblique fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.234F	Nondisplaced oblique fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.234G	Nondisplaced oblique fracture of shaft of right ulna, subsequent encounter for closed fracture with delayed healing
S52.234H	Nondisplaced oblique fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.234J	Nondisplaced oblique fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.234S	Nondisplaced oblique fracture of shaft of right ulna, sequela
S52.235D	Nondisplaced oblique fracture of shaft of left ulna, subsequent encounter for closed fracture with routine healing
S52.235E	Nondisplaced oblique fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.235F	Nondisplaced oblique fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.235G	Nondisplaced oblique fracture of shaft of left ulna, subsequent encounter for closed fracture with delayed healing
S52.235H	Nondisplaced oblique fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.235J	Nondisplaced oblique fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.235S	Nondisplaced oblique fracture of shaft of left ulna, sequela



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Code	Description
S52.236D	Nondisplaced oblique fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.236E	Nondisplaced oblique fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.236F	Nondisplaced oblique fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.236G	Nondisplaced oblique fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.236H	Nondisplaced oblique fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.236J	Nondisplaced oblique fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.236S	Nondisplaced oblique fracture of shaft of unspecified ulna, sequela
S52.241D	Displaced spiral fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with routine healing
S52.241E	Displaced spiral fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.241F	Displaced spiral fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.241G	Displaced spiral fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with delayed healing
S52.241H	Displaced spiral fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.241J	Displaced spiral fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.241S	Displaced spiral fracture of shaft of ulna, right arm, sequela
S52.242D	Displaced spiral fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with routine healing
S52.242E	Displaced spiral fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.242F	Displaced spiral fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.242G	Displaced spiral fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with delayed healing
S52.242H	Displaced spiral fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with delayed healing



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Code	Description
S52.242J	Displaced spiral fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.242S	Displaced spiral fracture of shaft of ulna, left arm, sequela
S52.243D	Displaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.243E	Displaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.243F	Displaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.243G	Displaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.243H	Displaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.243J	Displaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.243S	Displaced spiral fracture of shaft of ulna, unspecified arm, sequela
S52.244D	Nondisplaced spiral fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with routine healing
S52.244E	Nondisplaced spiral fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.244F	Nondisplaced spiral fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.244G	Nondisplaced spiral fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with delayed healing
S52.244H	Nondisplaced spiral fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.244J	Nondisplaced spiral fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.244S	Nondisplaced spiral fracture of shaft of ulna, right arm, sequela
S52.245D	Nondisplaced spiral fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with routine healing
S52.245E	Nondisplaced spiral fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.245F	Nondisplaced spiral fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



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Code	Description
S52.245G	Nondisplaced spiral fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with delayed healing
S52.245H	Nondisplaced spiral fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.245J	Nondisplaced spiral fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.245S	Nondisplaced spiral fracture of shaft of ulna, left arm, sequela
S52.246D	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.246E	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.246F	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.246G	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.246H	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.246J	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.246S	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, sequela
S52.251D	Displaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with routine healing
S52.251E	Displaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.251F	Displaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.251G	Displaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with delayed healing
S52.251H	Displaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.251J	Displaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.251S	Displaced comminuted fracture of shaft of ulna, right arm, sequela
S52.252D	Displaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with routine healing



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Code	Description
S52.252E	Displaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.252F	Displaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.252G	Displaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with delayed healing
S52.252H	Displaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.252J	Displaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.252S	Displaced comminuted fracture of shaft of ulna, left arm, sequela
S52.253D	Displaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.253E	Displaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.253F	Displaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.253G	Displaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.253H	Displaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.253J	Displaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.253S	Displaced comminuted fracture of shaft of ulna, unspecified arm, sequela
S52.254D	Nondisplaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with routine healing
S52.254E	Nondisplaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.254F	Nondisplaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.254G	Nondisplaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with delayed healing
S52.254H	Nondisplaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.254J	Nondisplaced comminuted fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



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Code	Description
S52.254S	Nondisplaced comminuted fracture of shaft of ulna, right arm, sequela
S52.255D	Nondisplaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with routine healing
S52.255E	Nondisplaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.255F	Nondisplaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.255G	Nondisplaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with delayed healing
S52.255H	Nondisplaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.255J	Nondisplaced comminuted fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.255S	Nondisplaced comminuted fracture of shaft of ulna, left arm, sequela
S52.256D	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.256E	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.256F	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.256G	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.256H	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.256J	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.256S	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, sequela
S52.261D	Displaced segmental fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with routine healing
S52.261E	Displaced segmental fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.261F	Displaced segmental fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.261G	Displaced segmental fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.261H	Displaced segmental fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.261J	Displaced segmental fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.261S	Displaced segmental fracture of shaft of ulna, right arm, sequela
S52.262D	Displaced segmental fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with routine healing
S52.262E	Displaced segmental fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.262F	Displaced segmental fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.262G	Displaced segmental fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with delayed healing
S52.262H	Displaced segmental fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.262J	Displaced segmental fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.262S	Displaced segmental fracture of shaft of ulna, left arm, sequela
S52.263D	Displaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.263E	Displaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.263F	Displaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.263G	Displaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.263H	Displaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.263J	Displaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.263S	Displaced segmental fracture of shaft of ulna, unspecified arm, sequela
S52.264D	Nondisplaced segmental fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with routine healing
S52.264E	Nondisplaced segmental fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.264F	Nondisplaced segmental fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.264G	Nondisplaced segmental fracture of shaft of ulna, right arm, subsequent encounter for closed fracture with delayed healing
S52.264H	Nondisplaced segmental fracture of shaft of ulna, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.264J	Nondisplaced segmental fracture of shaft of ulna, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.264S	Nondisplaced segmental fracture of shaft of ulna, right arm, sequela
S52.265D	Nondisplaced segmental fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with routine healing
S52.265E	Nondisplaced segmental fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.265F	Nondisplaced segmental fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.265G	Nondisplaced segmental fracture of shaft of ulna, left arm, subsequent encounter for closed fracture with delayed healing
S52.265H	Nondisplaced segmental fracture of shaft of ulna, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.265J	Nondisplaced segmental fracture of shaft of ulna, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.265S	Nondisplaced segmental fracture of shaft of ulna, left arm, sequela
S52.266D	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.266E	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.266F	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.266G	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.266H	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.266J	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.266S	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.271D	Monteggia's fracture of right ulna, subsequent encounter for closed fracture with routine healing
S52.271E	Monteggia's fracture of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.271F	Monteggia's fracture of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.271G	Monteggia's fracture of right ulna, subsequent encounter for closed fracture with delayed healing
S52.271H	Monteggia's fracture of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.271J	Monteggia's fracture of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.271S	Monteggia's fracture of right ulna, sequela
S52.272D	Monteggia's fracture of left ulna, subsequent encounter for closed fracture with routine healing
S52.272E	Monteggia's fracture of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.272F	Monteggia's fracture of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.272G	Monteggia's fracture of left ulna, subsequent encounter for closed fracture with delayed healing
S52.272H	Monteggia's fracture of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.272J	Monteggia's fracture of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.272S	Monteggia's fracture of left ulna, sequela
S52.279D	Monteggia's fracture of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.279E	Monteggia's fracture of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.279F	Monteggia's fracture of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.279G	Monteggia's fracture of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.279H	Monteggia's fracture of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.279J	Monteggia's fracture of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.279S	Monteggia's fracture of unspecified ulna, sequela
S52.281D	Bent bone of right ulna, subsequent encounter for closed fracture with routine healing
S52.281E	Bent bone of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.281F	Bent bone of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.281G	Bent bone of right ulna, subsequent encounter for closed fracture with delayed healing
S52.281H	Bent bone of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.281J	Bent bone of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.281S	Bent bone of right ulna, sequela
S52.282D	Bent bone of left ulna, subsequent encounter for closed fracture with routine healing
S52.282E	Bent bone of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.282F	Bent bone of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.282G	Bent bone of left ulna, subsequent encounter for closed fracture with delayed healing
S52.282H	Bent bone of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.282J	Bent bone of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.282S	Bent bone of left ulna, sequela
S52.283D	Bent bone of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.283E	Bent bone of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.283F	Bent bone of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.283G	Bent bone of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.283H	Bent bone of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.283J	Bent bone of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.283S	Bent bone of unspecified ulna, sequela
S52.291D	Other fracture of shaft of right ulna, subsequent encounter for closed fracture with routine healing
S52.291E	Other fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.291F	Other fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.291G	Other fracture of shaft of right ulna, subsequent encounter for closed fracture with delayed healing
S52.291H	Other fracture of shaft of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.291J	Other fracture of shaft of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.291S	Other fracture of shaft of right ulna, sequela
S52.292D	Other fracture of shaft of left ulna, subsequent encounter for closed fracture with routine healing
S52.292E	Other fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.292F	Other fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.292G	Other fracture of shaft of left ulna, subsequent encounter for closed fracture with delayed healing
S52.292H	Other fracture of shaft of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.292J	Other fracture of shaft of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.292S	Other fracture of shaft of left ulna, sequela
S52.299D	Other fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.299E	Other fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.299F	Other fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.299G	Other fracture of shaft of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.299H	Other fracture of shaft of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.299J	Other fracture of shaft of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.299S	Other fracture of shaft of unspecified ulna, sequela
S52.301D	Unspecified fracture of shaft of right radius, subsequent encounter for closed fracture with routine healing
S52.301E	Unspecified fracture of shaft of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.301F	Unspecified fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.301G	Unspecified fracture of shaft of right radius, subsequent encounter for closed fracture with delayed healing
S52.301H	Unspecified fracture of shaft of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.301J	Unspecified fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.301S	Unspecified fracture of shaft of right radius, sequela
S52.302D	Unspecified fracture of shaft of left radius, subsequent encounter for closed fracture with routine healing
S52.302E	Unspecified fracture of shaft of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.302F	Unspecified fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.302G	Unspecified fracture of shaft of left radius, subsequent encounter for closed fracture with delayed healing
S52.302H	Unspecified fracture of shaft of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.302J	Unspecified fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.302S	Unspecified fracture of shaft of left radius, sequela
S52.309D	Unspecified fracture of shaft of unspecified radius, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.309E	Unspecified fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.309F	Unspecified fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.309G	Unspecified fracture of shaft of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.309H	Unspecified fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.309J	Unspecified fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.309S	Unspecified fracture of shaft of unspecified radius, sequela
S52.311D	Greenstick fracture of shaft of radius, right arm, subsequent encounter for fracture with routine healing
S52.311G	Greenstick fracture of shaft of radius, right arm, subsequent encounter for fracture with delayed healing
S52.311S	Greenstick fracture of shaft of radius, right arm, sequela
S52.312D	Greenstick fracture of shaft of radius, left arm, subsequent encounter for fracture with routine healing
S52.312G	Greenstick fracture of shaft of radius, left arm, subsequent encounter for fracture with delayed healing
S52.312S	Greenstick fracture of shaft of radius, left arm, sequela
S52.319D	Greenstick fracture of shaft of radius, unspecified arm, subsequent encounter for fracture with routine healing
S52.319G	Greenstick fracture of shaft of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S52.319S	Greenstick fracture of shaft of radius, unspecified arm, sequela
S52.321D	Displaced transverse fracture of shaft of right radius, subsequent encounter for closed fracture with routine healing
S52.321E	Displaced transverse fracture of shaft of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.321F	Displaced transverse fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.321G	Displaced transverse fracture of shaft of right radius, subsequent encounter for closed fracture with delayed healing
S52.321H	Displaced transverse fracture of shaft of right radius, subsequent encounter for open fracture type I or II with delayed healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.321J	Displaced transverse fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.321S	Displaced transverse fracture of shaft of right radius, sequela
S52.322D	Displaced transverse fracture of shaft of left radius, subsequent encounter for closed fracture with routine healing
S52.322E	Displaced transverse fracture of shaft of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.322F	Displaced transverse fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.322G	Displaced transverse fracture of shaft of left radius, subsequent encounter for closed fracture with delayed healing
S52.322H	Displaced transverse fracture of shaft of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.322J	Displaced transverse fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.322S	Displaced transverse fracture of shaft of left radius, sequela
S52.323D	Displaced transverse fracture of shaft of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.323E	Displaced transverse fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.323F	Displaced transverse fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.323G	Displaced transverse fracture of shaft of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.323H	Displaced transverse fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.323J	Displaced transverse fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.323S	Displaced transverse fracture of shaft of unspecified radius, sequela
S52.324D	Nondisplaced transverse fracture of shaft of right radius, subsequent encounter for closed fracture with routine healing
S52.324E	Nondisplaced transverse fracture of shaft of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.324F	Nondisplaced transverse fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.324G	Nondisplaced transverse fracture of shaft of right radius, subsequent encounter for closed fracture with delayed healing
S52.324H	Nondisplaced transverse fracture of shaft of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.324J	Nondisplaced transverse fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.324S	Nondisplaced transverse fracture of shaft of right radius, sequela
S52.325D	Nondisplaced transverse fracture of shaft of left radius, subsequent encounter for closed fracture with routine healing
S52.325E	Nondisplaced transverse fracture of shaft of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.325F	Nondisplaced transverse fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.325G	Nondisplaced transverse fracture of shaft of left radius, subsequent encounter for closed fracture with delayed healing
S52.325H	Nondisplaced transverse fracture of shaft of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.325J	Nondisplaced transverse fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.325S	Nondisplaced transverse fracture of shaft of left radius, sequela
S52.326D	Nondisplaced transverse fracture of shaft of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.326E	Nondisplaced transverse fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.326F	Nondisplaced transverse fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.326G	Nondisplaced transverse fracture of shaft of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.326H	Nondisplaced transverse fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.326J	Nondisplaced transverse fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.326S	Nondisplaced transverse fracture of shaft of unspecified radius, sequela
S52.331D	Displaced oblique fracture of shaft of right radius, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.331E	Displaced oblique fracture of shaft of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.331F	Displaced oblique fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.331G	Displaced oblique fracture of shaft of right radius, subsequent encounter for closed fracture with delayed healing
S52.331H	Displaced oblique fracture of shaft of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.331J	Displaced oblique fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.331S	Displaced oblique fracture of shaft of right radius, sequela
S52.332D	Displaced oblique fracture of shaft of left radius, subsequent encounter for closed fracture with routine healing
S52.332E	Displaced oblique fracture of shaft of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.332F	Displaced oblique fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.332G	Displaced oblique fracture of shaft of left radius, subsequent encounter for closed fracture with delayed healing
S52.332H	Displaced oblique fracture of shaft of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.332J	Displaced oblique fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.332S	Displaced oblique fracture of shaft of left radius, sequela
S52.333D	Displaced oblique fracture of shaft of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.333E	Displaced oblique fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.333F	Displaced oblique fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.333G	Displaced oblique fracture of shaft of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.333H	Displaced oblique fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.333J	Displaced oblique fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.333S	Displaced oblique fracture of shaft of unspecified radius, sequela
S52.334D	Nondisplaced oblique fracture of shaft of right radius, subsequent encounter for closed fracture with routine healing
S52.334E	Nondisplaced oblique fracture of shaft of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.334F	Nondisplaced oblique fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.334G	Nondisplaced oblique fracture of shaft of right radius, subsequent encounter for closed fracture with delayed healing
S52.334H	Nondisplaced oblique fracture of shaft of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.334J	Nondisplaced oblique fracture of shaft of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.334S	Nondisplaced oblique fracture of shaft of right radius, sequela
S52.335D	Nondisplaced oblique fracture of shaft of left radius, subsequent encounter for closed fracture with routine healing
S52.335E	Nondisplaced oblique fracture of shaft of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.335F	Nondisplaced oblique fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.335G	Nondisplaced oblique fracture of shaft of left radius, subsequent encounter for closed fracture with delayed healing
S52.335H	Nondisplaced oblique fracture of shaft of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.335J	Nondisplaced oblique fracture of shaft of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.335S	Nondisplaced oblique fracture of shaft of left radius, sequela
S52.336D	Nondisplaced oblique fracture of shaft of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.336E	Nondisplaced oblique fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.336F	Nondisplaced oblique fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.336G	Nondisplaced oblique fracture of shaft of unspecified radius, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.336H	Nondisplaced oblique fracture of shaft of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.336J	Nondisplaced oblique fracture of shaft of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.336S	Nondisplaced oblique fracture of shaft of unspecified radius, sequela
S52.341D	Displaced spiral fracture of shaft of radius, right arm, subsequent encounter for closed fracture with routine healing
S52.341E	Displaced spiral fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.341F	Displaced spiral fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.341G	Displaced spiral fracture of shaft of radius, right arm, subsequent encounter for closed fracture with delayed healing
S52.341H	Displaced spiral fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.341J	Displaced spiral fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.341S	Displaced spiral fracture of shaft of radius, right arm, sequela
S52.342D	Displaced spiral fracture of shaft of radius, left arm, subsequent encounter for closed fracture with routine healing
S52.342E	Displaced spiral fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.342F	Displaced spiral fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.342G	Displaced spiral fracture of shaft of radius, left arm, subsequent encounter for closed fracture with delayed healing
S52.342H	Displaced spiral fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.342J	Displaced spiral fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.342S	Displaced spiral fracture of shaft of radius, left arm, sequela
S52.343D	Displaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.343E	Displaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.343F	Displaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.343G	Displaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.343H	Displaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.343J	Displaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.343S	Displaced spiral fracture of shaft of radius, unspecified arm, sequela
S52.344D	Nondisplaced spiral fracture of shaft of radius, right arm, subsequent encounter for closed fracture with routine healing
S52.344E	Nondisplaced spiral fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.344F	Nondisplaced spiral fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.344G	Nondisplaced spiral fracture of shaft of radius, right arm, subsequent encounter for closed fracture with delayed healing
S52.344H	Nondisplaced spiral fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.344J	Nondisplaced spiral fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.344S	Nondisplaced spiral fracture of shaft of radius, right arm, sequela
S52.345D	Nondisplaced spiral fracture of shaft of radius, left arm, subsequent encounter for closed fracture with routine healing
S52.345E	Nondisplaced spiral fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.345F	Nondisplaced spiral fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.345G	Nondisplaced spiral fracture of shaft of radius, left arm, subsequent encounter for closed fracture with delayed healing
S52.345H	Nondisplaced spiral fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.345J	Nondisplaced spiral fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.345S	Nondisplaced spiral fracture of shaft of radius, left arm, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.346D	Nondisplaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.346E	Nondisplaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.346F	Nondisplaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.346G	Nondisplaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.346H	Nondisplaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.346J	Nondisplaced spiral fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.346S	Nondisplaced spiral fracture of shaft of radius, unspecified arm, sequela
S52.351D	Displaced comminuted fracture of shaft of radius, right arm, subsequent encounter for closed fracture with routine healing
S52.351E	Displaced comminuted fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.351F	Displaced comminuted fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.351G	Displaced comminuted fracture of shaft of radius, right arm, subsequent encounter for closed fracture with delayed healing
S52.351H	Displaced comminuted fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.351J	Displaced comminuted fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.351S	Displaced comminuted fracture of shaft of radius, right arm, sequela
S52.352D	Displaced comminuted fracture of shaft of radius, left arm, subsequent encounter for closed fracture with routine healing
S52.352E	Displaced comminuted fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.352F	Displaced comminuted fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.352G	Displaced comminuted fracture of shaft of radius, left arm, subsequent encounter for closed fracture with delayed healing
S52.352H	Displaced comminuted fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.352J	Displaced comminuted fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.352S	Displaced comminuted fracture of shaft of radius, left arm, sequela
S52.353D	Displaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.353E	Displaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.353F	Displaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.353G	Displaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.353H	Displaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.353J	Displaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.353S	Displaced comminuted fracture of shaft of radius, unspecified arm, sequela
S52.354D	Nondisplaced comminuted fracture of shaft of radius, right arm, subsequent encounter for closed fracture with routine healing
S52.354E	Nondisplaced comminuted fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.354F	Nondisplaced comminuted fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.354G	Nondisplaced comminuted fracture of shaft of radius, right arm, subsequent encounter for closed fracture with delayed healing
S52.354H	Nondisplaced comminuted fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.354J	Nondisplaced comminuted fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.354S	Nondisplaced comminuted fracture of shaft of radius, right arm, sequela
S52.355D	Nondisplaced comminuted fracture of shaft of radius, left arm, subsequent encounter for closed fracture with routine healing
S52.355E	Nondisplaced comminuted fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.355F	Nondisplaced comminuted fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.355G	Nondisplaced comminuted fracture of shaft of radius, left arm, subsequent encounter for closed fracture with delayed healing
S52.355H	Nondisplaced comminuted fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.355J	Nondisplaced comminuted fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.355S	Nondisplaced comminuted fracture of shaft of radius, left arm, sequela
S52.356D	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.356E	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.356F	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.356G	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.356H	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.356J	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.356S	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, sequela
S52.361D	Displaced segmental fracture of shaft of radius, right arm, subsequent encounter for closed fracture with routine healing
S52.361E	Displaced segmental fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.361F	Displaced segmental fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.361G	Displaced segmental fracture of shaft of radius, right arm, subsequent encounter for closed fracture with delayed healing
S52.361H	Displaced segmental fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.361J	Displaced segmental fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.361S	Displaced segmental fracture of shaft of radius, right arm, sequela
S52.362D	Displaced segmental fracture of shaft of radius, left arm, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.362E	Displaced segmental fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.362F	Displaced segmental fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.362G	Displaced segmental fracture of shaft of radius, left arm, subsequent encounter for closed fracture with delayed healing
S52.362H	Displaced segmental fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.362J	Displaced segmental fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.362S	Displaced segmental fracture of shaft of radius, left arm, sequela
S52.363D	Displaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.363E	Displaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.363F	Displaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.363G	Displaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.363H	Displaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.363J	Displaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.363S	Displaced segmental fracture of shaft of radius, unspecified arm, sequela
S52.364D	Nondisplaced segmental fracture of shaft of radius, right arm, subsequent encounter for closed fracture with routine healing
S52.364E	Nondisplaced segmental fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with routine healing
S52.364F	Nondisplaced segmental fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.364G	Nondisplaced segmental fracture of shaft of radius, right arm, subsequent encounter for closed fracture with delayed healing
S52.364H	Nondisplaced segmental fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.364J	Nondisplaced segmental fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.364S	Nondisplaced segmental fracture of shaft of radius, right arm, sequela
S52.365D	Nondisplaced segmental fracture of shaft of radius, left arm, subsequent encounter for closed fracture with routine healing
S52.365E	Nondisplaced segmental fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.365F	Nondisplaced segmental fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.365G	Nondisplaced segmental fracture of shaft of radius, left arm, subsequent encounter for closed fracture with delayed healing
S52.365H	Nondisplaced segmental fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.365J	Nondisplaced segmental fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.365S	Nondisplaced segmental fracture of shaft of radius, left arm, sequela
S52.366D	Nondisplaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.366E	Nondisplaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.366F	Nondisplaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.366G	Nondisplaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.366H	Nondisplaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.366J	Nondisplaced segmental fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.366S	Nondisplaced segmental fracture of shaft of radius, unspecified arm, sequela
S52.371D	Galeazzi's fracture of right radius, subsequent encounter for closed fracture with routine healing
S52.371E	Galeazzi's fracture of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.371F	Galeazzi's fracture of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.371G	Galeazzi's fracture of right radius, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.371H	Galeazzi's fracture of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.371J	Galeazzi's fracture of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.371S	Galeazzi's fracture of right radius, sequela
S52.372D	Galeazzi's fracture of left radius, subsequent encounter for closed fracture with routine healing
S52.372E	Galeazzi's fracture of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.372F	Galeazzi's fracture of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.372G	Galeazzi's fracture of left radius, subsequent encounter for closed fracture with delayed healing
S52.372H	Galeazzi's fracture of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.372J	Galeazzi's fracture of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.372S	Galeazzi's fracture of left radius, sequela
S52.379D	Galeazzi's fracture of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.379E	Galeazzi's fracture of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.379F	Galeazzi's fracture of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.379G	Galeazzi's fracture of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.379H	Galeazzi's fracture of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.379J	Galeazzi's fracture of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.379S	Galeazzi's fracture of unspecified radius, sequela
S52.381D	Bent bone of right radius, subsequent encounter for closed fracture with routine healing
S52.381E	Bent bone of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.381F	Bent bone of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.381G	Bent bone of right radius, subsequent encounter for closed fracture with delayed healing
S52.381H	Bent bone of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.381J	Bent bone of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.381S	Bent bone of right radius, sequela
S52.382D	Bent bone of left radius, subsequent encounter for closed fracture with routine healing
S52.382E	Bent bone of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.382F	Bent bone of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.382G	Bent bone of left radius, subsequent encounter for closed fracture with delayed healing
S52.382H	Bent bone of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.382J	Bent bone of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.382S	Bent bone of left radius, sequela
S52.389D	Bent bone of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.389E	Bent bone of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.389F	Bent bone of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.389G	Bent bone of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.389H	Bent bone of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.389J	Bent bone of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.389S	Bent bone of unspecified radius, sequela
S52.391D	Other fracture of shaft of radius, right arm, subsequent encounter for closed fracture with routine healing
S52.391E	Other fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.391F	Other fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.391G	Other fracture of shaft of radius, right arm, subsequent encounter for closed fracture with delayed healing
S52.391H	Other fracture of shaft of radius, right arm, subsequent encounter for open fracture type I or II with delayed healing
S52.391J	Other fracture of shaft of radius, right arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.391S	Other fracture of shaft of radius, right arm, sequela
S52.392D	Other fracture of shaft of radius, left arm, subsequent encounter for closed fracture with routine healing
S52.392E	Other fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with routine healing
S52.392F	Other fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.392G	Other fracture of shaft of radius, left arm, subsequent encounter for closed fracture with delayed healing
S52.392H	Other fracture of shaft of radius, left arm, subsequent encounter for open fracture type I or II with delayed healing
S52.392J	Other fracture of shaft of radius, left arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.392S	Other fracture of shaft of radius, left arm, sequela
S52.399D	Other fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with routine healing
S52.399E	Other fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with routine healing
S52.399F	Other fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.399G	Other fracture of shaft of radius, unspecified arm, subsequent encounter for closed fracture with delayed healing
S52.399H	Other fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type I or II with delayed healing
S52.399J	Other fracture of shaft of radius, unspecified arm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.399S	Other fracture of shaft of radius, unspecified arm, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.501D	Unspecified fracture of the lower end of right radius, subsequent encounter for closed fracture with routine healing
S52.501E	Unspecified fracture of the lower end of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.501F	Unspecified fracture of the lower end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.501G	Unspecified fracture of the lower end of right radius, subsequent encounter for closed fracture with delayed healing
S52.501H	Unspecified fracture of the lower end of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.501J	Unspecified fracture of the lower end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.501S	Unspecified fracture of the lower end of right radius, sequela
S52.502D	Unspecified fracture of the lower end of left radius, subsequent encounter for closed fracture with routine healing
S52.502E	Unspecified fracture of the lower end of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.502F	Unspecified fracture of the lower end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.502G	Unspecified fracture of the lower end of left radius, subsequent encounter for closed fracture with delayed healing
S52.502H	Unspecified fracture of the lower end of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.502J	Unspecified fracture of the lower end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.502S	Unspecified fracture of the lower end of left radius, sequela
S52.509D	Unspecified fracture of the lower end of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.509E	Unspecified fracture of the lower end of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.509F	Unspecified fracture of the lower end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.509G	Unspecified fracture of the lower end of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.509H	Unspecified fracture of the lower end of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.509J	Unspecified fracture of the lower end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.509S	Unspecified fracture of the lower end of unspecified radius, sequela
S52.511D	Displaced fracture of right radial styloid process, subsequent encounter for closed fracture with routine healing
S52.511E	Displaced fracture of right radial styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.511F	Displaced fracture of right radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.511G	Displaced fracture of right radial styloid process, subsequent encounter for closed fracture with delayed healing
S52.511H	Displaced fracture of right radial styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.511J	Displaced fracture of right radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.511S	Displaced fracture of right radial styloid process, sequela
S52.512D	Displaced fracture of left radial styloid process, subsequent encounter for closed fracture with routine healing
S52.512E	Displaced fracture of left radial styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.512F	Displaced fracture of left radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.512G	Displaced fracture of left radial styloid process, subsequent encounter for closed fracture with delayed healing
S52.512H	Displaced fracture of left radial styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.512J	Displaced fracture of left radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.512S	Displaced fracture of left radial styloid process, sequela
S52.513D	Displaced fracture of unspecified radial styloid process, subsequent encounter for closed fracture with routine healing
S52.513E	Displaced fracture of unspecified radial styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.513F	Displaced fracture of unspecified radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.513G	Displaced fracture of unspecified radial styloid process, subsequent encounter for closed fracture with delayed healing
S52.513H	Displaced fracture of unspecified radial styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.513J	Displaced fracture of unspecified radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.513S	Displaced fracture of unspecified radial styloid process, sequela
S52.514D	Nondisplaced fracture of right radial styloid process, subsequent encounter for closed fracture with routine healing
S52.514E	Nondisplaced fracture of right radial styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.514F	Nondisplaced fracture of right radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.514G	Nondisplaced fracture of right radial styloid process, subsequent encounter for closed fracture with delayed healing
S52.514H	Nondisplaced fracture of right radial styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.514J	Nondisplaced fracture of right radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.514S	Nondisplaced fracture of right radial styloid process, sequela
S52.515D	Nondisplaced fracture of left radial styloid process, subsequent encounter for closed fracture with routine healing
S52.515E	Nondisplaced fracture of left radial styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.515F	Nondisplaced fracture of left radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.515G	Nondisplaced fracture of left radial styloid process, subsequent encounter for closed fracture with delayed healing
S52.515H	Nondisplaced fracture of left radial styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.515J	Nondisplaced fracture of left radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.515S	Nondisplaced fracture of left radial styloid process, sequela
S52.516D	Nondisplaced fracture of unspecified radial styloid process, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.516E	Nondisplaced fracture of unspecified radial styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.516F	Nondisplaced fracture of unspecified radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.516G	Nondisplaced fracture of unspecified radial styloid process, subsequent encounter for closed fracture with delayed healing
S52.516H	Nondisplaced fracture of unspecified radial styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.516J	Nondisplaced fracture of unspecified radial styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.516S	Nondisplaced fracture of unspecified radial styloid process, sequela
S52.521D	Torus fracture of lower end of right radius, subsequent encounter for fracture with routine healing
S52.521G	Torus fracture of lower end of right radius, subsequent encounter for fracture with delayed healing
S52.521S	Torus fracture of lower end of right radius, sequela
S52.522D	Torus fracture of lower end of left radius, subsequent encounter for fracture with routine healing
S52.522G	Torus fracture of lower end of left radius, subsequent encounter for fracture with delayed healing
S52.522S	Torus fracture of lower end of left radius, sequela
S52.529D	Torus fracture of lower end of unspecified radius, subsequent encounter for fracture with routine healing
S52.529G	Torus fracture of lower end of unspecified radius, subsequent encounter for fracture with delayed healing
S52.529S	Torus fracture of lower end of unspecified radius, sequela
S52.531D	Colles' fracture of right radius, subsequent encounter for closed fracture with routine healing
S52.531E	Colles' fracture of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.531F	Colles' fracture of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.531G	Colles' fracture of right radius, subsequent encounter for closed fracture with delayed healing
S52.531H	Colles' fracture of right radius, subsequent encounter for open fracture type I or II with delayed healing

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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.531J	Colles' fracture of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.531S	Colles' fracture of right radius, sequela
S52.532D	Colles' fracture of left radius, subsequent encounter for closed fracture with routine healing
S52.532E	Colles' fracture of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.532F	Colles' fracture of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.532G	Colles' fracture of left radius, subsequent encounter for closed fracture with delayed healing
S52.532H	Colles' fracture of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.532J	Colles' fracture of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.532S	Colles' fracture of left radius, sequela
S52.539D	Colles' fracture of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.539E	Colles' fracture of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.539F	Colles' fracture of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.539G	Colles' fracture of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.539H	Colles' fracture of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.539J	Colles' fracture of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.539S	Colles' fracture of unspecified radius, sequela
S52.541D	Smith's fracture of right radius, subsequent encounter for closed fracture with routine healing
S52.541E	Smith's fracture of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.541F	Smith's fracture of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.541G	Smith's fracture of right radius, subsequent encounter for closed fracture with delayed healing

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Code	Description
S52.541H	Smith's fracture of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.541J	Smith's fracture of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.541S	Smith's fracture of right radius, sequela
S52.542D	Smith's fracture of left radius, subsequent encounter for closed fracture with routine healing
S52.542E	Smith's fracture of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.542F	Smith's fracture of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.542G	Smith's fracture of left radius, subsequent encounter for closed fracture with delayed healing
S52.542H	Smith's fracture of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.542J	Smith's fracture of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.542S	Smith's fracture of left radius, sequela
S52.549D	Smith's fracture of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.549E	Smith's fracture of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.549F	Smith's fracture of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.549G	Smith's fracture of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.549H	Smith's fracture of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.549J	Smith's fracture of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.549S	Smith's fracture of unspecified radius, sequela
S52.551D	Other extraarticular fracture of lower end of right radius, subsequent encounter for closed fracture with routine healing
S52.551E	Other extraarticular fracture of lower end of right radius, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S52.551F	Other extraarticular fracture of lower end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.551G	Other extraarticular fracture of lower end of right radius, subsequent encounter for closed fracture with delayed healing
S52.551H	Other extraarticular fracture of lower end of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.551J	Other extraarticular fracture of lower end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.551S	Other extraarticular fracture of lower end of right radius, sequela
S52.552D	Other extraarticular fracture of lower end of left radius, subsequent encounter for closed fracture with routine healing
S52.552E	Other extraarticular fracture of lower end of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.552F	Other extraarticular fracture of lower end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.552G	Other extraarticular fracture of lower end of left radius, subsequent encounter for closed fracture with delayed healing
S52.552H	Other extraarticular fracture of lower end of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.552J	Other extraarticular fracture of lower end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.552S	Other extraarticular fracture of lower end of left radius, sequela
S52.559D	Other extraarticular fracture of lower end of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.559E	Other extraarticular fracture of lower end of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.559F	Other extraarticular fracture of lower end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.559G	Other extraarticular fracture of lower end of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.559H	Other extraarticular fracture of lower end of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.559J	Other extraarticular fracture of lower end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.559S	Other extraarticular fracture of lower end of unspecified radius, sequela



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Code	Description
S52.561D	Barton's fracture of right radius, subsequent encounter for closed fracture with routine healing
S52.561E	Barton's fracture of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.561F	Barton's fracture of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.561G	Barton's fracture of right radius, subsequent encounter for closed fracture with delayed healing
S52.561H	Barton's fracture of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.561J	Barton's fracture of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.561S	Barton's fracture of right radius, sequela
S52.562D	Barton's fracture of left radius, subsequent encounter for closed fracture with routine healing
S52.562E	Barton's fracture of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.562F	Barton's fracture of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.562G	Barton's fracture of left radius, subsequent encounter for closed fracture with delayed healing
S52.562H	Barton's fracture of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.562J	Barton's fracture of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.562S	Barton's fracture of left radius, sequela
S52.569D	Barton's fracture of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.569E	Barton's fracture of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.569F	Barton's fracture of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.569G	Barton's fracture of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.569H	Barton's fracture of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing



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Code	Description
S52.569J	Barton's fracture of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.569S	Barton's fracture of unspecified radius, sequela
S52.571D	Other intraarticular fracture of lower end of right radius, subsequent encounter for closed fracture with routine healing
S52.571E	Other intraarticular fracture of lower end of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.571F	Other intraarticular fracture of lower end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.571G	Other intraarticular fracture of lower end of right radius, subsequent encounter for closed fracture with delayed healing
S52.571H	Other intraarticular fracture of lower end of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.571J	Other intraarticular fracture of lower end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.571S	Other intraarticular fracture of lower end of right radius, sequela
S52.572D	Other intraarticular fracture of lower end of left radius, subsequent encounter for closed fracture with routine healing
S52.572E	Other intraarticular fracture of lower end of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.572F	Other intraarticular fracture of lower end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.572G	Other intraarticular fracture of lower end of left radius, subsequent encounter for closed fracture with delayed healing
S52.572H	Other intraarticular fracture of lower end of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.572J	Other intraarticular fracture of lower end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.572S	Other intraarticular fracture of lower end of left radius, sequela
S52.579D	Other intraarticular fracture of lower end of unspecified radius, subsequent encounter for closed fracture with routine healing
S52.579E	Other intraarticular fracture of lower end of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.579F	Other intraarticular fracture of lower end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



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Code	Description
S52.579G	Other intraarticular fracture of lower end of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.579H	Other intraarticular fracture of lower end of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.579J	Other intraarticular fracture of lower end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.579S	Other intraarticular fracture of lower end of unspecified radius, sequela
S52.591D	Other fractures of lower end of right radius, subsequent encounter for closed fracture with routine healing
S52.591E	Other fractures of lower end of right radius, subsequent encounter for open fracture type I or II with routine healing
S52.591F	Other fractures of lower end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.591G	Other fractures of lower end of right radius, subsequent encounter for closed fracture with delayed healing
S52.591H	Other fractures of lower end of right radius, subsequent encounter for open fracture type I or II with delayed healing
S52.591J	Other fractures of lower end of right radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.591S	Other fractures of lower end of right radius, sequela
S52.592D	Other fractures of lower end of left radius, subsequent encounter for closed fracture with routine healing
S52.592E	Other fractures of lower end of left radius, subsequent encounter for open fracture type I or II with routine healing
S52.592F	Other fractures of lower end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.592G	Other fractures of lower end of left radius, subsequent encounter for closed fracture with delayed healing
S52.592H	Other fractures of lower end of left radius, subsequent encounter for open fracture type I or II with delayed healing
S52.592J	Other fractures of lower end of left radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.592S	Other fractures of lower end of left radius, sequela
S52.599D	Other fractures of lower end of unspecified radius, subsequent encounter for closed fracture with routine healing



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Code	Description
S52.599E	Other fractures of lower end of unspecified radius, subsequent encounter for open fracture type I or II with routine healing
S52.599F	Other fractures of lower end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.599G	Other fractures of lower end of unspecified radius, subsequent encounter for closed fracture with delayed healing
S52.599H	Other fractures of lower end of unspecified radius, subsequent encounter for open fracture type I or II with delayed healing
S52.599J	Other fractures of lower end of unspecified radius, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.599S	Other fractures of lower end of unspecified radius, sequela
S52.601D	Unspecified fracture of lower end of right ulna, subsequent encounter for closed fracture with routine healing
S52.601E	Unspecified fracture of lower end of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.601F	Unspecified fracture of lower end of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.601G	Unspecified fracture of lower end of right ulna, subsequent encounter for closed fracture with delayed healing
S52.601H	Unspecified fracture of lower end of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.601J	Unspecified fracture of lower end of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.601S	Unspecified fracture of lower end of right ulna, sequela
S52.602D	Unspecified fracture of lower end of left ulna, subsequent encounter for closed fracture with routine healing
S52.602E	Unspecified fracture of lower end of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.602F	Unspecified fracture of lower end of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.602G	Unspecified fracture of lower end of left ulna, subsequent encounter for closed fracture with delayed healing
S52.602H	Unspecified fracture of lower end of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.602J	Unspecified fracture of lower end of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing

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Code	Description
S52.602S	Unspecified fracture of lower end of left ulna, sequela
S52.609D	Unspecified fracture of lower end of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.609E	Unspecified fracture of lower end of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.609F	Unspecified fracture of lower end of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.609G	Unspecified fracture of lower end of unspecified ulna, subsequent encounter for closed fracture with delayed healing
S52.609H	Unspecified fracture of lower end of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.609J	Unspecified fracture of lower end of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.609S	Unspecified fracture of lower end of unspecified ulna, sequela
S52.611D	Displaced fracture of right ulna styloid process, subsequent encounter for closed fracture with routine healing
S52.611E	Displaced fracture of right ulna styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.611F	Displaced fracture of right ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.611G	Displaced fracture of right ulna styloid process, subsequent encounter for closed fracture with delayed healing
S52.611H	Displaced fracture of right ulna styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.611J	Displaced fracture of right ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.611S	Displaced fracture of right ulna styloid process, sequela
S52.612D	Displaced fracture of left ulna styloid process, subsequent encounter for closed fracture with routine healing
S52.612E	Displaced fracture of left ulna styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.612F	Displaced fracture of left ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.612G	Displaced fracture of left ulna styloid process, subsequent encounter for closed fracture with delayed healing



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Code	Description
S52.612H	Displaced fracture of left ulna styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.612J	Displaced fracture of left ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.612S	Displaced fracture of left ulna styloid process, sequela
S52.613D	Displaced fracture of unspecified ulna styloid process, subsequent encounter for closed fracture with routine healing
S52.613E	Displaced fracture of unspecified ulna styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.613F	Displaced fracture of unspecified ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.613G	Displaced fracture of unspecified ulna styloid process, subsequent encounter for closed fracture with delayed healing
S52.613H	Displaced fracture of unspecified ulna styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.613J	Displaced fracture of unspecified ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.613S	Displaced fracture of unspecified ulna styloid process, sequela
S52.614D	Nondisplaced fracture of right ulna styloid process, subsequent encounter for closed fracture with routine healing
S52.614E	Nondisplaced fracture of right ulna styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.614F	Nondisplaced fracture of right ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.614G	Nondisplaced fracture of right ulna styloid process, subsequent encounter for closed fracture with delayed healing
S52.614H	Nondisplaced fracture of right ulna styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.614J	Nondisplaced fracture of right ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.614S	Nondisplaced fracture of right ulna styloid process, sequela
S52.615D	Nondisplaced fracture of left ulna styloid process, subsequent encounter for closed fracture with routine healing
S52.615E	Nondisplaced fracture of left ulna styloid process, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S52.615F	Nondisplaced fracture of left ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.615G	Nondisplaced fracture of left ulna styloid process, subsequent encounter for closed fracture with delayed healing
S52.615H	Nondisplaced fracture of left ulna styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.615J	Nondisplaced fracture of left ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.615S	Nondisplaced fracture of left ulna styloid process, sequela
S52.616D	Nondisplaced fracture of unspecified ulna styloid process, subsequent encounter for closed fracture with routine healing
S52.616E	Nondisplaced fracture of unspecified ulna styloid process, subsequent encounter for open fracture type I or II with routine healing
S52.616F	Nondisplaced fracture of unspecified ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.616G	Nondisplaced fracture of unspecified ulna styloid process, subsequent encounter for closed fracture with delayed healing
S52.616H	Nondisplaced fracture of unspecified ulna styloid process, subsequent encounter for open fracture type I or II with delayed healing
S52.616J	Nondisplaced fracture of unspecified ulna styloid process, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.616S	Nondisplaced fracture of unspecified ulna styloid process, sequela
S52.621D	Torus fracture of lower end of right ulna, subsequent encounter for fracture with routine healing
S52.621G	Torus fracture of lower end of right ulna, subsequent encounter for fracture with delayed healing
S52.621S	Torus fracture of lower end of right ulna, sequela
S52.622D	Torus fracture of lower end of left ulna, subsequent encounter for fracture with routine healing
S52.622G	Torus fracture of lower end of left ulna, subsequent encounter for fracture with delayed healing
S52.622S	Torus fracture of lower end of left ulna, sequela
S52.629D	Torus fracture of lower end of unspecified ulna, subsequent encounter for fracture with routine healing
S52.629G	Torus fracture of lower end of unspecified ulna, subsequent encounter for fracture with delayed healing

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Code	Description
S52.629S	Torus fracture of lower end of unspecified ulna, sequela
S52.691D	Other fracture of lower end of right ulna, subsequent encounter for closed fracture with routine healing
S52.691E	Other fracture of lower end of right ulna, subsequent encounter for open fracture type I or II with routine healing
S52.691F	Other fracture of lower end of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.691G	Other fracture of lower end of right ulna, subsequent encounter for closed fracture with delayed healing
S52.691H	Other fracture of lower end of right ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.691J	Other fracture of lower end of right ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.691S	Other fracture of lower end of right ulna, sequela
S52.692D	Other fracture of lower end of left ulna, subsequent encounter for closed fracture with routine healing
S52.692E	Other fracture of lower end of left ulna, subsequent encounter for open fracture type I or II with routine healing
S52.692F	Other fracture of lower end of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.692G	Other fracture of lower end of left ulna, subsequent encounter for closed fracture with delayed healing
S52.692H	Other fracture of lower end of left ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.692J	Other fracture of lower end of left ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.692S	Other fracture of lower end of left ulna, sequela
S52.699D	Other fracture of lower end of unspecified ulna, subsequent encounter for closed fracture with routine healing
S52.699E	Other fracture of lower end of unspecified ulna, subsequent encounter for open fracture type I or II with routine healing
S52.699F	Other fracture of lower end of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.699G	Other fracture of lower end of unspecified ulna, subsequent encounter for closed fracture with delayed healing



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Code	Description
S52.699H	Other fracture of lower end of unspecified ulna, subsequent encounter for open fracture type I or II with delayed healing
S52.699J	Other fracture of lower end of unspecified ulna, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.699S	Other fracture of lower end of unspecified ulna, sequela
S52.90XD	Unspecified fracture of unspecified forearm, subsequent encounter for closed fracture with routine healing
S52.90XE	Unspecified fracture of unspecified forearm, subsequent encounter for open fracture type I or II with routine healing
S52.90XF	Unspecified fracture of unspecified forearm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.90XG	Unspecified fracture of unspecified forearm, subsequent encounter for closed fracture with delayed healing
S52.90XH	Unspecified fracture of unspecified forearm, subsequent encounter for open fracture type I or II with delayed healing
S52.90XJ	Unspecified fracture of unspecified forearm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.90XS	Unspecified fracture of unspecified forearm, sequela
S52.91XD	Unspecified fracture of right forearm, subsequent encounter for closed fracture with routine healing
S52.91XE	Unspecified fracture of right forearm, subsequent encounter for open fracture type I or II with routine healing
S52.91XF	Unspecified fracture of right forearm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.91XG	Unspecified fracture of right forearm, subsequent encounter for closed fracture with delayed healing
S52.91XH	Unspecified fracture of right forearm, subsequent encounter for open fracture type I or II with delayed healing
S52.91XJ	Unspecified fracture of right forearm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.91XS	Unspecified fracture of right forearm, sequela
S52.92XD	Unspecified fracture of left forearm, subsequent encounter for closed fracture with routine healing
S52.92XE	Unspecified fracture of left forearm, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S52.92XF	Unspecified fracture of left forearm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S52.92XG	Unspecified fracture of left forearm, subsequent encounter for closed fracture with delayed healing
S52.92XH	Unspecified fracture of left forearm, subsequent encounter for open fracture type I or II with delayed healing
S52.92XJ	Unspecified fracture of left forearm, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S52.92XS	Unspecified fracture of left forearm, sequela
S53.001A	Unspecified subluxation of right radial head, initial encounter
S53.001S	Unspecified subluxation of right radial head, sequela
S53.002A	Unspecified subluxation of left radial head, initial encounter
S53.002S	Unspecified subluxation of left radial head, sequela
S53.003A	Unspecified subluxation of unspecified radial head, initial encounter
S53.003S	Unspecified subluxation of unspecified radial head, sequela
S53.004A	Unspecified dislocation of right radial head, initial encounter
S53.004S	Unspecified dislocation of right radial head, sequela
S53.005A	Unspecified dislocation of left radial head, initial encounter
S53.005S	Unspecified dislocation of left radial head, sequela
S53.006A	Unspecified dislocation of unspecified radial head, initial encounter
S53.006S	Unspecified dislocation of unspecified radial head, sequela
S53.011A	Anterior subluxation of right radial head, initial encounter
S53.011S	Anterior subluxation of right radial head, sequela
S53.012A	Anterior subluxation of left radial head, initial encounter
S53.012S	Anterior subluxation of left radial head, sequela
S53.013A	Anterior subluxation of unspecified radial head, initial encounter
S53.013S	Anterior subluxation of unspecified radial head, sequela
S53.014A	Anterior dislocation of right radial head, initial encounter
S53.014S	Anterior dislocation of right radial head, sequela
S53.015A	Anterior dislocation of left radial head, initial encounter
S53.015S	Anterior dislocation of left radial head, sequela
S53.016A	Anterior dislocation of unspecified radial head, initial encounter

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Code	Description
S53.016S	Anterior dislocation of unspecified radial head, sequela
S53.021A	Posterior subluxation of right radial head, initial encounter
S53.021S	Posterior subluxation of right radial head, sequela
S53.022A	Posterior subluxation of left radial head, initial encounter
S53.022S	Posterior subluxation of left radial head, sequela
S53.023A	Posterior subluxation of unspecified radial head, initial encounter
S53.023S	Posterior subluxation of unspecified radial head, sequela
S53.024A	Posterior dislocation of right radial head, initial encounter
S53.024S	Posterior dislocation of right radial head, sequela
S53.025A	Posterior dislocation of left radial head, initial encounter
S53.025S	Posterior dislocation of left radial head, sequela
S53.026A	Posterior dislocation of unspecified radial head, initial encounter
S53.026S	Posterior dislocation of unspecified radial head, sequela
S53.031A	Nursemaid's elbow, right elbow, initial encounter
S53.031S	Nursemaid's elbow, right elbow, sequela
S53.032A	Nursemaid's elbow, left elbow, initial encounter
S53.032S	Nursemaid's elbow, left elbow, sequela
S53.033A	Nursemaid's elbow, unspecified elbow, initial encounter
S53.033S	Nursemaid's elbow, unspecified elbow, sequela
S53.091A	Other subluxation of right radial head, initial encounter
S53.091S	Other subluxation of right radial head, sequela
S53.092A	Other subluxation of left radial head, initial encounter
S53.092S	Other subluxation of left radial head, sequela
S53.093A	Other subluxation of unspecified radial head, initial encounter
S53.093S	Other subluxation of unspecified radial head, sequela
S53.094A	Other dislocation of right radial head, initial encounter
S53.094S	Other dislocation of right radial head, sequela
S53.095A	Other dislocation of left radial head, initial encounter
S53.095S	Other dislocation of left radial head, sequela
S53.096A	Other dislocation of unspecified radial head, initial encounter



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Code	Description
S53.096S	Other dislocation of unspecified radial head, sequela
S53.101A	Unspecified subluxation of right ulnohumeral joint, initial encounter
S53.101S	Unspecified subluxation of right ulnohumeral joint, sequela
S53.102A	Unspecified subluxation of left ulnohumeral joint, initial encounter
S53.102S	Unspecified subluxation of left ulnohumeral joint, sequela
S53.103A	Unspecified subluxation of unspecified ulnohumeral joint, initial encounter
S53.103S	Unspecified subluxation of unspecified ulnohumeral joint, sequela
S53.104A	Unspecified dislocation of right ulnohumeral joint, initial encounter
S53.104S	Unspecified dislocation of right ulnohumeral joint, sequela
S53.105A	Unspecified dislocation of left ulnohumeral joint, initial encounter
S53.105S	Unspecified dislocation of left ulnohumeral joint, sequela
S53.106A	Unspecified dislocation of unspecified ulnohumeral joint, initial encounter
S53.106S	Unspecified dislocation of unspecified ulnohumeral joint, sequela
S53.111A	Anterior subluxation of right ulnohumeral joint, initial encounter
S53.111S	Anterior subluxation of right ulnohumeral joint, sequela
S53.112A	Anterior subluxation of left ulnohumeral joint, initial encounter
S53.112S	Anterior subluxation of left ulnohumeral joint, sequela
S53.113A	Anterior subluxation of unspecified ulnohumeral joint, initial encounter
S53.113S	Anterior subluxation of unspecified ulnohumeral joint, sequela
S53.114A	Anterior dislocation of right ulnohumeral joint, initial encounter
S53.114S	Anterior dislocation of right ulnohumeral joint, sequela
S53.115A	Anterior dislocation of left ulnohumeral joint, initial encounter
S53.115S	Anterior dislocation of left ulnohumeral joint, sequela
S53.116A	Anterior dislocation of unspecified ulnohumeral joint, initial encounter
S53.116S	Anterior dislocation of unspecified ulnohumeral joint, sequela
S53.121A	Posterior subluxation of right ulnohumeral joint, initial encounter
S53.121S	Posterior subluxation of right ulnohumeral joint, sequela
S53.122A	Posterior subluxation of left ulnohumeral joint, initial encounter
S53.122S	Posterior subluxation of left ulnohumeral joint, sequela
S53.123A	Posterior subluxation of unspecified ulnohumeral joint, initial encounter

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Code	Description
S53.123S	Posterior subluxation of unspecified ulnohumeral joint, sequela
S53.124A	Posterior dislocation of right ulnohumeral joint, initial encounter
S53.124S	Posterior dislocation of right ulnohumeral joint, sequela
S53.125A	Posterior dislocation of left ulnohumeral joint, initial encounter
S53.125S	Posterior dislocation of left ulnohumeral joint, sequela
S53.126A	Posterior dislocation of unspecified ulnohumeral joint, initial encounter
S53.126S	Posterior dislocation of unspecified ulnohumeral joint, sequela
S53.131A	Medial subluxation of right ulnohumeral joint, initial encounter
S53.131S	Medial subluxation of right ulnohumeral joint, sequela
S53.132A	Medial subluxation of left ulnohumeral joint, initial encounter
S53.132S	Medial subluxation of left ulnohumeral joint, sequela
S53.133A	Medial subluxation of unspecified ulnohumeral joint, initial encounter
S53.133S	Medial subluxation of unspecified ulnohumeral joint, sequela
S53.134A	Medial dislocation of right ulnohumeral joint, initial encounter
S53.134S	Medial dislocation of right ulnohumeral joint, sequela
S53.135A	Medial dislocation of left ulnohumeral joint, initial encounter
S53.135S	Medial dislocation of left ulnohumeral joint, sequela
S53.136A	Medial dislocation of unspecified ulnohumeral joint, initial encounter
S53.136S	Medial dislocation of unspecified ulnohumeral joint, sequela
S53.141A	Lateral subluxation of right ulnohumeral joint, initial encounter
S53.141S	Lateral subluxation of right ulnohumeral joint, sequela
S53.142A	Lateral subluxation of left ulnohumeral joint, initial encounter
S53.142S	Lateral subluxation of left ulnohumeral joint, sequela
S53.143A	Lateral subluxation of unspecified ulnohumeral joint, initial encounter
S53.143S	Lateral subluxation of unspecified ulnohumeral joint, sequela
S53.144A	Lateral dislocation of right ulnohumeral joint, initial encounter
S53.144S	Lateral dislocation of right ulnohumeral joint, sequela
S53.145A	Lateral dislocation of left ulnohumeral joint, initial encounter
S53.145S	Lateral dislocation of left ulnohumeral joint, sequela
S53.146A	Lateral dislocation of unspecified ulnohumeral joint, initial encounter

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Code	Description
S53.146S	Lateral dislocation of unspecified ulnohumeral joint, sequela
S53.191A	Other subluxation of right ulnohumeral joint, initial encounter
S53.191S	Other subluxation of right ulnohumeral joint, sequela
S53.192A	Other subluxation of left ulnohumeral joint, initial encounter
S53.192S	Other subluxation of left ulnohumeral joint, sequela
S53.193A	Other subluxation of unspecified ulnohumeral joint, initial encounter
S53.193S	Other subluxation of unspecified ulnohumeral joint, sequela
S53.194A	Other dislocation of right ulnohumeral joint, initial encounter
S53.194S	Other dislocation of right ulnohumeral joint, sequela
S53.195A	Other dislocation of left ulnohumeral joint, initial encounter
S53.195S	Other dislocation of left ulnohumeral joint, sequela
S53.196A	Other dislocation of unspecified ulnohumeral joint, initial encounter
S53.196S	Other dislocation of unspecified ulnohumeral joint, sequela
S53.20XA	Traumatic rupture of unspecified radial collateral ligament, initial encounter
S53.20XS	Traumatic rupture of unspecified radial collateral ligament, sequela
S53.21XA	Traumatic rupture of right radial collateral ligament, initial encounter
S53.21XS	Traumatic rupture of right radial collateral ligament, sequela
S53.22XA	Traumatic rupture of left radial collateral ligament, initial encounter
S53.22XS	Traumatic rupture of left radial collateral ligament, sequela
S53.30XA	Traumatic rupture of unspecified ulnar collateral ligament, initial encounter
S53.30XS	Traumatic rupture of unspecified ulnar collateral ligament, sequela
S53.31XA	Traumatic rupture of right ulnar collateral ligament, initial encounter
S53.31XS	Traumatic rupture of right ulnar collateral ligament, sequela
S53.32XA	Traumatic rupture of left ulnar collateral ligament, initial encounter
S53.32XS	Traumatic rupture of left ulnar collateral ligament, sequela
S53.401A	Unspecified sprain of right elbow, initial encounter
S53.401S	Unspecified sprain of right elbow, sequela
S53.402A	Unspecified sprain of left elbow, initial encounter
S53.402S	Unspecified sprain of left elbow, sequela
S53.409A	Unspecified sprain of unspecified elbow, initial encounter

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Code	Description
S53.409S	Unspecified sprain of unspecified elbow, sequela
S53.411A	Radiohumeral (joint) sprain of right elbow, initial encounter
S53.411S	Radiohumeral (joint) sprain of right elbow, sequela
S53.412A	Radiohumeral (joint) sprain of left elbow, initial encounter
S53.412S	Radiohumeral (joint) sprain of left elbow, sequela
S53.419A	Radiohumeral (joint) sprain of unspecified elbow, initial encounter
S53.419S	Radiohumeral (joint) sprain of unspecified elbow, sequela
S53.421A	Ulnohumeral (joint) sprain of right elbow, initial encounter
S53.421S	Ulnohumeral (joint) sprain of right elbow, sequela
S53.422A	Ulnohumeral (joint) sprain of left elbow, initial encounter
S53.422S	Ulnohumeral (joint) sprain of left elbow, sequela
S53.429A	Ulnohumeral (joint) sprain of unspecified elbow, initial encounter
S53.429S	Ulnohumeral (joint) sprain of unspecified elbow, sequela
S53.431A	Radial collateral ligament sprain of right elbow, initial encounter
S53.431S	Radial collateral ligament sprain of right elbow, sequela
S53.432A	Radial collateral ligament sprain of left elbow, initial encounter
S53.432S	Radial collateral ligament sprain of left elbow, sequela
S53.439A	Radial collateral ligament sprain of unspecified elbow, initial encounter
S53.439S	Radial collateral ligament sprain of unspecified elbow, sequela
S53.441A	Ulnar collateral ligament sprain of right elbow, initial encounter
S53.441S	Ulnar collateral ligament sprain of right elbow, sequela
S53.442A	Ulnar collateral ligament sprain of left elbow, initial encounter
S53.442S	Ulnar collateral ligament sprain of left elbow, sequela
S53.449A	Ulnar collateral ligament sprain of unspecified elbow, initial encounter
S53.449S	Ulnar collateral ligament sprain of unspecified elbow, sequela
S53.491A	Other sprain of right elbow, initial encounter
S53.491S	Other sprain of right elbow, sequela
S53.492A	Other sprain of left elbow, initial encounter
S53.492S	Other sprain of left elbow, sequela
S53.499A	Other sprain of unspecified elbow, initial encounter

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Code	Description
S53.499S	Other sprain of unspecified elbow, sequela
S54.00XA	Injury of ulnar nerve at forearm level, unspecified arm, initial encounter
S54.00XS	Injury of ulnar nerve at forearm level, unspecified arm, sequela
S54.01XA	Injury of ulnar nerve at forearm level, right arm, initial encounter
S54.01XS	Injury of ulnar nerve at forearm level, right arm, sequela
S54.02XA	Injury of ulnar nerve at forearm level, left arm, initial encounter
S54.02XS	Injury of ulnar nerve at forearm level, left arm, sequela
S54.10XA	Injury of median nerve at forearm level, unspecified arm, initial encounter
S54.10XS	Injury of median nerve at forearm level, unspecified arm, sequela
S54.11XA	Injury of median nerve at forearm level, right arm, initial encounter
S54.11XS	Injury of median nerve at forearm level, right arm, sequela
S54.12XA	Injury of median nerve at forearm level, left arm, initial encounter
S54.12XS	Injury of median nerve at forearm level, left arm, sequela
S54.20XA	Injury of radial nerve at forearm level, unspecified arm, initial encounter
S54.20XS	Injury of radial nerve at forearm level, unspecified arm, sequela
S54.21XA	Injury of radial nerve at forearm level, right arm, initial encounter
S54.21XS	Injury of radial nerve at forearm level, right arm, sequela
S54.22XA	Injury of radial nerve at forearm level, left arm, initial encounter
S54.22XS	Injury of radial nerve at forearm level, left arm, sequela
S54.30XA	Injury of cutaneous sensory nerve at forearm level, unspecified arm, initial encounter
S54.30XS	Injury of cutaneous sensory nerve at forearm level, unspecified arm, sequela
S54.31XA	Injury of cutaneous sensory nerve at forearm level, right arm, initial encounter
S54.31XS	Injury of cutaneous sensory nerve at forearm level, right arm, sequela
S54.32XA	Injury of cutaneous sensory nerve at forearm level, left arm, initial encounter
S54.32XS	Injury of cutaneous sensory nerve at forearm level, left arm, sequela
S54.8X1A	Injury of other nerves at forearm level, right arm, initial encounter
S54.8X1S	Injury of other nerves at forearm level, right arm, sequela
S54.8X2A	Injury of other nerves at forearm level, left arm, initial encounter
S54.8X2S	Injury of other nerves at forearm level, left arm, sequela
S54.8X9A	Injury of other nerves at forearm level, unspecified arm, initial encounter



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Code	Description
S54.8X9S	Injury of other nerves at forearm level, unspecified arm, sequela
S54.90XA	Injury of unspecified nerve at forearm level, unspecified arm, initial encounter
S54.90XS	Injury of unspecified nerve at forearm level, unspecified arm, sequela
S54.91XA	Injury of unspecified nerve at forearm level, right arm, initial encounter
S54.91XS	Injury of unspecified nerve at forearm level, right arm, sequela
S54.92XA	Injury of unspecified nerve at forearm level, left arm, initial encounter
S54.92XS	Injury of unspecified nerve at forearm level, left arm, sequela
S55.001S	Unspecified injury of ulnar artery at forearm level, right arm, sequela
S55.002S	Unspecified injury of ulnar artery at forearm level, left arm, sequela
S55.009S	Unspecified injury of ulnar artery at forearm level, unspecified arm, sequela
S55.011S	Laceration of ulnar artery at forearm level, right arm, sequela
S55.012S	Laceration of ulnar artery at forearm level, left arm, sequela
S55.019S	Laceration of ulnar artery at forearm level, unspecified arm, sequela
S55.091S	Other specified injury of ulnar artery at forearm level, right arm, sequela
S55.092S	Other specified injury of ulnar artery at forearm level, left arm, sequela
S55.099S	Other specified injury of ulnar artery at forearm level, unspecified arm, sequela
S55.101S	Unspecified injury of radial artery at forearm level, right arm, sequela
S55.102S	Unspecified injury of radial artery at forearm level, left arm, sequela
S55.109S	Unspecified injury of radial artery at forearm level, unspecified arm, sequela
S55.111S	Laceration of radial artery at forearm level, right arm, sequela
S55.112S	Laceration of radial artery at forearm level, left arm, sequela
S55.119S	Laceration of radial artery at forearm level, unspecified arm, sequela
S55.191S	Other specified injury of radial artery at forearm level, right arm, sequela
S55.192S	Other specified injury of radial artery at forearm level, left arm, sequela
S55.199S	Other specified injury of radial artery at forearm level, unspecified arm, sequela
S55.201S	Unspecified injury of vein at forearm level, right arm, sequela
S55.202S	Unspecified injury of vein at forearm level, left arm, sequela
S55.209S	Unspecified injury of vein at forearm level, unspecified arm, sequela
S55.211S	Laceration of vein at forearm level, right arm, sequela
S55.212S	Laceration of vein at forearm level, left arm, sequela



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Code	Description
S55.219S	Laceration of vein at forearm level, unspecified arm, sequela
S55.291S	Other specified injury of vein at forearm level, right arm, sequela
S55.292S	Other specified injury of vein at forearm level, left arm, sequela
S55.299S	Other specified injury of vein at forearm level, unspecified arm, sequela
S55.801S	Unspecified injury of other blood vessels at forearm level, right arm, sequela
S55.802S	Unspecified injury of other blood vessels at forearm level, left arm, sequela
S55.809S	Unspecified injury of other blood vessels at forearm level, unspecified arm, sequela
S55.811S	Laceration of other blood vessels at forearm level, right arm, sequela
S55.812S	Laceration of other blood vessels at forearm level, left arm, sequela
S55.819S	Laceration of other blood vessels at forearm level, unspecified arm, sequela
S55.891S	Other specified injury of other blood vessels at forearm level, right arm, sequela
S55.892S	Other specified injury of other blood vessels at forearm level, left arm, sequela
S55.899S	Other specified injury of other blood vessels at forearm level, unspecified arm, sequela
S55.901S	Unspecified injury of unspecified blood vessel at forearm level, right arm, sequela
S55.902S	Unspecified injury of unspecified blood vessel at forearm level, left arm, sequela
S55.909S	Unspecified injury of unspecified blood vessel at forearm level, unspecified arm, sequela
S55.911S	Laceration of unspecified blood vessel at forearm level, right arm, sequela
S55.912S	Laceration of unspecified blood vessel at forearm level, left arm, sequela
S55.919S	Laceration of unspecified blood vessel at forearm level, unspecified arm, sequela
S55.991S	Other specified injury of unspecified blood vessel at forearm level, right arm, sequela
S55.992S	Other specified injury of unspecified blood vessel at forearm level, left arm, sequela
S55.999S	Other specified injury of unspecified blood vessel at forearm level, unspecified arm, sequela
S56.001S	Unspecified injury of flexor muscle, fascia and tendon of right thumb at forearm level, sequela
S56.002S	Unspecified injury of flexor muscle, fascia and tendon of left thumb at forearm level, sequela
S56.009S	Unspecified injury of flexor muscle, fascia and tendon of unspecified thumb at forearm level, sequela
S56.011A	Strain of flexor muscle, fascia and tendon of right thumb at forearm level, initial encounter
S56.011S	Strain of flexor muscle, fascia and tendon of right thumb at forearm level, sequela
S56.012A	Strain of flexor muscle, fascia and tendon of left thumb at forearm level, initial encounter

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Code	Description
S56.012S	Strain of flexor muscle, fascia and tendon of left thumb at forearm level, sequela
S56.019A	Strain of flexor muscle, fascia and tendon of unspecified thumb at forearm level, initial encounter
S56.019S	Strain of flexor muscle, fascia and tendon of unspecified thumb at forearm level, sequela
S56.021S	Laceration of flexor muscle, fascia and tendon of right thumb at forearm level, sequela
S56.022S	Laceration of flexor muscle, fascia and tendon of left thumb at forearm level, sequela
S56.029S	Laceration of flexor muscle, fascia and tendon of unspecified thumb at forearm level, sequela
S56.091S	Other injury of flexor muscle, fascia and tendon of right thumb at forearm level, sequela
S56.092S	Other injury of flexor muscle, fascia and tendon of left thumb at forearm level, sequela
S56.099S	Other injury of flexor muscle, fascia and tendon of unspecified thumb at forearm level, sequela
S56.101S	Unspecified injury of flexor muscle, fascia and tendon of right index finger at forearm level, sequela
S56.102S	Unspecified injury of flexor muscle, fascia and tendon of left index finger at forearm level, sequela
S56.103S	Unspecified injury of flexor muscle, fascia and tendon of right middle finger at forearm level, sequela
S56.104S	Unspecified injury of flexor muscle, fascia and tendon of left middle finger at forearm level, sequela
S56.105S	Unspecified injury of flexor muscle, fascia and tendon of right ring finger at forearm level, sequela
S56.106S	Unspecified injury of flexor muscle, fascia and tendon of left ring finger at forearm level, sequela
S56.107S	Unspecified injury of flexor muscle, fascia and tendon of right little finger at forearm level, sequela
S56.108S	Unspecified injury of flexor muscle, fascia and tendon of left little finger at forearm level, sequela
S56.109S	Unspecified injury of flexor muscle, fascia and tendon of unspecified finger at forearm level, sequela
S56.111A	Strain of flexor muscle, fascia and tendon of right index finger at forearm level, initial encounter
S56.111S	Strain of flexor muscle, fascia and tendon of right index finger at forearm level, sequela
S56.112A	Strain of flexor muscle, fascia and tendon of left index finger at forearm level, initial encounter



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Code	Description
S56.112S	Strain of flexor muscle, fascia and tendon of left index finger at forearm level, sequela
S56.113A	Strain of flexor muscle, fascia and tendon of right middle finger at forearm level, initial encounter
S56.113S	Strain of flexor muscle, fascia and tendon of right middle finger at forearm level, sequela
S56.114A	Strain of flexor muscle, fascia and tendon of left middle finger at forearm level, initial encounter
S56.114S	Strain of flexor muscle, fascia and tendon of left middle finger at forearm level, sequela
S56.115A	Strain of flexor muscle, fascia and tendon of right ring finger at forearm level, initial encounter
S56.115S	Strain of flexor muscle, fascia and tendon of right ring finger at forearm level, sequela
S56.116A	Strain of flexor muscle, fascia and tendon of left ring finger at forearm level, initial encounter
S56.116S	Strain of flexor muscle, fascia and tendon of left ring finger at forearm level, sequela
S56.117A	Strain of flexor muscle, fascia and tendon of right little finger at forearm level, initial encounter
S56.117S	Strain of flexor muscle, fascia and tendon of right little finger at forearm level, sequela
S56.118A	Strain of flexor muscle, fascia and tendon of left little finger at forearm level, initial encounter
S56.118S	Strain of flexor muscle, fascia and tendon of left little finger at forearm level, sequela
S56.119A	Strain of flexor muscle, fascia and tendon of finger of unspecified finger at forearm level, initial encounter
S56.119S	Strain of flexor muscle, fascia and tendon of finger of unspecified finger at forearm level, sequela
S56.121S	Laceration of flexor muscle, fascia and tendon of right index finger at forearm level, sequela
S56.122S	Laceration of flexor muscle, fascia and tendon of left index finger at forearm level, sequela
S56.123S	Laceration of flexor muscle, fascia and tendon of right middle finger at forearm level, sequela
S56.124S	Laceration of flexor muscle, fascia and tendon of left middle finger at forearm level, sequela
S56.125S	Laceration of flexor muscle, fascia and tendon of right ring finger at forearm level, sequela
S56.126S	Laceration of flexor muscle, fascia and tendon of left ring finger at forearm level, sequela
S56.127S	Laceration of flexor muscle, fascia and tendon of right little finger at forearm level, sequela
S56.128S	Laceration of flexor muscle, fascia and tendon of left little finger at forearm level, sequela



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Code	Description
S56.129S	Laceration of flexor muscle, fascia and tendon of unspecified finger at forearm level, sequela
S56.191S	Other injury of flexor muscle, fascia and tendon of right index finger at forearm level, sequela
S56.192S	Other injury of flexor muscle, fascia and tendon of left index finger at forearm level, sequela
S56.193S	Other injury of flexor muscle, fascia and tendon of right middle finger at forearm level, sequela
S56.194S	Other injury of flexor muscle, fascia and tendon of left middle finger at forearm level, sequela
S56.195S	Other injury of flexor muscle, fascia and tendon of right ring finger at forearm level, sequela
S56.196S	Other injury of flexor muscle, fascia and tendon of left ring finger at forearm level, sequela
S56.197S	Other injury of flexor muscle, fascia and tendon of right little finger at forearm level, sequela
S56.198S	Other injury of flexor muscle, fascia and tendon of left little finger at forearm level, sequela
S56.199S	Other injury of flexor muscle, fascia and tendon of unspecified finger at forearm level, sequela
S56.201S	Unspecified injury of other flexor muscle, fascia and tendon at forearm level, right arm, sequela
S56.202S	Unspecified injury of other flexor muscle, fascia and tendon at forearm level, left arm, sequela
S56.209S	Unspecified injury of other flexor muscle, fascia and tendon at forearm level, unspecified arm, sequela
S56.211A	Strain of other flexor muscle, fascia and tendon at forearm level, right arm, initial encounter
S56.211S	Strain of other flexor muscle, fascia and tendon at forearm level, right arm, sequela
S56.212A	Strain of other flexor muscle, fascia and tendon at forearm level, left arm, initial encounter
S56.212S	Strain of other flexor muscle, fascia and tendon at forearm level, left arm, sequela
S56.219A	Strain of other flexor muscle, fascia and tendon at forearm level, unspecified arm, initial encounter
S56.219S	Strain of other flexor muscle, fascia and tendon at forearm level, unspecified arm, sequela
S56.221S	Laceration of other flexor muscle, fascia and tendon at forearm level, right arm, sequela
S56.222S	Laceration of other flexor muscle, fascia and tendon at forearm level, left arm, sequela
S56.229S	Laceration of other flexor muscle, fascia and tendon at forearm level, unspecified arm, sequela



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Code	Description
S56.291S	Other injury of other flexor muscle, fascia and tendon at forearm level, right arm, sequela
S56.292S	Other injury of other flexor muscle, fascia and tendon at forearm level, left arm, sequela
S56.299S	Other injury of other flexor muscle, fascia and tendon at forearm level, unspecified arm, sequela
S56.301S	Unspecified injury of extensor or abductor muscles, fascia and tendons of right thumb at forearm level, sequela
S56.302S	Unspecified injury of extensor or abductor muscles, fascia and tendons of left thumb at forearm level, sequela
S56.309S	Unspecified injury of extensor or abductor muscles, fascia and tendons of unspecified thumb at forearm level, sequela
S56.311A	Strain of extensor or abductor muscles, fascia and tendons of right thumb at forearm level, initial encounter
S56.311S	Strain of extensor or abductor muscles, fascia and tendons of right thumb at forearm level, sequela
S56.312A	Strain of extensor or abductor muscles, fascia and tendons of left thumb at forearm level, initial encounter
S56.312S	Strain of extensor or abductor muscles, fascia and tendons of left thumb at forearm level, sequela
S56.319A	Strain of extensor or abductor muscles, fascia and tendons of unspecified thumb at forearm level, initial encounter
S56.319S	Strain of extensor or abductor muscles, fascia and tendons of unspecified thumb at forearm level, sequela
S56.321S	Laceration of extensor or abductor muscles, fascia and tendons of right thumb at forearm level, sequela
S56.322S	Laceration of extensor or abductor muscles, fascia and tendons of left thumb at forearm level, sequela
S56.329S	Laceration of extensor or abductor muscles, fascia and tendons of unspecified thumb at forearm level, sequela
S56.391S	Other injury of extensor or abductor muscles, fascia and tendons of right thumb at forearm level, sequela
S56.392S	Other injury of extensor or abductor muscles, fascia and tendons of left thumb at forearm level, sequela
S56.399S	Other injury of extensor or abductor muscles, fascia and tendons of unspecified thumb at forearm level, sequela
S56.401S	Unspecified injury of extensor muscle, fascia and tendon of right index finger at forearm level, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S56.402S	Unspecified injury of extensor muscle, fascia and tendon of left index finger at forearm level, sequela
S56.403S	Unspecified injury of extensor muscle, fascia and tendon of right middle finger at forearm level, sequela
S56.404S	Unspecified injury of extensor muscle, fascia and tendon of left middle finger at forearm level, sequela
S56.405S	Unspecified injury of extensor muscle, fascia and tendon of right ring finger at forearm level, sequela
S56.406S	Unspecified injury of extensor muscle, fascia and tendon of left ring finger at forearm level, sequela
S56.407S	Unspecified injury of extensor muscle, fascia and tendon of right little finger at forearm level, sequela
S56.408S	Unspecified injury of extensor muscle, fascia and tendon of left little finger at forearm level, sequela
S56.409S	Unspecified injury of extensor muscle, fascia and tendon of unspecified finger at forearm level, sequela
S56.411A	Strain of extensor muscle, fascia and tendon of right index finger at forearm level, initial encounter
S56.411S	Strain of extensor muscle, fascia and tendon of right index finger at forearm level, sequela
S56.412A	Strain of extensor muscle, fascia and tendon of left index finger at forearm level, initial encounter
S56.412S	Strain of extensor muscle, fascia and tendon of left index finger at forearm level, sequela
S56.413A	Strain of extensor muscle, fascia and tendon of right middle finger at forearm level, initial encounter
S56.413S	Strain of extensor muscle, fascia and tendon of right middle finger at forearm level, sequela
S56.414A	Strain of extensor muscle, fascia and tendon of left middle finger at forearm level, initial encounter
S56.414S	Strain of extensor muscle, fascia and tendon of left middle finger at forearm level, sequela
S56.415A	Strain of extensor muscle, fascia and tendon of right ring finger at forearm level, initial encounter
S56.415S	Strain of extensor muscle, fascia and tendon of right ring finger at forearm level, sequela
S56.416A	Strain of extensor muscle, fascia and tendon of left ring finger at forearm level, initial encounter
S56.416S	Strain of extensor muscle, fascia and tendon of left ring finger at forearm level, sequela

NCD 190.15

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S56.417A	Strain of extensor muscle, fascia and tendon of right little finger at forearm level, initial encounter
S56.417S	Strain of extensor muscle, fascia and tendon of right little finger at forearm level, sequela
S56.418A	Strain of extensor muscle, fascia and tendon of left little finger at forearm level, initial encounter
S56.418S	Strain of extensor muscle, fascia and tendon of left little finger at forearm level, sequela
S56.419A	Strain of extensor muscle, fascia and tendon of finger, unspecified finger at forearm level, initial encounter
S56.419S	Strain of extensor muscle, fascia and tendon of finger, unspecified finger at forearm level, sequela
S56.421S	Laceration of extensor muscle, fascia and tendon of right index finger at forearm level, sequela
S56.422S	Laceration of extensor muscle, fascia and tendon of left index finger at forearm level, sequela
S56.423S	Laceration of extensor muscle, fascia and tendon of right middle finger at forearm level, sequela
S56.424S	Laceration of extensor muscle, fascia and tendon of left middle finger at forearm level, sequela
S56.425S	Laceration of extensor muscle, fascia and tendon of right ring finger at forearm level, sequela
S56.426S	Laceration of extensor muscle, fascia and tendon of left ring finger at forearm level, sequela
S56.427S	Laceration of extensor muscle, fascia and tendon of right little finger at forearm level, sequela
S56.428S	Laceration of extensor muscle, fascia and tendon of left little finger at forearm level, sequela
S56.429S	Laceration of extensor muscle, fascia and tendon of unspecified finger at forearm level, sequela
S56.491S	Other injury of extensor muscle, fascia and tendon of right index finger at forearm level, sequela
S56.492S	Other injury of extensor muscle, fascia and tendon of left index finger at forearm level, sequela
S56.493S	Other injury of extensor muscle, fascia and tendon of right middle finger at forearm level, sequela
S56.494S	Other injury of extensor muscle, fascia and tendon of left middle finger at forearm level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S56.495S	Other injury of extensor muscle, fascia and tendon of right ring finger at forearm level, sequela
S56.496S	Other injury of extensor muscle, fascia and tendon of left ring finger at forearm level, sequela
S56.497S	Other injury of extensor muscle, fascia and tendon of right little finger at forearm level, sequela
S56.498S	Other injury of extensor muscle, fascia and tendon of left little finger at forearm level, sequela
S56.499S	Other injury of extensor muscle, fascia and tendon of unspecified finger at forearm level, sequela
S56.501S	Unspecified injury of other extensor muscle, fascia and tendon at forearm level, right arm, sequela
S56.502S	Unspecified injury of other extensor muscle, fascia and tendon at forearm level, left arm, sequela
S56.509S	Unspecified injury of other extensor muscle, fascia and tendon at forearm level, unspecified arm, sequela
S56.511A	Strain of other extensor muscle, fascia and tendon at forearm level, right arm, initial encounter
S56.511S	Strain of other extensor muscle, fascia and tendon at forearm level, right arm, sequela
S56.512A	Strain of other extensor muscle, fascia and tendon at forearm level, left arm, initial encounter
S56.512S	Strain of other extensor muscle, fascia and tendon at forearm level, left arm, sequela
S56.519A	Strain of other extensor muscle, fascia and tendon at forearm level, unspecified arm, initial encounter
S56.519S	Strain of other extensor muscle, fascia and tendon at forearm level, unspecified arm, sequela
S56.521S	Laceration of other extensor muscle, fascia and tendon at forearm level, right arm, sequela
S56.522S	Laceration of other extensor muscle, fascia and tendon at forearm level, left arm, sequela
S56.529S	Laceration of other extensor muscle, fascia and tendon at forearm level, unspecified arm, sequela
S56.591S	Other injury of other extensor muscle, fascia and tendon at forearm level, right arm, sequela
S56.592S	Other injury of other extensor muscle, fascia and tendon at forearm level, left arm, sequela
S56.599S	Other injury of other extensor muscle, fascia and tendon at forearm level, unspecified arm, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S56.801S	Unspecified injury of other muscles, fascia and tendons at forearm level, right arm, sequela
S56.802S	Unspecified injury of other muscles, fascia and tendons at forearm level, left arm, sequela
S56.809S	Unspecified injury of other muscles, fascia and tendons at forearm level, unspecified arm, sequela
S56.811A	Strain of other muscles, fascia and tendons at forearm level, right arm, initial encounter
S56.811S	Strain of other muscles, fascia and tendons at forearm level, right arm, sequela
S56.812A	Strain of other muscles, fascia and tendons at forearm level, left arm, initial encounter
S56.812S	Strain of other muscles, fascia and tendons at forearm level, left arm, sequela
S56.819A	Strain of other muscles, fascia and tendons at forearm level, unspecified arm, initial encounter
S56.819S	Strain of other muscles, fascia and tendons at forearm level, unspecified arm, sequela
S56.821S	Laceration of other muscles, fascia and tendons at forearm level, right arm, sequela
S56.822S	Laceration of other muscles, fascia and tendons at forearm level, left arm, sequela
S56.829S	Laceration of other muscles, fascia and tendons at forearm level, unspecified arm, sequela
S56.891S	Other injury of other muscles, fascia and tendons at forearm level, right arm, sequela
S56.892S	Other injury of other muscles, fascia and tendons at forearm level, left arm, sequela
S56.899S	Other injury of other muscles, fascia and tendons at forearm level, unspecified arm, sequela
S56.901S	Unspecified injury of unspecified muscles, fascia and tendons at forearm level, right arm, sequela
S56.902S	Unspecified injury of unspecified muscles, fascia and tendons at forearm level, left arm, sequela
S56.909S	Unspecified injury of unspecified muscles, fascia and tendons at forearm level, unspecified arm, sequela
S56.911A	Strain of unspecified muscles, fascia and tendons at forearm level, right arm, initial encounter
S56.911S	Strain of unspecified muscles, fascia and tendons at forearm level, right arm, sequela
S56.912A	Strain of unspecified muscles, fascia and tendons at forearm level, left arm, initial encounter
S56.912S	Strain of unspecified muscles, fascia and tendons at forearm level, left arm, sequela
S56.919A	Strain of unspecified muscles, fascia and tendons at forearm level, unspecified arm, initial encounter
S56.919S	Strain of unspecified muscles, fascia and tendons at forearm level, unspecified arm, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S56.921S	Laceration of unspecified muscles, fascia and tendons at forearm level, right arm, sequela
S56.922S	Laceration of unspecified muscles, fascia and tendons at forearm level, left arm, sequela
S56.929S	Laceration of unspecified muscles, fascia and tendons at forearm level, unspecified arm, sequela
S56.991S	Other injury of unspecified muscles, fascia and tendons at forearm level, right arm, sequela
S56.992S	Other injury of unspecified muscles, fascia and tendons at forearm level, left arm, sequela
S56.999S	Other injury of unspecified muscles, fascia and tendons at forearm level, unspecified arm, sequela
S57.00XS	Crushing injury of unspecified elbow, sequela
S57.01XS	Crushing injury of right elbow, sequela
S57.02XS	Crushing injury of left elbow, sequela
S57.80XS	Crushing injury of unspecified forearm, sequela
S57.81XS	Crushing injury of right forearm, sequela
S57.82XS	Crushing injury of left forearm, sequela
S58.011S	Complete traumatic amputation at elbow level, right arm, sequela
S58.012S	Complete traumatic amputation at elbow level, left arm, sequela
S58.019S	Complete traumatic amputation at elbow level, unspecified arm, sequela
S58.021S	Partial traumatic amputation at elbow level, right arm, sequela
S58.022S	Partial traumatic amputation at elbow level, left arm, sequela
S58.029S	Partial traumatic amputation at elbow level, unspecified arm, sequela
S58.111S	Complete traumatic amputation at level between elbow and wrist, right arm, sequela
S58.112S	Complete traumatic amputation at level between elbow and wrist, left arm, sequela
S58.119S	Complete traumatic amputation at level between elbow and wrist, unspecified arm, sequela
S58.121S	Partial traumatic amputation at level between elbow and wrist, right arm, sequela
S58.122S	Partial traumatic amputation at level between elbow and wrist, left arm, sequela
S58.129S	Partial traumatic amputation at level between elbow and wrist, unspecified arm, sequela
S58.911S	Complete traumatic amputation of right forearm, level unspecified, sequela
S58.912S	Complete traumatic amputation of left forearm, level unspecified, sequela
S58.919S	Complete traumatic amputation of unspecified forearm, level unspecified, sequela
S58.921S	Partial traumatic amputation of right forearm, level unspecified, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S58.922S	Partial traumatic amputation of left forearm, level unspecified, sequela
S58.929S	Partial traumatic amputation of unspecified forearm, level unspecified, sequela
S59.001D	Unspecified physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with routine healing
S59.001G	Unspecified physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with delayed healing
S59.001S	Unspecified physeal fracture of lower end of ulna, right arm, sequela
S59.002D	Unspecified physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with routine healing
S59.002G	Unspecified physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with delayed healing
S59.002S	Unspecified physeal fracture of lower end of ulna, left arm, sequela
S59.009D	Unspecified physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with routine healing
S59.009G	Unspecified physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with delayed healing
S59.009S	Unspecified physeal fracture of lower end of ulna, unspecified arm, sequela
S59.011D	Salter-Harris Type I physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with routine healing
S59.011G	Salter-Harris Type I physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with delayed healing
S59.011S	Salter-Harris Type I physeal fracture of lower end of ulna, right arm, sequela
S59.012D	Salter-Harris Type I physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with routine healing
S59.012G	Salter-Harris Type I physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with delayed healing
S59.012S	Salter-Harris Type I physeal fracture of lower end of ulna, left arm, sequela
S59.019D	Salter-Harris Type I physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with routine healing
S59.019G	Salter-Harris Type I physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with delayed healing
S59.019S	Salter-Harris Type I physeal fracture of lower end of ulna, unspecified arm, sequela
S59.021D	Salter-Harris Type II physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S59.021G	Salter-Harris Type II physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with delayed healing
S59.021S	Salter-Harris Type II physeal fracture of lower end of ulna, right arm, sequela
S59.022D	Salter-Harris Type II physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with routine healing
S59.022G	Salter-Harris Type II physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with delayed healing
S59.022S	Salter-Harris Type II physeal fracture of lower end of ulna, left arm, sequela
S59.029D	Salter-Harris Type II physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with routine healing
S59.029G	Salter-Harris Type II physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with delayed healing
S59.029S	Salter-Harris Type II physeal fracture of lower end of ulna, unspecified arm, sequela
S59.031D	Salter-Harris Type III physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with routine healing
S59.031G	Salter-Harris Type III physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with delayed healing
S59.031S	Salter-Harris Type III physeal fracture of lower end of ulna, right arm, sequela
S59.032D	Salter-Harris Type III physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with routine healing
S59.032G	Salter-Harris Type III physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with delayed healing
S59.032S	Salter-Harris Type III physeal fracture of lower end of ulna, left arm, sequela
S59.039D	Salter-Harris Type III physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with routine healing
S59.039G	Salter-Harris Type III physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with delayed healing
S59.039S	Salter-Harris Type III physeal fracture of lower end of ulna, unspecified arm, sequela
S59.041D	Salter-Harris Type IV physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with routine healing
S59.041G	Salter-Harris Type IV physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with delayed healing
S59.041S	Salter-Harris Type IV physeal fracture of lower end of ulna, right arm, sequela
S59.042D	Salter-Harris Type IV physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S59.042G	Salter-Harris Type IV physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with delayed healing
S59.042S	Salter-Harris Type IV physeal fracture of lower end of ulna, left arm, sequela
S59.049D	Salter-Harris Type IV physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with routine healing
S59.049G	Salter-Harris Type IV physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with delayed healing
S59.049S	Salter-Harris Type IV physeal fracture of lower end of ulna, unspecified arm, sequela
S59.091D	Other physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with routine healing
S59.091G	Other physeal fracture of lower end of ulna, right arm, subsequent encounter for fracture with delayed healing
S59.091S	Other physeal fracture of lower end of ulna, right arm, sequela
S59.092D	Other physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with routine healing
S59.092G	Other physeal fracture of lower end of ulna, left arm, subsequent encounter for fracture with delayed healing
S59.092S	Other physeal fracture of lower end of ulna, left arm, sequela
S59.099D	Other physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with routine healing
S59.099G	Other physeal fracture of lower end of ulna, unspecified arm, subsequent encounter for fracture with delayed healing
S59.099S	Other physeal fracture of lower end of ulna, unspecified arm, sequela
S59.101D	Unspecified physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with routine healing
S59.101G	Unspecified physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.101S	Unspecified physeal fracture of upper end of radius, right arm, sequela
S59.102D	Unspecified physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with routine healing
S59.102G	Unspecified physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.102S	Unspecified physeal fracture of upper end of radius, left arm, sequela
S59.109D	Unspecified physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with routine healing

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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S59.109G	Unspecified physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.109S	Unspecified physeal fracture of upper end of radius, unspecified arm, sequela
S59.111D	Salter-Harris Type I physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with routine healing
S59.111G	Salter-Harris Type I physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.111S	Salter-Harris Type I physeal fracture of upper end of radius, right arm, sequela
S59.112D	Salter-Harris Type I physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with routine healing
S59.112G	Salter-Harris Type I physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.112S	Salter-Harris Type I physeal fracture of upper end of radius, left arm, sequela
S59.119D	Salter-Harris Type I physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.119G	Salter-Harris Type I physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.119S	Salter-Harris Type I physeal fracture of upper end of radius, unspecified arm, sequela
S59.121D	Salter-Harris Type II physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with routine healing
S59.121G	Salter-Harris Type II physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.121S	Salter-Harris Type II physeal fracture of upper end of radius, right arm, sequela
S59.122D	Salter-Harris Type II physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with routine healing
S59.122G	Salter-Harris Type II physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.122S	Salter-Harris Type II physeal fracture of upper end of radius, left arm, sequela
S59.129D	Salter-Harris Type II physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.129G	Salter-Harris Type II physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.129S	Salter-Harris Type II physeal fracture of upper end of radius, unspecified arm, sequela
S59.131D	Salter-Harris Type III physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S59.131G	Salter-Harris Type III physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.131S	Salter-Harris Type III physeal fracture of upper end of radius, right arm, sequela
S59.132D	Salter-Harris Type III physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with routine healing
S59.132G	Salter-Harris Type III physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.132S	Salter-Harris Type III physeal fracture of upper end of radius, left arm, sequela
S59.139D	Salter-Harris Type III physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.139G	Salter-Harris Type III physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.139S	Salter-Harris Type III physeal fracture of upper end of radius, unspecified arm, sequela
S59.141D	Salter-Harris Type IV physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with routine healing
S59.141G	Salter-Harris Type IV physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.141S	Salter-Harris Type IV physeal fracture of upper end of radius, right arm, sequela
S59.142D	Salter-Harris Type IV physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with routine healing
S59.142G	Salter-Harris Type IV physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.142S	Salter-Harris Type IV physeal fracture of upper end of radius, left arm, sequela
S59.149D	Salter-Harris Type IV physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.149G	Salter-Harris Type IV physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.149S	Salter-Harris Type IV physeal fracture of upper end of radius, unspecified arm, sequela
S59.191D	Other physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with routine healing
S59.191G	Other physeal fracture of upper end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.191S	Other physeal fracture of upper end of radius, right arm, sequela
S59.192D	Other physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S59.192G	Other physeal fracture of upper end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.192S	Other physeal fracture of upper end of radius, left arm, sequela
S59.199D	Other physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.199G	Other physeal fracture of upper end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.199S	Other physeal fracture of upper end of radius, unspecified arm, sequela
S59.201D	Unspecified physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with routine healing
S59.201G	Unspecified physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.201S	Unspecified physeal fracture of lower end of radius, right arm, sequela
S59.202D	Unspecified physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with routine healing
S59.202G	Unspecified physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.202S	Unspecified physeal fracture of lower end of radius, left arm, sequela
S59.209D	Unspecified physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.209G	Unspecified physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.209S	Unspecified physeal fracture of lower end of radius, unspecified arm, sequela
S59.211D	Salter-Harris Type I physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with routine healing
S59.211G	Salter-Harris Type I physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.211S	Salter-Harris Type I physeal fracture of lower end of radius, right arm, sequela
S59.212D	Salter-Harris Type I physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with routine healing
S59.212G	Salter-Harris Type I physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.212S	Salter-Harris Type I physeal fracture of lower end of radius, left arm, sequela
S59.219D	Salter-Harris Type I physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with routine healing

NCD 190.15

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S59.219G	Salter-Harris Type I physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.219S	Salter-Harris Type I physeal fracture of lower end of radius, unspecified arm, sequela
S59.221D	Salter-Harris Type II physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with routine healing
S59.221G	Salter-Harris Type II physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.221S	Salter-Harris Type II physeal fracture of lower end of radius, right arm, sequela
S59.222D	Salter-Harris Type II physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with routine healing
S59.222G	Salter-Harris Type II physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.222S	Salter-Harris Type II physeal fracture of lower end of radius, left arm, sequela
S59.229D	Salter-Harris Type II physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.229G	Salter-Harris Type II physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.229S	Salter-Harris Type II physeal fracture of lower end of radius, unspecified arm, sequela
S59.231D	Salter-Harris Type III physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with routine healing
S59.231G	Salter-Harris Type III physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.231S	Salter-Harris Type III physeal fracture of lower end of radius, right arm, sequela
S59.232D	Salter-Harris Type III physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with routine healing
S59.232G	Salter-Harris Type III physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.232S	Salter-Harris Type III physeal fracture of lower end of radius, left arm, sequela
S59.239D	Salter-Harris Type III physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.239G	Salter-Harris Type III physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.239S	Salter-Harris Type III physeal fracture of lower end of radius, unspecified arm, sequela
S59.241D	Salter-Harris Type IV physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S59.241G	Salter-Harris Type IV physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.241S	Salter-Harris Type IV physeal fracture of lower end of radius, right arm, sequela
S59.242D	Salter-Harris Type IV physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with routine healing
S59.242G	Salter-Harris Type IV physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.242S	Salter-Harris Type IV physeal fracture of lower end of radius, left arm, sequela
S59.249D	Salter-Harris Type IV physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.249G	Salter-Harris Type IV physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.249S	Salter-Harris Type IV physeal fracture of lower end of radius, unspecified arm, sequela
S59.291D	Other physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with routine healing
S59.291G	Other physeal fracture of lower end of radius, right arm, subsequent encounter for fracture with delayed healing
S59.291S	Other physeal fracture of lower end of radius, right arm, sequela
S59.292D	Other physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with routine healing
S59.292G	Other physeal fracture of lower end of radius, left arm, subsequent encounter for fracture with delayed healing
S59.292S	Other physeal fracture of lower end of radius, left arm, sequela
S59.299D	Other physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with routine healing
S59.299G	Other physeal fracture of lower end of radius, unspecified arm, subsequent encounter for fracture with delayed healing
S59.299S	Other physeal fracture of lower end of radius, unspecified arm, sequela
S59.801S	Other specified injuries of right elbow, sequela
S59.802S	Other specified injuries of left elbow, sequela
S59.809S	Other specified injuries of unspecified elbow, sequela
S59.811S	Other specified injuries right forearm, sequela
S59.812S	Other specified injuries left forearm, sequela
S59.819S	Other specified injuries unspecified forearm, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S59.901S	Unspecified injury of right elbow, sequela
S59.902S	Unspecified injury of left elbow, sequela
S59.909S	Unspecified injury of unspecified elbow, sequela
S59.911S	Unspecified injury of right forearm, sequela
S59.912S	Unspecified injury of left forearm, sequela
S59.919S	Unspecified injury of unspecified forearm, sequela
S60.00XS	Contusion of unspecified finger without damage to nail, sequela
S60.011S	Contusion of right thumb without damage to nail, sequela
S60.012S	Contusion of left thumb without damage to nail, sequela
S60.019S	Contusion of unspecified thumb without damage to nail, sequela
S60.021S	Contusion of right index finger without damage to nail, sequela
S60.022S	Contusion of left index finger without damage to nail, sequela
S60.029S	Contusion of unspecified index finger without damage to nail, sequela
S60.031S	Contusion of right middle finger without damage to nail, sequela
S60.032S	Contusion of left middle finger without damage to nail, sequela
S60.039S	Contusion of unspecified middle finger without damage to nail, sequela
S60.041S	Contusion of right ring finger without damage to nail, sequela
S60.042S	Contusion of left ring finger without damage to nail, sequela
S60.049S	Contusion of unspecified ring finger without damage to nail, sequela
S60.051S	Contusion of right little finger without damage to nail, sequela
S60.052S	Contusion of left little finger without damage to nail, sequela
S60.059S	Contusion of unspecified little finger without damage to nail, sequela
S60.10XS	Contusion of unspecified finger with damage to nail, sequela
S60.111S	Contusion of right thumb with damage to nail, sequela
S60.112S	Contusion of left thumb with damage to nail, sequela
S60.119S	Contusion of unspecified thumb with damage to nail, sequela
S60.121S	Contusion of right index finger with damage to nail, sequela
S60.122S	Contusion of left index finger with damage to nail, sequela
S60.129S	Contusion of unspecified index finger with damage to nail, sequela
S60.131S	Contusion of right middle finger with damage to nail, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S60.132S	Contusion of left middle finger with damage to nail, sequela
S60.139S	Contusion of unspecified middle finger with damage to nail, sequela
S60.141S	Contusion of right ring finger with damage to nail, sequela
S60.142S	Contusion of left ring finger with damage to nail, sequela
S60.149S	Contusion of unspecified ring finger with damage to nail, sequela
S60.151S	Contusion of right little finger with damage to nail, sequela
S60.152S	Contusion of left little finger with damage to nail, sequela
S60.159S	Contusion of unspecified little finger with damage to nail, sequela
S60.211S	Contusion of right wrist, sequela
S60.212S	Contusion of left wrist, sequela
S60.219S	Contusion of unspecified wrist, sequela
S60.221S	Contusion of right hand, sequela
S60.222S	Contusion of left hand, sequela
S60.229S	Contusion of unspecified hand, sequela
S60.311A	Abrasion of right thumb, initial encounter
S60.311S	Abrasion of right thumb, sequela
S60.312A	Abrasion of left thumb, initial encounter
S60.312S	Abrasion of left thumb, sequela
S60.319A	Abrasion of unspecified thumb, initial encounter
S60.319S	Abrasion of unspecified thumb, sequela
S60.321A	Blister (nonthermal) of right thumb, initial encounter
S60.321S	Blister (nonthermal) of right thumb, sequela
S60.322A	Blister (nonthermal) of left thumb, initial encounter
S60.322S	Blister (nonthermal) of left thumb, sequela
S60.329A	Blister (nonthermal) of unspecified thumb, initial encounter
S60.329S	Blister (nonthermal) of unspecified thumb, sequela
S60.341A	External constriction of right thumb, initial encounter
S60.341S	External constriction of right thumb, sequela
S60.342A	External constriction of left thumb, initial encounter
S60.342S	External constriction of left thumb, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S60.349A	External constriction of unspecified thumb, initial encounter
S60.349S	External constriction of unspecified thumb, sequela
S60.351A	Superficial foreign body of right thumb, initial encounter
S60.351S	Superficial foreign body of right thumb, sequela
S60.352A	Superficial foreign body of left thumb, initial encounter
S60.352S	Superficial foreign body of left thumb, sequela
S60.359A	Superficial foreign body of unspecified thumb, initial encounter
S60.359S	Superficial foreign body of unspecified thumb, sequela
S60.361A	Insect bite (nonvenomous) of right thumb, initial encounter
S60.361S	Insect bite (nonvenomous) of right thumb, sequela
S60.362A	Insect bite (nonvenomous) of left thumb, initial encounter
S60.362S	Insect bite (nonvenomous) of left thumb, sequela
S60.369A	Insect bite (nonvenomous) of unspecified thumb, initial encounter
S60.369S	Insect bite (nonvenomous) of unspecified thumb, sequela
S60.371A	Other superficial bite of right thumb, initial encounter
S60.371S	Other superficial bite of right thumb, sequela
S60.372A	Other superficial bite of left thumb, initial encounter
S60.372S	Other superficial bite of left thumb, sequela
S60.379A	Other superficial bite of unspecified thumb, initial encounter
S60.379S	Other superficial bite of unspecified thumb, sequela
S60.391A	Other superficial injuries of right thumb, initial encounter
S60.391S	Other superficial injuries of right thumb, sequela
S60.392A	Other superficial injuries of left thumb, initial encounter
S60.392S	Other superficial injuries of left thumb, sequela
S60.399A	Other superficial injuries of unspecified thumb, initial encounter
S60.399S	Other superficial injuries of unspecified thumb, sequela
S60.410A	Abrasion of right index finger, initial encounter
S60.410S	Abrasion of right index finger, sequela
S60.411A	Abrasion of left index finger, initial encounter
S60.411S	Abrasion of left index finger, sequela

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Code	Description
S60.412A	Abrasion of right middle finger, initial encounter
S60.412S	Abrasion of right middle finger, sequela
S60.413A	Abrasion of left middle finger, initial encounter
S60.413S	Abrasion of left middle finger, sequela
S60.414A	Abrasion of right ring finger, initial encounter
S60.414S	Abrasion of right ring finger, sequela
S60.415A	Abrasion of left ring finger, initial encounter
S60.415S	Abrasion of left ring finger, sequela
S60.416A	Abrasion of right little finger, initial encounter
S60.416S	Abrasion of right little finger, sequela
S60.417A	Abrasion of left little finger, initial encounter
S60.417S	Abrasion of left little finger, sequela
S60.418A	Abrasion of other finger, initial encounter
S60.418S	Abrasion of other finger, sequela
S60.419A	Abrasion of unspecified finger, initial encounter
S60.419S	Abrasion of unspecified finger, sequela
S60.420A	Blister (nonthermal) of right index finger, initial encounter
S60.420S	Blister (nonthermal) of right index finger, sequela
S60.421A	Blister (nonthermal) of left index finger, initial encounter
S60.421S	Blister (nonthermal) of left index finger, sequela
S60.422A	Blister (nonthermal) of right middle finger, initial encounter
S60.422S	Blister (nonthermal) of right middle finger, sequela
S60.423A	Blister (nonthermal) of left middle finger, initial encounter
S60.423S	Blister (nonthermal) of left middle finger, sequela
S60.424A	Blister (nonthermal) of right ring finger, initial encounter
S60.424S	Blister (nonthermal) of right ring finger, sequela
S60.425A	Blister (nonthermal) of left ring finger, initial encounter
S60.425S	Blister (nonthermal) of left ring finger, sequela
S60.426A	Blister (nonthermal) of right little finger, initial encounter
S60.426S	Blister (nonthermal) of right little finger, sequela

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Code	Description
S60.427A	Blister (nonthermal) of left little finger, initial encounter
S60.427S	Blister (nonthermal) of left little finger, sequela
S60.428A	Blister (nonthermal) of other finger, initial encounter
S60.428S	Blister (nonthermal) of other finger, sequela
S60.429A	Blister (nonthermal) of unspecified finger, initial encounter
S60.429S	Blister (nonthermal) of unspecified finger, sequela
S60.440A	External constriction of right index finger, initial encounter
S60.440S	External constriction of right index finger, sequela
S60.441A	External constriction of left index finger, initial encounter
S60.441S	External constriction of left index finger, sequela
S60.442A	External constriction of right middle finger, initial encounter
S60.442S	External constriction of right middle finger, sequela
S60.443A	External constriction of left middle finger, initial encounter
S60.443S	External constriction of left middle finger, sequela
S60.444A	External constriction of right ring finger, initial encounter
S60.444S	External constriction of right ring finger, sequela
S60.445A	External constriction of left ring finger, initial encounter
S60.445S	External constriction of left ring finger, sequela
S60.446A	External constriction of right little finger, initial encounter
S60.446S	External constriction of right little finger, sequela
S60.447A	External constriction of left little finger, initial encounter
S60.447S	External constriction of left little finger, sequela
S60.448A	External constriction of other finger, initial encounter
S60.448S	External constriction of other finger, sequela
S60.449A	External constriction of unspecified finger, initial encounter
S60.449S	External constriction of unspecified finger, sequela
S60.450A	Superficial foreign body of right index finger, initial encounter
S60.450S	Superficial foreign body of right index finger, sequela
S60.451A	Superficial foreign body of left index finger, initial encounter
S60.451S	Superficial foreign body of left index finger, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S60.452A	Superficial foreign body of right middle finger, initial encounter
S60.452S	Superficial foreign body of right middle finger, sequela
S60.453A	Superficial foreign body of left middle finger, initial encounter
S60.453S	Superficial foreign body of left middle finger, sequela
S60.454A	Superficial foreign body of right ring finger, initial encounter
S60.454S	Superficial foreign body of right ring finger, sequela
S60.455A	Superficial foreign body of left ring finger, initial encounter
S60.455S	Superficial foreign body of left ring finger, sequela
S60.456A	Superficial foreign body of right little finger, initial encounter
S60.456S	Superficial foreign body of right little finger, sequela
S60.457A	Superficial foreign body of left little finger, initial encounter
S60.457S	Superficial foreign body of left little finger, sequela
S60.458A	Superficial foreign body of other finger, initial encounter
S60.458S	Superficial foreign body of other finger, sequela
S60.459A	Superficial foreign body of unspecified finger, initial encounter
S60.459S	Superficial foreign body of unspecified finger, sequela
S60.460A	Insect bite (nonvenomous) of right index finger, initial encounter
S60.460S	Insect bite (nonvenomous) of right index finger, sequela
S60.461A	Insect bite (nonvenomous) of left index finger, initial encounter
S60.461S	Insect bite (nonvenomous) of left index finger, sequela
S60.462A	Insect bite (nonvenomous) of right middle finger, initial encounter
S60.462S	Insect bite (nonvenomous) of right middle finger, sequela
S60.463A	Insect bite (nonvenomous) of left middle finger, initial encounter
S60.463S	Insect bite (nonvenomous) of left middle finger, sequela
S60.464A	Insect bite (nonvenomous) of right ring finger, initial encounter
S60.464S	Insect bite (nonvenomous) of right ring finger, sequela
S60.465A	Insect bite (nonvenomous) of left ring finger, initial encounter
S60.465S	Insect bite (nonvenomous) of left ring finger, sequela
S60.466A	Insect bite (nonvenomous) of right little finger, initial encounter
S60.466S	Insect bite (nonvenomous) of right little finger, sequela

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Code	Description
S60.467A	Insect bite (nonvenomous) of left little finger, initial encounter
S60.467S	Insect bite (nonvenomous) of left little finger, sequela
S60.468A	Insect bite (nonvenomous) of other finger, initial encounter
S60.468S	Insect bite (nonvenomous) of other finger, sequela
S60.469A	Insect bite (nonvenomous) of unspecified finger, initial encounter
S60.469S	Insect bite (nonvenomous) of unspecified finger, sequela
S60.470A	Other superficial bite of right index finger, initial encounter
S60.470S	Other superficial bite of right index finger, sequela
S60.471A	Other superficial bite of left index finger, initial encounter
S60.471S	Other superficial bite of left index finger, sequela
S60.472A	Other superficial bite of right middle finger, initial encounter
S60.472S	Other superficial bite of right middle finger, sequela
S60.473A	Other superficial bite of left middle finger, initial encounter
S60.473S	Other superficial bite of left middle finger, sequela
S60.474A	Other superficial bite of right ring finger, initial encounter
S60.474S	Other superficial bite of right ring finger, sequela
S60.475A	Other superficial bite of left ring finger, initial encounter
S60.475S	Other superficial bite of left ring finger, sequela
S60.476A	Other superficial bite of right little finger, initial encounter
S60.476S	Other superficial bite of right little finger, sequela
S60.477A	Other superficial bite of left little finger, initial encounter
S60.477S	Other superficial bite of left little finger, sequela
S60.478A	Other superficial bite of other finger, initial encounter
S60.478S	Other superficial bite of other finger, sequela
S60.479A	Other superficial bite of unspecified finger, initial encounter
S60.479S	Other superficial bite of unspecified finger, sequela
S60.511A	Abrasion of right hand, initial encounter
S60.511S	Abrasion of right hand, sequela
S60.512A	Abrasion of left hand, initial encounter
S60.512S	Abrasion of left hand, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S60.519A	Abrasion of unspecified hand, initial encounter
S60.519S	Abrasion of unspecified hand, sequela
S60.521A	Blister (nonthermal) of right hand, initial encounter
S60.521S	Blister (nonthermal) of right hand, sequela
S60.522A	Blister (nonthermal) of left hand, initial encounter
S60.522S	Blister (nonthermal) of left hand, sequela
S60.529A	Blister (nonthermal) of unspecified hand, initial encounter
S60.529S	Blister (nonthermal) of unspecified hand, sequela
S60.541A	External constriction of right hand, initial encounter
S60.541S	External constriction of right hand, sequela
S60.542A	External constriction of left hand, initial encounter
S60.542S	External constriction of left hand, sequela
S60.549A	External constriction of unspecified hand, initial encounter
S60.549S	External constriction of unspecified hand, sequela
S60.551A	Superficial foreign body of right hand, initial encounter
S60.551S	Superficial foreign body of right hand, sequela
S60.552A	Superficial foreign body of left hand, initial encounter
S60.552S	Superficial foreign body of left hand, sequela
S60.559A	Superficial foreign body of unspecified hand, initial encounter
S60.559S	Superficial foreign body of unspecified hand, sequela
S60.561A	Insect bite (nonvenomous) of right hand, initial encounter
S60.561S	Insect bite (nonvenomous) of right hand, sequela
S60.562A	Insect bite (nonvenomous) of left hand, initial encounter
S60.562S	Insect bite (nonvenomous) of left hand, sequela
S60.569A	Insect bite (nonvenomous) of unspecified hand, initial encounter
S60.569S	Insect bite (nonvenomous) of unspecified hand, sequela
S60.571A	Other superficial bite of hand of right hand, initial encounter
S60.571S	Other superficial bite of hand of right hand, sequela
S60.572A	Other superficial bite of hand of left hand, initial encounter
S60.572S	Other superficial bite of hand of left hand, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S60.579A	Other superficial bite of hand of unspecified hand, initial encounter
S60.579S	Other superficial bite of hand of unspecified hand, sequela
S60.811A	Abrasion of right wrist, initial encounter
S60.811S	Abrasion of right wrist, sequela
S60.812A	Abrasion of left wrist, initial encounter
S60.812S	Abrasion of left wrist, sequela
S60.819A	Abrasion of unspecified wrist, initial encounter
S60.819S	Abrasion of unspecified wrist, sequela
S60.821A	Blister (nonthermal) of right wrist, initial encounter
S60.821S	Blister (nonthermal) of right wrist, sequela
S60.822A	Blister (nonthermal) of left wrist, initial encounter
S60.822S	Blister (nonthermal) of left wrist, sequela
S60.829A	Blister (nonthermal) of unspecified wrist, initial encounter
S60.829S	Blister (nonthermal) of unspecified wrist, sequela
S60.841A	External constriction of right wrist, initial encounter
S60.841S	External constriction of right wrist, sequela
S60.842A	External constriction of left wrist, initial encounter
S60.842S	External constriction of left wrist, sequela
S60.849A	External constriction of unspecified wrist, initial encounter
S60.849S	External constriction of unspecified wrist, sequela
S60.851A	Superficial foreign body of right wrist, initial encounter
S60.851S	Superficial foreign body of right wrist, sequela
S60.852A	Superficial foreign body of left wrist, initial encounter
S60.852S	Superficial foreign body of left wrist, sequela
S60.859A	Superficial foreign body of unspecified wrist, initial encounter
S60.859S	Superficial foreign body of unspecified wrist, sequela
S60.861A	Insect bite (nonvenomous) of right wrist, initial encounter
S60.861S	Insect bite (nonvenomous) of right wrist, sequela
S60.862A	Insect bite (nonvenomous) of left wrist, initial encounter
S60.862S	Insect bite (nonvenomous) of left wrist, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S60.869A	Insect bite (nonvenomous) of unspecified wrist, initial encounter
S60.869S	Insect bite (nonvenomous) of unspecified wrist, sequela
S60.871A	Other superficial bite of right wrist, initial encounter
S60.871S	Other superficial bite of right wrist, sequela
S60.872A	Other superficial bite of left wrist, initial encounter
S60.872S	Other superficial bite of left wrist, sequela
S60.879A	Other superficial bite of unspecified wrist, initial encounter
S60.879S	Other superficial bite of unspecified wrist, sequela
S60.911A	Unspecified superficial injury of right wrist, initial encounter
S60.911S	Unspecified superficial injury of right wrist, sequela
S60.912A	Unspecified superficial injury of left wrist, initial encounter
S60.912S	Unspecified superficial injury of left wrist, sequela
S60.919A	Unspecified superficial injury of unspecified wrist, initial encounter
S60.919S	Unspecified superficial injury of unspecified wrist, sequela
S60.921A	Unspecified superficial injury of right hand, initial encounter
S60.921S	Unspecified superficial injury of right hand, sequela
S60.922A	Unspecified superficial injury of left hand, initial encounter
S60.922S	Unspecified superficial injury of left hand, sequela
S60.929A	Unspecified superficial injury of unspecified hand, initial encounter
S60.929S	Unspecified superficial injury of unspecified hand, sequela
S60.931A	Unspecified superficial injury of right thumb, initial encounter
S60.931S	Unspecified superficial injury of right thumb, sequela
S60.932A	Unspecified superficial injury of left thumb, initial encounter
S60.932S	Unspecified superficial injury of left thumb, sequela
S60.939A	Unspecified superficial injury of unspecified thumb, initial encounter
S60.939S	Unspecified superficial injury of unspecified thumb, sequela
S60.940A	Unspecified superficial injury of right index finger, initial encounter
S60.940S	Unspecified superficial injury of right index finger, sequela
S60.941A	Unspecified superficial injury of left index finger, initial encounter
S60.941S	Unspecified superficial injury of left index finger, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S60.942A	Unspecified superficial injury of right middle finger, initial encounter
S60.942S	Unspecified superficial injury of right middle finger, sequela
S60.943A	Unspecified superficial injury of left middle finger, initial encounter
S60.943S	Unspecified superficial injury of left middle finger, sequela
S60.944A	Unspecified superficial injury of right ring finger, initial encounter
S60.944S	Unspecified superficial injury of right ring finger, sequela
S60.945A	Unspecified superficial injury of left ring finger, initial encounter
S60.945S	Unspecified superficial injury of left ring finger, sequela
S60.946A	Unspecified superficial injury of right little finger, initial encounter
S60.946S	Unspecified superficial injury of right little finger, sequela
S60.947A	Unspecified superficial injury of left little finger, initial encounter
S60.947S	Unspecified superficial injury of left little finger, sequela
S60.948A	Unspecified superficial injury of other finger, initial encounter
S60.948S	Unspecified superficial injury of other finger, sequela
S60.949A	Unspecified superficial injury of unspecified finger, initial encounter
S60.949S	Unspecified superficial injury of unspecified finger, sequela
S61.001S	Unspecified open wound of right thumb without damage to nail, sequela
S61.002S	Unspecified open wound of left thumb without damage to nail, sequela
S61.009A	Unspecified open wound of unspecified thumb without damage to nail, initial encounter
S61.009S	Unspecified open wound of unspecified thumb without damage to nail, sequela
S61.011S	Laceration without foreign body of right thumb without damage to nail, sequela
S61.012S	Laceration without foreign body of left thumb without damage to nail, sequela
S61.019S	Laceration without foreign body of unspecified thumb without damage to nail, sequela
S61.021S	Laceration with foreign body of right thumb without damage to nail, sequela
S61.022S	Laceration with foreign body of left thumb without damage to nail, sequela
S61.029S	Laceration with foreign body of unspecified thumb without damage to nail, sequela
S61.031S	Puncture wound without foreign body of right thumb without damage to nail, sequela
S61.032S	Puncture wound without foreign body of left thumb without damage to nail, sequela
S61.039S	Puncture wound without foreign body of unspecified thumb without damage to nail, sequela
S61.041S	Puncture wound with foreign body of right thumb without damage to nail, sequela

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ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S61.042S	Puncture wound with foreign body of left thumb without damage to nail, sequela
S61.049S	Puncture wound with foreign body of unspecified thumb without damage to nail, sequela
S61.051S	Open bite of right thumb without damage to nail, sequela
S61.052S	Open bite of left thumb without damage to nail, sequela
S61.059S	Open bite of unspecified thumb without damage to nail, sequela
S61.101S	Unspecified open wound of right thumb with damage to nail, sequela
S61.102S	Unspecified open wound of left thumb with damage to nail, sequela
S61.109S	Unspecified open wound of unspecified thumb with damage to nail, sequela
S61.111S	Laceration without foreign body of right thumb with damage to nail, sequela
S61.112S	Laceration without foreign body of left thumb with damage to nail, sequela
S61.119S	Laceration without foreign body of unspecified thumb with damage to nail, sequela
S61.121S	Laceration with foreign body of right thumb with damage to nail, sequela
S61.122S	Laceration with foreign body of left thumb with damage to nail, sequela
S61.129S	Laceration with foreign body of unspecified thumb with damage to nail, sequela
S61.131S	Puncture wound without foreign body of right thumb with damage to nail, sequela
S61.132S	Puncture wound without foreign body of left thumb with damage to nail, sequela
S61.139S	Puncture wound without foreign body of unspecified thumb with damage to nail, sequela
S61.141S	Puncture wound with foreign body of right thumb with damage to nail, sequela
S61.142S	Puncture wound with foreign body of left thumb with damage to nail, sequela
S61.149S	Puncture wound with foreign body of unspecified thumb with damage to nail, sequela
S61.151S	Open bite of right thumb with damage to nail, sequela
S61.152S	Open bite of left thumb with damage to nail, sequela
S61.159S	Open bite of unspecified thumb with damage to nail, sequela
S61.200S	Unspecified open wound of right index finger without damage to nail, sequela
S61.201S	Unspecified open wound of left index finger without damage to nail, sequela
S61.202S	Unspecified open wound of right middle finger without damage to nail, sequela
S61.203S	Unspecified open wound of left middle finger without damage to nail, sequela
S61.204S	Unspecified open wound of right ring finger without damage to nail, sequela
S61.205S	Unspecified open wound of left ring finger without damage to nail, sequela
S61.206S	Unspecified open wound of right little finger without damage to nail, sequela



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Code	Description
S61.207S	Unspecified open wound of left little finger without damage to nail, sequela
S61.208S	Unspecified open wound of other finger without damage to nail, sequela
S61.209A	Unspecified open wound of unspecified finger without damage to nail, initial encounter
S61.209S	Unspecified open wound of unspecified finger without damage to nail, sequela
S61.210S	Laceration without foreign body of right index finger without damage to nail, sequela
S61.211S	Laceration without foreign body of left index finger without damage to nail, sequela
S61.212S	Laceration without foreign body of right middle finger without damage to nail, sequela
S61.213S	Laceration without foreign body of left middle finger without damage to nail, sequela
S61.214S	Laceration without foreign body of right ring finger without damage to nail, sequela
S61.215S	Laceration without foreign body of left ring finger without damage to nail, sequela
S61.216S	Laceration without foreign body of right little finger without damage to nail, sequela
S61.217S	Laceration without foreign body of left little finger without damage to nail, sequela
S61.218S	Laceration without foreign body of other finger without damage to nail, sequela
S61.219S	Laceration without foreign body of unspecified finger without damage to nail, sequela
S61.220S	Laceration with foreign body of right index finger without damage to nail, sequela
S61.221S	Laceration with foreign body of left index finger without damage to nail, sequela
S61.222S	Laceration with foreign body of right middle finger without damage to nail, sequela
S61.223S	Laceration with foreign body of left middle finger without damage to nail, sequela
S61.224S	Laceration with foreign body of right ring finger without damage to nail, sequela
S61.225S	Laceration with foreign body of left ring finger without damage to nail, sequela
S61.226S	Laceration with foreign body of right little finger without damage to nail, sequela
S61.227S	Laceration with foreign body of left little finger without damage to nail, sequela
S61.228S	Laceration with foreign body of other finger without damage to nail, sequela
S61.229S	Laceration with foreign body of unspecified finger without damage to nail, sequela
S61.230S	Puncture wound without foreign body of right index finger without damage to nail, sequela
S61.231S	Puncture wound without foreign body of left index finger without damage to nail, sequela
S61.232S	Puncture wound without foreign body of right middle finger without damage to nail, sequela
S61.233S	Puncture wound without foreign body of left middle finger without damage to nail, sequela
S61.234S	Puncture wound without foreign body of right ring finger without damage to nail, sequela
S61.235S	Puncture wound without foreign body of left ring finger without damage to nail, sequela



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Code	Description
S61.236S	Puncture wound without foreign body of right little finger without damage to nail, sequela
S61.237S	Puncture wound without foreign body of left little finger without damage to nail, sequela
S61.238S	Puncture wound without foreign body of other finger without damage to nail, sequela
S61.239S	Puncture wound without foreign body of unspecified finger without damage to nail, sequela
S61.240S	Puncture wound with foreign body of right index finger without damage to nail, sequela
S61.241S	Puncture wound with foreign body of left index finger without damage to nail, sequela
S61.242S	Puncture wound with foreign body of right middle finger without damage to nail, sequela
S61.243S	Puncture wound with foreign body of left middle finger without damage to nail, sequela
S61.244S	Puncture wound with foreign body of right ring finger without damage to nail, sequela
S61.245S	Puncture wound with foreign body of left ring finger without damage to nail, sequela
S61.246S	Puncture wound with foreign body of right little finger without damage to nail, sequela
S61.247S	Puncture wound with foreign body of left little finger without damage to nail, sequela
S61.248S	Puncture wound with foreign body of other finger without damage to nail, sequela
S61.249S	Puncture wound with foreign body of unspecified finger without damage to nail, sequela
S61.250S	Open bite of right index finger without damage to nail, sequela
S61.251S	Open bite of left index finger without damage to nail, sequela
S61.252S	Open bite of right middle finger without damage to nail, sequela
S61.253S	Open bite of left middle finger without damage to nail, sequela
S61.254S	Open bite of right ring finger without damage to nail, sequela
S61.255S	Open bite of left ring finger without damage to nail, sequela
S61.256S	Open bite of right little finger without damage to nail, sequela
S61.257S	Open bite of left little finger without damage to nail, sequela
S61.258S	Open bite of other finger without damage to nail, sequela
S61.259S	Open bite of unspecified finger without damage to nail, sequela
S61.300S	Unspecified open wound of right index finger with damage to nail, sequela
S61.301S	Unspecified open wound of left index finger with damage to nail, sequela
S61.302S	Unspecified open wound of right middle finger with damage to nail, sequela
S61.303S	Unspecified open wound of left middle finger with damage to nail, sequela
S61.304S	Unspecified open wound of right ring finger with damage to nail, sequela
S61.305S	Unspecified open wound of left ring finger with damage to nail, sequela



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Code	Description
S61.306S	Unspecified open wound of right little finger with damage to nail, sequela
S61.307S	Unspecified open wound of left little finger with damage to nail, sequela
S61.308S	Unspecified open wound of other finger with damage to nail, sequela
S61.309S	Unspecified open wound of unspecified finger with damage to nail, sequela
S61.310S	Laceration without foreign body of right index finger with damage to nail, sequela
S61.311S	Laceration without foreign body of left index finger with damage to nail, sequela
S61.312S	Laceration without foreign body of right middle finger with damage to nail, sequela
S61.313S	Laceration without foreign body of left middle finger with damage to nail, sequela
S61.314S	Laceration without foreign body of right ring finger with damage to nail, sequela
S61.315S	Laceration without foreign body of left ring finger with damage to nail, sequela
S61.316S	Laceration without foreign body of right little finger with damage to nail, sequela
S61.317S	Laceration without foreign body of left little finger with damage to nail, sequela
S61.318S	Laceration without foreign body of other finger with damage to nail, sequela
S61.319S	Laceration without foreign body of unspecified finger with damage to nail, sequela
S61.320S	Laceration with foreign body of right index finger with damage to nail, sequela
S61.321S	Laceration with foreign body of left index finger with damage to nail, sequela
S61.322S	Laceration with foreign body of right middle finger with damage to nail, sequela
S61.323S	Laceration with foreign body of left middle finger with damage to nail, sequela
S61.324S	Laceration with foreign body of right ring finger with damage to nail, sequela
S61.325S	Laceration with foreign body of left ring finger with damage to nail, sequela
S61.326S	Laceration with foreign body of right little finger with damage to nail, sequela
S61.327S	Laceration with foreign body of left little finger with damage to nail, sequela
S61.328S	Laceration with foreign body of other finger with damage to nail, sequela
S61.329S	Laceration with foreign body of unspecified finger with damage to nail, sequela
S61.330S	Puncture wound without foreign body of right index finger with damage to nail, sequela
S61.331S	Puncture wound without foreign body of left index finger with damage to nail, sequela
S61.332S	Puncture wound without foreign body of right middle finger with damage to nail, sequela
S61.333S	Puncture wound without foreign body of left middle finger with damage to nail, sequela
S61.334S	Puncture wound without foreign body of right ring finger with damage to nail, sequela
S61.335S	Puncture wound without foreign body of left ring finger with damage to nail, sequela



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Code	Description
S61.336S	Puncture wound without foreign body of right little finger with damage to nail, sequela
S61.337S	Puncture wound without foreign body of left little finger with damage to nail, sequela
S61.338S	Puncture wound without foreign body of other finger with damage to nail, sequela
S61.339S	Puncture wound without foreign body of unspecified finger with damage to nail, sequela
S61.340S	Puncture wound with foreign body of right index finger with damage to nail, sequela
S61.341S	Puncture wound with foreign body of left index finger with damage to nail, sequela
S61.342S	Puncture wound with foreign body of right middle finger with damage to nail, sequela
S61.343S	Puncture wound with foreign body of left middle finger with damage to nail, sequela
S61.344S	Puncture wound with foreign body of right ring finger with damage to nail, sequela
S61.345S	Puncture wound with foreign body of left ring finger with damage to nail, sequela
S61.346S	Puncture wound with foreign body of right little finger with damage to nail, sequela
S61.347S	Puncture wound with foreign body of left little finger with damage to nail, sequela
S61.348S	Puncture wound with foreign body of other finger with damage to nail, sequela
S61.349S	Puncture wound with foreign body of unspecified finger with damage to nail, sequela
S61.350S	Open bite of right index finger with damage to nail, sequela
S61.351S	Open bite of left index finger with damage to nail, sequela
S61.352S	Open bite of right middle finger with damage to nail, sequela
S61.353S	Open bite of left middle finger with damage to nail, sequela
S61.354S	Open bite of right ring finger with damage to nail, sequela
S61.355S	Open bite of left ring finger with damage to nail, sequela
S61.356S	Open bite of right little finger with damage to nail, sequela
S61.357S	Open bite of left little finger with damage to nail, sequela
S61.358S	Open bite of other finger with damage to nail, sequela
S61.359S	Open bite of unspecified finger with damage to nail, sequela
S61.401S	Unspecified open wound of right hand, sequela
S61.402S	Unspecified open wound of left hand, sequela
S61.409A	Unspecified open wound of unspecified hand, initial encounter
S61.409S	Unspecified open wound of unspecified hand, sequela
S61.411S	Laceration without foreign body of right hand, sequela
S61.412S	Laceration without foreign body of left hand, sequela



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Code	Description
S61.419S	Laceration without foreign body of unspecified hand, sequela
S61.421S	Laceration with foreign body of right hand, sequela
S61.422S	Laceration with foreign body of left hand, sequela
S61.429S	Laceration with foreign body of unspecified hand, sequela
S61.431S	Puncture wound without foreign body of right hand, sequela
S61.432S	Puncture wound without foreign body of left hand, sequela
S61.439S	Puncture wound without foreign body of unspecified hand, sequela
S61.441S	Puncture wound with foreign body of right hand, sequela
S61.442S	Puncture wound with foreign body of left hand, sequela
S61.449S	Puncture wound with foreign body of unspecified hand, sequela
S61.451S	Open bite of right hand, sequela
S61.452S	Open bite of left hand, sequela
S61.459S	Open bite of unspecified hand, sequela
S61.501S	Unspecified open wound of right wrist, sequela
S61.502S	Unspecified open wound of left wrist, sequela
S61.509A	Unspecified open wound of unspecified wrist, initial encounter
S61.509S	Unspecified open wound of unspecified wrist, sequela
S61.511S	Laceration without foreign body of right wrist, sequela
S61.512S	Laceration without foreign body of left wrist, sequela
S61.519S	Laceration without foreign body of unspecified wrist, sequela
S61.521S	Laceration with foreign body of right wrist, sequela
S61.522S	Laceration with foreign body of left wrist, sequela
S61.529S	Laceration with foreign body of unspecified wrist, sequela
S61.531S	Puncture wound without foreign body of right wrist, sequela
S61.532S	Puncture wound without foreign body of left wrist, sequela
S61.539S	Puncture wound without foreign body of unspecified wrist, sequela
S61.541S	Puncture wound with foreign body of right wrist, sequela
S61.542S	Puncture wound with foreign body of left wrist, sequela
S61.549S	Puncture wound with foreign body of unspecified wrist, sequela
S61.551S	Open bite of right wrist, sequela



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Code	Description
S61.552S	Open bite of left wrist, sequela
S61.559S	Open bite of unspecified wrist, sequela
S62.001D	Unspecified fracture of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with routine healing
S62.001G	Unspecified fracture of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with delayed healing
S62.001S	Unspecified fracture of navicular [scaphoid] bone of right wrist, sequela
S62.002D	Unspecified fracture of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with routine healing
S62.002G	Unspecified fracture of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with delayed healing
S62.002S	Unspecified fracture of navicular [scaphoid] bone of left wrist, sequela
S62.009D	Unspecified fracture of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with routine healing
S62.009G	Unspecified fracture of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with delayed healing
S62.009S	Unspecified fracture of navicular [scaphoid] bone of unspecified wrist, sequela
S62.011D	Displaced fracture of distal pole of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with routine healing
S62.011G	Displaced fracture of distal pole of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with delayed healing
S62.011S	Displaced fracture of distal pole of navicular [scaphoid] bone of right wrist, sequela
S62.012D	Displaced fracture of distal pole of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with routine healing
S62.012G	Displaced fracture of distal pole of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with delayed healing
S62.012S	Displaced fracture of distal pole of navicular [scaphoid] bone of left wrist, sequela
S62.013D	Displaced fracture of distal pole of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with routine healing
S62.013G	Displaced fracture of distal pole of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with delayed healing
S62.013S	Displaced fracture of distal pole of navicular [scaphoid] bone of unspecified wrist, sequela
S62.014D	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with routine healing

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Code	Description
S62.014G	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with delayed healing
S62.014S	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of right wrist, sequela
S62.015D	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with routine healing
S62.015G	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with delayed healing
S62.015S	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of left wrist, sequela
S62.016D	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with routine healing
S62.016G	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with delayed healing
S62.016S	Nondisplaced fracture of distal pole of navicular [scaphoid] bone of unspecified wrist, sequela
S62.021D	Displaced fracture of middle third of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with routine healing
S62.021G	Displaced fracture of middle third of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with delayed healing
S62.021S	Displaced fracture of middle third of navicular [scaphoid] bone of right wrist, sequela
S62.022D	Displaced fracture of middle third of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with routine healing
S62.022G	Displaced fracture of middle third of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with delayed healing
S62.022S	Displaced fracture of middle third of navicular [scaphoid] bone of left wrist, sequela
S62.023D	Displaced fracture of middle third of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with routine healing
S62.023G	Displaced fracture of middle third of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with delayed healing
S62.023S	Displaced fracture of middle third of navicular [scaphoid] bone of unspecified wrist, sequela
S62.024D	Nondisplaced fracture of middle third of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with routine healing
S62.024G	Nondisplaced fracture of middle third of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with delayed healing
S62.024S	Nondisplaced fracture of middle third of navicular [scaphoid] bone of right wrist, sequela

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Code	Description
S62.025D	Nondisplaced fracture of middle third of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with routine healing
S62.025G	Nondisplaced fracture of middle third of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with delayed healing
S62.025S	Nondisplaced fracture of middle third of navicular [scaphoid] bone of left wrist, sequela
S62.026D	Nondisplaced fracture of middle third of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with routine healing
S62.026G	Nondisplaced fracture of middle third of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with delayed healing
S62.026S	Nondisplaced fracture of middle third of navicular [scaphoid] bone of unspecified wrist, sequela
S62.031D	Displaced fracture of proximal third of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with routine healing
S62.031G	Displaced fracture of proximal third of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with delayed healing
S62.031S	Displaced fracture of proximal third of navicular [scaphoid] bone of right wrist, sequela
S62.032D	Displaced fracture of proximal third of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with routine healing
S62.032G	Displaced fracture of proximal third of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with delayed healing
S62.032S	Displaced fracture of proximal third of navicular [scaphoid] bone of left wrist, sequela
S62.033D	Displaced fracture of proximal third of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with routine healing
S62.033G	Displaced fracture of proximal third of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with delayed healing
S62.033S	Displaced fracture of proximal third of navicular [scaphoid] bone of unspecified wrist, sequela
S62.034D	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with routine healing
S62.034G	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of right wrist, subsequent encounter for fracture with delayed healing
S62.034S	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of right wrist, sequela
S62.035D	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with routine healing
S62.035G	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of left wrist, subsequent encounter for fracture with delayed healing

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Code	Description
S62.035S	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of left wrist, sequela
S62.036D	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with routine healing
S62.036G	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of unspecified wrist, subsequent encounter for fracture with delayed healing
S62.036S	Nondisplaced fracture of proximal third of navicular [scaphoid] bone of unspecified wrist, sequela
S62.101D	Fracture of unspecified carpal bone, right wrist, subsequent encounter for fracture with routine healing
S62.101G	Fracture of unspecified carpal bone, right wrist, subsequent encounter for fracture with delayed healing
S62.101S	Fracture of unspecified carpal bone, right wrist, sequela
S62.102D	Fracture of unspecified carpal bone, left wrist, subsequent encounter for fracture with routine healing
S62.102G	Fracture of unspecified carpal bone, left wrist, subsequent encounter for fracture with delayed healing
S62.102S	Fracture of unspecified carpal bone, left wrist, sequela
S62.109D	Fracture of unspecified carpal bone, unspecified wrist, subsequent encounter for fracture with routine healing
S62.109G	Fracture of unspecified carpal bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.109S	Fracture of unspecified carpal bone, unspecified wrist, sequela
S62.111D	Displaced fracture of triquetrum [cuneiform] bone, right wrist, subsequent encounter for fracture with routine healing
S62.111G	Displaced fracture of triquetrum [cuneiform] bone, right wrist, subsequent encounter for fracture with delayed healing
S62.111S	Displaced fracture of triquetrum [cuneiform] bone, right wrist, sequela
S62.112D	Displaced fracture of triquetrum [cuneiform] bone, left wrist, subsequent encounter for fracture with routine healing
S62.112G	Displaced fracture of triquetrum [cuneiform] bone, left wrist, subsequent encounter for fracture with delayed healing
S62.112S	Displaced fracture of triquetrum [cuneiform] bone, left wrist, sequela
S62.113D	Displaced fracture of triquetrum [cuneiform] bone, unspecified wrist, subsequent encounter for fracture with routine healing



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Code	Description
S62.113G	Displaced fracture of triquetrum [cuneiform] bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.113S	Displaced fracture of triquetrum [cuneiform] bone, unspecified wrist, sequela
S62.114D	Nondisplaced fracture of triquetrum [cuneiform] bone, right wrist, subsequent encounter for fracture with routine healing
S62.114G	Nondisplaced fracture of triquetrum [cuneiform] bone, right wrist, subsequent encounter for fracture with delayed healing
S62.114S	Nondisplaced fracture of triquetrum [cuneiform] bone, right wrist, sequela
S62.115D	Nondisplaced fracture of triquetrum [cuneiform] bone, left wrist, subsequent encounter for fracture with routine healing
S62.115G	Nondisplaced fracture of triquetrum [cuneiform] bone, left wrist, subsequent encounter for fracture with delayed healing
S62.115S	Nondisplaced fracture of triquetrum [cuneiform] bone, left wrist, sequela
S62.116D	Nondisplaced fracture of triquetrum [cuneiform] bone, unspecified wrist, subsequent encounter for fracture with routine healing
S62.116G	Nondisplaced fracture of triquetrum [cuneiform] bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.116S	Nondisplaced fracture of triquetrum [cuneiform] bone, unspecified wrist, sequela
S62.121D	Displaced fracture of lunate [semilunar], right wrist, subsequent encounter for fracture with routine healing
S62.121G	Displaced fracture of lunate [semilunar], right wrist, subsequent encounter for fracture with delayed healing
S62.121S	Displaced fracture of lunate [semilunar], right wrist, sequela
S62.122D	Displaced fracture of lunate [semilunar], left wrist, subsequent encounter for fracture with routine healing
S62.122G	Displaced fracture of lunate [semilunar], left wrist, subsequent encounter for fracture with delayed healing
S62.122S	Displaced fracture of lunate [semilunar], left wrist, sequela
S62.123D	Displaced fracture of lunate [semilunar], unspecified wrist, subsequent encounter for fracture with routine healing
S62.123G	Displaced fracture of lunate [semilunar], unspecified wrist, subsequent encounter for fracture with delayed healing
S62.123S	Displaced fracture of lunate [semilunar], unspecified wrist, sequela
S62.124D	Nondisplaced fracture of lunate [semilunar], right wrist, subsequent encounter for fracture with routine healing



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Code	Description
S62.124G	Nondisplaced fracture of lunate [semilunar], right wrist, subsequent encounter for fracture with delayed healing
S62.124S	Nondisplaced fracture of lunate [semilunar], right wrist, sequela
S62.125D	Nondisplaced fracture of lunate [semilunar], left wrist, subsequent encounter for fracture with routine healing
S62.125G	Nondisplaced fracture of lunate [semilunar], left wrist, subsequent encounter for fracture with delayed healing
S62.125S	Nondisplaced fracture of lunate [semilunar], left wrist, sequela
S62.126D	Nondisplaced fracture of lunate [semilunar], unspecified wrist, subsequent encounter for fracture with routine healing
S62.126G	Nondisplaced fracture of lunate [semilunar], unspecified wrist, subsequent encounter for fracture with delayed healing
S62.126S	Nondisplaced fracture of lunate [semilunar], unspecified wrist, sequela
S62.131D	Displaced fracture of capitate [os magnum] bone, right wrist, subsequent encounter for fracture with routine healing
S62.131G	Displaced fracture of capitate [os magnum] bone, right wrist, subsequent encounter for fracture with delayed healing
S62.131S	Displaced fracture of capitate [os magnum] bone, right wrist, sequela
S62.132D	Displaced fracture of capitate [os magnum] bone, left wrist, subsequent encounter for fracture with routine healing
S62.132G	Displaced fracture of capitate [os magnum] bone, left wrist, subsequent encounter for fracture with delayed healing
S62.132S	Displaced fracture of capitate [os magnum] bone, left wrist, sequela
S62.133D	Displaced fracture of capitate [os magnum] bone, unspecified wrist, subsequent encounter for fracture with routine healing
S62.133G	Displaced fracture of capitate [os magnum] bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.133S	Displaced fracture of capitate [os magnum] bone, unspecified wrist, sequela
S62.134D	Nondisplaced fracture of capitate [os magnum] bone, right wrist, subsequent encounter for fracture with routine healing
S62.134G	Nondisplaced fracture of capitate [os magnum] bone, right wrist, subsequent encounter for fracture with delayed healing
S62.134S	Nondisplaced fracture of capitate [os magnum] bone, right wrist, sequela
S62.135D	Nondisplaced fracture of capitate [os magnum] bone, left wrist, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.135G	Nondisplaced fracture of capitate [os magnum] bone, left wrist, subsequent encounter for fracture with delayed healing
S62.135S	Nondisplaced fracture of capitate [os magnum] bone, left wrist, sequela
S62.136D	Nondisplaced fracture of capitate [os magnum] bone, unspecified wrist, subsequent encounter for fracture with routine healing
S62.136G	Nondisplaced fracture of capitate [os magnum] bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.136S	Nondisplaced fracture of capitate [os magnum] bone, unspecified wrist, sequela
S62.141D	Displaced fracture of body of hamate [unciform] bone, right wrist, subsequent encounter for fracture with routine healing
S62.141G	Displaced fracture of body of hamate [unciform] bone, right wrist, subsequent encounter for fracture with delayed healing
S62.141S	Displaced fracture of body of hamate [unciform] bone, right wrist, sequela
S62.142D	Displaced fracture of body of hamate [unciform] bone, left wrist, subsequent encounter for fracture with routine healing
S62.142G	Displaced fracture of body of hamate [unciform] bone, left wrist, subsequent encounter for fracture with delayed healing
S62.142S	Displaced fracture of body of hamate [unciform] bone, left wrist, sequela
S62.143D	Displaced fracture of body of hamate [unciform] bone, unspecified wrist, subsequent encounter for fracture with routine healing
S62.143G	Displaced fracture of body of hamate [unciform] bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.143S	Displaced fracture of body of hamate [unciform] bone, unspecified wrist, sequela
S62.144D	Nondisplaced fracture of body of hamate [unciform] bone, right wrist, subsequent encounter for fracture with routine healing
S62.144G	Nondisplaced fracture of body of hamate [unciform] bone, right wrist, subsequent encounter for fracture with delayed healing
S62.144S	Nondisplaced fracture of body of hamate [unciform] bone, right wrist, sequela
S62.145D	Nondisplaced fracture of body of hamate [unciform] bone, left wrist, subsequent encounter for fracture with routine healing
S62.145G	Nondisplaced fracture of body of hamate [unciform] bone, left wrist, subsequent encounter for fracture with delayed healing
S62.145S	Nondisplaced fracture of body of hamate [unciform] bone, left wrist, sequela
S62.146D	Nondisplaced fracture of body of hamate [unciform] bone, unspecified wrist, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
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Code	Description
S62.146G	Nondisplaced fracture of body of hamate [unciform] bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.146S	Nondisplaced fracture of body of hamate [unciform] bone, unspecified wrist, sequela
S62.151D	Displaced fracture of hook process of hamate [unciform] bone, right wrist, subsequent encounter for fracture with routine healing
S62.151G	Displaced fracture of hook process of hamate [unciform] bone, right wrist, subsequent encounter for fracture with delayed healing
S62.151S	Displaced fracture of hook process of hamate [unciform] bone, right wrist, sequela
S62.152D	Displaced fracture of hook process of hamate [unciform] bone, left wrist, subsequent encounter for fracture with routine healing
S62.152G	Displaced fracture of hook process of hamate [unciform] bone, left wrist, subsequent encounter for fracture with delayed healing
S62.152S	Displaced fracture of hook process of hamate [unciform] bone, left wrist, sequela
S62.153D	Displaced fracture of hook process of hamate [unciform] bone, unspecified wrist, subsequent encounter for fracture with routine healing
S62.153G	Displaced fracture of hook process of hamate [unciform] bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.153S	Displaced fracture of hook process of hamate [unciform] bone, unspecified wrist, sequela
S62.154D	Nondisplaced fracture of hook process of hamate [unciform] bone, right wrist, subsequent encounter for fracture with routine healing
S62.154G	Nondisplaced fracture of hook process of hamate [unciform] bone, right wrist, subsequent encounter for fracture with delayed healing
S62.154S	Nondisplaced fracture of hook process of hamate [unciform] bone, right wrist, sequela
S62.155D	Nondisplaced fracture of hook process of hamate [unciform] bone, left wrist, subsequent encounter for fracture with routine healing
S62.155G	Nondisplaced fracture of hook process of hamate [unciform] bone, left wrist, subsequent encounter for fracture with delayed healing
S62.155S	Nondisplaced fracture of hook process of hamate [unciform] bone, left wrist, sequela
S62.156D	Nondisplaced fracture of hook process of hamate [unciform] bone, unspecified wrist, subsequent encounter for fracture with routine healing
S62.156G	Nondisplaced fracture of hook process of hamate [unciform] bone, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.156S	Nondisplaced fracture of hook process of hamate [unciform] bone, unspecified wrist, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.161D	Displaced fracture of pisiform, right wrist, subsequent encounter for fracture with routine healing
S62.161G	Displaced fracture of pisiform, right wrist, subsequent encounter for fracture with delayed healing
S62.161S	Displaced fracture of pisiform, right wrist, sequela
S62.162D	Displaced fracture of pisiform, left wrist, subsequent encounter for fracture with routine healing
S62.162G	Displaced fracture of pisiform, left wrist, subsequent encounter for fracture with delayed healing
S62.162S	Displaced fracture of pisiform, left wrist, sequela
S62.163D	Displaced fracture of pisiform, unspecified wrist, subsequent encounter for fracture with routine healing
S62.163G	Displaced fracture of pisiform, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.163S	Displaced fracture of pisiform, unspecified wrist, sequela
S62.164D	Nondisplaced fracture of pisiform, right wrist, subsequent encounter for fracture with routine healing
S62.164G	Nondisplaced fracture of pisiform, right wrist, subsequent encounter for fracture with delayed healing
S62.164S	Nondisplaced fracture of pisiform, right wrist, sequela
S62.165D	Nondisplaced fracture of pisiform, left wrist, subsequent encounter for fracture with routine healing
S62.165G	Nondisplaced fracture of pisiform, left wrist, subsequent encounter for fracture with delayed healing
S62.165S	Nondisplaced fracture of pisiform, left wrist, sequela
S62.166D	Nondisplaced fracture of pisiform, unspecified wrist, subsequent encounter for fracture with routine healing
S62.166G	Nondisplaced fracture of pisiform, unspecified wrist, subsequent encounter for fracture with delayed healing
S62.166S	Nondisplaced fracture of pisiform, unspecified wrist, sequela
S62.171D	Displaced fracture of trapezium [larger multangular], right wrist, subsequent encounter for fracture with routine healing
S62.171G	Displaced fracture of trapezium [larger multangular], right wrist, subsequent encounter for fracture with delayed healing
S62.171S	Displaced fracture of trapezium [larger multangular], right wrist, sequela

NCD 190.15

***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.172D	Displaced fracture of trapezium [larger multangular], left wrist, subsequent encounter for fracture with routine healing
S62.172G	Displaced fracture of trapezium [larger multangular], left wrist, subsequent encounter for fracture with delayed healing
S62.172S	Displaced fracture of trapezium [larger multangular], left wrist, sequela
S62.173D	Displaced fracture of trapezium [larger multangular], unspecified wrist, subsequent encounter for fracture with routine healing
S62.173G	Displaced fracture of trapezium [larger multangular], unspecified wrist, subsequent encounter for fracture with delayed healing
S62.173S	Displaced fracture of trapezium [larger multangular], unspecified wrist, sequela
S62.174D	Nondisplaced fracture of trapezium [larger multangular], right wrist, subsequent encounter for fracture with routine healing
S62.174G	Nondisplaced fracture of trapezium [larger multangular], right wrist, subsequent encounter for fracture with delayed healing
S62.174S	Nondisplaced fracture of trapezium [larger multangular], right wrist, sequela
S62.175D	Nondisplaced fracture of trapezium [larger multangular], left wrist, subsequent encounter for fracture with routine healing
S62.175G	Nondisplaced fracture of trapezium [larger multangular], left wrist, subsequent encounter for fracture with delayed healing
S62.175S	Nondisplaced fracture of trapezium [larger multangular], left wrist, sequela
S62.176D	Nondisplaced fracture of trapezium [larger multangular], unspecified wrist, subsequent encounter for fracture with routine healing
S62.176G	Nondisplaced fracture of trapezium [larger multangular], unspecified wrist, subsequent encounter for fracture with delayed healing
S62.176S	Nondisplaced fracture of trapezium [larger multangular], unspecified wrist, sequela
S62.181D	Displaced fracture of trapezoid [smaller multangular], right wrist, subsequent encounter for fracture with routine healing
S62.181G	Displaced fracture of trapezoid [smaller multangular], right wrist, subsequent encounter for fracture with delayed healing
S62.181S	Displaced fracture of trapezoid [smaller multangular], right wrist, sequela
S62.182D	Displaced fracture of trapezoid [smaller multangular], left wrist, subsequent encounter for fracture with routine healing
S62.182G	Displaced fracture of trapezoid [smaller multangular], left wrist, subsequent encounter for fracture with delayed healing
S62.182S	Displaced fracture of trapezoid [smaller multangular], left wrist, sequela

NCD 190.15

***April 2017 Changes
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Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
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Code	Description
S62.183D	Displaced fracture of trapezoid [smaller multangular], unspecified wrist, subsequent encounter for fracture with routine healing
S62.183G	Displaced fracture of trapezoid [smaller multangular], unspecified wrist, subsequent encounter for fracture with delayed healing
S62.183S	Displaced fracture of trapezoid [smaller multangular], unspecified wrist, sequela
S62.184D	Nondisplaced fracture of trapezoid [smaller multangular], right wrist, subsequent encounter for fracture with routine healing
S62.184G	Nondisplaced fracture of trapezoid [smaller multangular], right wrist, subsequent encounter for fracture with delayed healing
S62.184S	Nondisplaced fracture of trapezoid [smaller multangular], right wrist, sequela
S62.185D	Nondisplaced fracture of trapezoid [smaller multangular], left wrist, subsequent encounter for fracture with routine healing
S62.185G	Nondisplaced fracture of trapezoid [smaller multangular], left wrist, subsequent encounter for fracture with delayed healing
S62.185S	Nondisplaced fracture of trapezoid [smaller multangular], left wrist, sequela
S62.186D	Nondisplaced fracture of trapezoid [smaller multangular], unspecified wrist, subsequent encounter for fracture with routine healing
S62.186G	Nondisplaced fracture of trapezoid [smaller multangular], unspecified wrist, subsequent encounter for fracture with delayed healing
S62.186S	Nondisplaced fracture of trapezoid [smaller multangular], unspecified wrist, sequela
S62.201D	Unspecified fracture of first metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.201G	Unspecified fracture of first metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.201S	Unspecified fracture of first metacarpal bone, right hand, sequela
S62.202D	Unspecified fracture of first metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.202G	Unspecified fracture of first metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.202S	Unspecified fracture of first metacarpal bone, left hand, sequela
S62.209D	Unspecified fracture of first metacarpal bone, unspecified hand, subsequent encounter for fracture with routine healing
S62.209G	Unspecified fracture of first metacarpal bone, unspecified hand, subsequent encounter for fracture with delayed healing
S62.209S	Unspecified fracture of first metacarpal bone, unspecified hand, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S62.211D	Bennett's fracture, right hand, subsequent encounter for fracture with routine healing
S62.211G	Bennett's fracture, right hand, subsequent encounter for fracture with delayed healing
S62.211S	Bennett's fracture, right hand, sequela
S62.212D	Bennett's fracture, left hand, subsequent encounter for fracture with routine healing
S62.212G	Bennett's fracture, left hand, subsequent encounter for fracture with delayed healing
S62.212S	Bennett's fracture, left hand, sequela
S62.213D	Bennett's fracture, unspecified hand, subsequent encounter for fracture with routine healing
S62.213G	Bennett's fracture, unspecified hand, subsequent encounter for fracture with delayed healing
S62.213S	Bennett's fracture, unspecified hand, sequela
S62.221D	Displaced Rolando's fracture, right hand, subsequent encounter for fracture with routine healing
S62.221G	Displaced Rolando's fracture, right hand, subsequent encounter for fracture with delayed healing
S62.221S	Displaced Rolando's fracture, right hand, sequela
S62.222D	Displaced Rolando's fracture, left hand, subsequent encounter for fracture with routine healing
S62.222G	Displaced Rolando's fracture, left hand, subsequent encounter for fracture with delayed healing
S62.222S	Displaced Rolando's fracture, left hand, sequela
S62.223D	Displaced Rolando's fracture, unspecified hand, subsequent encounter for fracture with routine healing
S62.223G	Displaced Rolando's fracture, unspecified hand, subsequent encounter for fracture with delayed healing
S62.223S	Displaced Rolando's fracture, unspecified hand, sequela
S62.224D	Nondisplaced Rolando's fracture, right hand, subsequent encounter for fracture with routine healing
S62.224G	Nondisplaced Rolando's fracture, right hand, subsequent encounter for fracture with delayed healing
S62.224S	Nondisplaced Rolando's fracture, right hand, sequela
S62.225D	Nondisplaced Rolando's fracture, left hand, subsequent encounter for fracture with routine healing



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Code	Description
S62.225G	Nondisplaced Rolando's fracture, left hand, subsequent encounter for fracture with delayed healing
S62.225S	Nondisplaced Rolando's fracture, left hand, sequela
S62.226D	Nondisplaced Rolando's fracture, unspecified hand, subsequent encounter for fracture with routine healing
S62.226G	Nondisplaced Rolando's fracture, unspecified hand, subsequent encounter for fracture with delayed healing
S62.226S	Nondisplaced Rolando's fracture, unspecified hand, sequela
S62.231D	Other displaced fracture of base of first metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.231G	Other displaced fracture of base of first metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.231S	Other displaced fracture of base of first metacarpal bone, right hand, sequela
S62.232D	Other displaced fracture of base of first metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.232G	Other displaced fracture of base of first metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.232S	Other displaced fracture of base of first metacarpal bone, left hand, sequela
S62.233D	Other displaced fracture of base of first metacarpal bone, unspecified hand, subsequent encounter for fracture with routine healing
S62.233G	Other displaced fracture of base of first metacarpal bone, unspecified hand, subsequent encounter for fracture with delayed healing
S62.233S	Other displaced fracture of base of first metacarpal bone, unspecified hand, sequela
S62.234D	Other nondisplaced fracture of base of first metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.234G	Other nondisplaced fracture of base of first metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.234S	Other nondisplaced fracture of base of first metacarpal bone, right hand, sequela
S62.235D	Other nondisplaced fracture of base of first metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.235G	Other nondisplaced fracture of base of first metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.235S	Other nondisplaced fracture of base of first metacarpal bone, left hand, sequela
S62.236D	Other nondisplaced fracture of base of first metacarpal bone, unspecified hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.236G	Other nondisplaced fracture of base of first metacarpal bone, unspecified hand, subsequent encounter for fracture with delayed healing
S62.236S	Other nondisplaced fracture of base of first metacarpal bone, unspecified hand, sequela
S62.241D	Displaced fracture of shaft of first metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.241G	Displaced fracture of shaft of first metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.241S	Displaced fracture of shaft of first metacarpal bone, right hand, sequela
S62.242D	Displaced fracture of shaft of first metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.242G	Displaced fracture of shaft of first metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.242S	Displaced fracture of shaft of first metacarpal bone, left hand, sequela
S62.243D	Displaced fracture of shaft of first metacarpal bone, unspecified hand, subsequent encounter for fracture with routine healing
S62.243G	Displaced fracture of shaft of first metacarpal bone, unspecified hand, subsequent encounter for fracture with delayed healing
S62.243S	Displaced fracture of shaft of first metacarpal bone, unspecified hand, sequela
S62.244D	Nondisplaced fracture of shaft of first metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.244G	Nondisplaced fracture of shaft of first metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.244S	Nondisplaced fracture of shaft of first metacarpal bone, right hand, sequela
S62.245D	Nondisplaced fracture of shaft of first metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.245G	Nondisplaced fracture of shaft of first metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.245S	Nondisplaced fracture of shaft of first metacarpal bone, left hand, sequela
S62.246D	Nondisplaced fracture of shaft of first metacarpal bone, unspecified hand, subsequent encounter for fracture with routine healing
S62.246G	Nondisplaced fracture of shaft of first metacarpal bone, unspecified hand, subsequent encounter for fracture with delayed healing
S62.246S	Nondisplaced fracture of shaft of first metacarpal bone, unspecified hand, sequela
S62.251D	Displaced fracture of neck of first metacarpal bone, right hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.251G	Displaced fracture of neck of first metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.251S	Displaced fracture of neck of first metacarpal bone, right hand, sequela
S62.252D	Displaced fracture of neck of first metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.252G	Displaced fracture of neck of first metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.252S	Displaced fracture of neck of first metacarpal bone, left hand, sequela
S62.253D	Displaced fracture of neck of first metacarpal bone, unspecified hand, subsequent encounter for fracture with routine healing
S62.253G	Displaced fracture of neck of first metacarpal bone, unspecified hand, subsequent encounter for fracture with delayed healing
S62.253S	Displaced fracture of neck of first metacarpal bone, unspecified hand, sequela
S62.254D	Nondisplaced fracture of neck of first metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.254G	Nondisplaced fracture of neck of first metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.254S	Nondisplaced fracture of neck of first metacarpal bone, right hand, sequela
S62.255D	Nondisplaced fracture of neck of first metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.255G	Nondisplaced fracture of neck of first metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.255S	Nondisplaced fracture of neck of first metacarpal bone, left hand, sequela
S62.256D	Nondisplaced fracture of neck of first metacarpal bone, unspecified hand, subsequent encounter for fracture with routine healing
S62.256G	Nondisplaced fracture of neck of first metacarpal bone, unspecified hand, subsequent encounter for fracture with delayed healing
S62.256S	Nondisplaced fracture of neck of first metacarpal bone, unspecified hand, sequela
S62.291D	Other fracture of first metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.291G	Other fracture of first metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.291S	Other fracture of first metacarpal bone, right hand, sequela
S62.292D	Other fracture of first metacarpal bone, left hand, subsequent encounter for fracture with routine healing



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Code	Description
S62.292G	Other fracture of first metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.292S	Other fracture of first metacarpal bone, left hand, sequela
S62.299D	Other fracture of first metacarpal bone, unspecified hand, subsequent encounter for fracture with routine healing
S62.299G	Other fracture of first metacarpal bone, unspecified hand, subsequent encounter for fracture with delayed healing
S62.299S	Other fracture of first metacarpal bone, unspecified hand, sequela
S62.300D	Unspecified fracture of second metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.300G	Unspecified fracture of second metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.300S	Unspecified fracture of second metacarpal bone, right hand, sequela
S62.301D	Unspecified fracture of second metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.301G	Unspecified fracture of second metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.301S	Unspecified fracture of second metacarpal bone, left hand, sequela
S62.302D	Unspecified fracture of third metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.302G	Unspecified fracture of third metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.302S	Unspecified fracture of third metacarpal bone, right hand, sequela
S62.303D	Unspecified fracture of third metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.303G	Unspecified fracture of third metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.303S	Unspecified fracture of third metacarpal bone, left hand, sequela
S62.304D	Unspecified fracture of fourth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.304G	Unspecified fracture of fourth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.304S	Unspecified fracture of fourth metacarpal bone, right hand, sequela
S62.305D	Unspecified fracture of fourth metacarpal bone, left hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.305G	Unspecified fracture of fourth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.305S	Unspecified fracture of fourth metacarpal bone, left hand, sequela
S62.306D	Unspecified fracture of fifth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.306G	Unspecified fracture of fifth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.306S	Unspecified fracture of fifth metacarpal bone, right hand, sequela
S62.307D	Unspecified fracture of fifth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.307G	Unspecified fracture of fifth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.307S	Unspecified fracture of fifth metacarpal bone, left hand, sequela
S62.308D	Unspecified fracture of other metacarpal bone, subsequent encounter for fracture with routine healing
S62.308G	Unspecified fracture of other metacarpal bone, subsequent encounter for fracture with delayed healing
S62.308S	Unspecified fracture of other metacarpal bone, sequela
S62.309D	Unspecified fracture of unspecified metacarpal bone, subsequent encounter for fracture with routine healing
S62.309G	Unspecified fracture of unspecified metacarpal bone, subsequent encounter for fracture with delayed healing
S62.309S	Unspecified fracture of unspecified metacarpal bone, sequela
S62.310D	Displaced fracture of base of second metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.310G	Displaced fracture of base of second metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.310S	Displaced fracture of base of second metacarpal bone, right hand, sequela
S62.311D	Displaced fracture of base of second metacarpal bone. left hand, subsequent encounter for fracture with routine healing
S62.311G	Displaced fracture of base of second metacarpal bone. left hand, subsequent encounter for fracture with delayed healing
S62.311S	Displaced fracture of base of second metacarpal bone. left hand, sequela
S62.312D	Displaced fracture of base of third metacarpal bone, right hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.312G	Displaced fracture of base of third metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.312S	Displaced fracture of base of third metacarpal bone, right hand, sequela
S62.313D	Displaced fracture of base of third metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.313G	Displaced fracture of base of third metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.313S	Displaced fracture of base of third metacarpal bone, left hand, sequela
S62.314D	Displaced fracture of base of fourth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.314G	Displaced fracture of base of fourth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.314S	Displaced fracture of base of fourth metacarpal bone, right hand, sequela
S62.315D	Displaced fracture of base of fourth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.315G	Displaced fracture of base of fourth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.315S	Displaced fracture of base of fourth metacarpal bone, left hand, sequela
S62.316D	Displaced fracture of base of fifth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.316G	Displaced fracture of base of fifth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.316S	Displaced fracture of base of fifth metacarpal bone, right hand, sequela
S62.317D	Displaced fracture of base of fifth metacarpal bone. left hand, subsequent encounter for fracture with routine healing
S62.317G	Displaced fracture of base of fifth metacarpal bone. left hand, subsequent encounter for fracture with delayed healing
S62.317S	Displaced fracture of base of fifth metacarpal bone. left hand, sequela
S62.318D	Displaced fracture of base of other metacarpal bone, subsequent encounter for fracture with routine healing
S62.318G	Displaced fracture of base of other metacarpal bone, subsequent encounter for fracture with delayed healing
S62.318S	Displaced fracture of base of other metacarpal bone, sequela
S62.319D	Displaced fracture of base of unspecified metacarpal bone, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.319G	Displaced fracture of base of unspecified metacarpal bone, subsequent encounter for fracture with delayed healing
S62.319S	Displaced fracture of base of unspecified metacarpal bone, sequela
S62.320D	Displaced fracture of shaft of second metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.320G	Displaced fracture of shaft of second metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.320S	Displaced fracture of shaft of second metacarpal bone, right hand, sequela
S62.321D	Displaced fracture of shaft of second metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.321G	Displaced fracture of shaft of second metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.321S	Displaced fracture of shaft of second metacarpal bone, left hand, sequela
S62.322D	Displaced fracture of shaft of third metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.322G	Displaced fracture of shaft of third metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.322S	Displaced fracture of shaft of third metacarpal bone, right hand, sequela
S62.323D	Displaced fracture of shaft of third metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.323G	Displaced fracture of shaft of third metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.323S	Displaced fracture of shaft of third metacarpal bone, left hand, sequela
S62.324D	Displaced fracture of shaft of fourth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.324G	Displaced fracture of shaft of fourth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.324S	Displaced fracture of shaft of fourth metacarpal bone, right hand, sequela
S62.325D	Displaced fracture of shaft of fourth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.325G	Displaced fracture of shaft of fourth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.325S	Displaced fracture of shaft of fourth metacarpal bone, left hand, sequela
S62.326D	Displaced fracture of shaft of fifth metacarpal bone, right hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.326G	Displaced fracture of shaft of fifth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.326S	Displaced fracture of shaft of fifth metacarpal bone, right hand, sequela
S62.327D	Displaced fracture of shaft of fifth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.327G	Displaced fracture of shaft of fifth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.327S	Displaced fracture of shaft of fifth metacarpal bone, left hand, sequela
S62.328D	Displaced fracture of shaft of other metacarpal bone, subsequent encounter for fracture with routine healing
S62.328G	Displaced fracture of shaft of other metacarpal bone, subsequent encounter for fracture with delayed healing
S62.328S	Displaced fracture of shaft of other metacarpal bone, sequela
S62.329D	Displaced fracture of shaft of unspecified metacarpal bone, subsequent encounter for fracture with routine healing
S62.329G	Displaced fracture of shaft of unspecified metacarpal bone, subsequent encounter for fracture with delayed healing
S62.329S	Displaced fracture of shaft of unspecified metacarpal bone, sequela
S62.330D	Displaced fracture of neck of second metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.330G	Displaced fracture of neck of second metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.330S	Displaced fracture of neck of second metacarpal bone, right hand, sequela
S62.331D	Displaced fracture of neck of second metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.331G	Displaced fracture of neck of second metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.331S	Displaced fracture of neck of second metacarpal bone, left hand, sequela
S62.332D	Displaced fracture of neck of third metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.332G	Displaced fracture of neck of third metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.332S	Displaced fracture of neck of third metacarpal bone, right hand, sequela
S62.333D	Displaced fracture of neck of third metacarpal bone, left hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.333G	Displaced fracture of neck of third metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.333S	Displaced fracture of neck of third metacarpal bone, left hand, sequela
S62.334D	Displaced fracture of neck of fourth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.334G	Displaced fracture of neck of fourth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.334S	Displaced fracture of neck of fourth metacarpal bone, right hand, sequela
S62.335D	Displaced fracture of neck of fourth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.335G	Displaced fracture of neck of fourth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.335S	Displaced fracture of neck of fourth metacarpal bone, left hand, sequela
S62.336D	Displaced fracture of neck of fifth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.336G	Displaced fracture of neck of fifth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.336S	Displaced fracture of neck of fifth metacarpal bone, right hand, sequela
S62.337D	Displaced fracture of neck of fifth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.337G	Displaced fracture of neck of fifth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.337S	Displaced fracture of neck of fifth metacarpal bone, left hand, sequela
S62.338D	Displaced fracture of neck of other metacarpal bone, subsequent encounter for fracture with routine healing
S62.338G	Displaced fracture of neck of other metacarpal bone, subsequent encounter for fracture with delayed healing
S62.338S	Displaced fracture of neck of other metacarpal bone, sequela
S62.339D	Displaced fracture of neck of unspecified metacarpal bone, subsequent encounter for fracture with routine healing
S62.339G	Displaced fracture of neck of unspecified metacarpal bone, subsequent encounter for fracture with delayed healing
S62.339S	Displaced fracture of neck of unspecified metacarpal bone, sequela
S62.340D	Nondisplaced fracture of base of second metacarpal bone, right hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.340G	Nondisplaced fracture of base of second metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.340S	Nondisplaced fracture of base of second metacarpal bone, right hand, sequela
S62.341D	Nondisplaced fracture of base of second metacarpal bone. left hand, subsequent encounter for fracture with routine healing
S62.341G	Nondisplaced fracture of base of second metacarpal bone. left hand, subsequent encounter for fracture with delayed healing
S62.341S	Nondisplaced fracture of base of second metacarpal bone. left hand, sequela
S62.342D	Nondisplaced fracture of base of third metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.342G	Nondisplaced fracture of base of third metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.342S	Nondisplaced fracture of base of third metacarpal bone, right hand, sequela
S62.343D	Nondisplaced fracture of base of third metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.343G	Nondisplaced fracture of base of third metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.343S	Nondisplaced fracture of base of third metacarpal bone, left hand, sequela
S62.344D	Nondisplaced fracture of base of fourth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.344G	Nondisplaced fracture of base of fourth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.344S	Nondisplaced fracture of base of fourth metacarpal bone, right hand, sequela
S62.345D	Nondisplaced fracture of base of fourth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.345G	Nondisplaced fracture of base of fourth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.345S	Nondisplaced fracture of base of fourth metacarpal bone, left hand, sequela
S62.346D	Nondisplaced fracture of base of fifth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.346G	Nondisplaced fracture of base of fifth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.346S	Nondisplaced fracture of base of fifth metacarpal bone, right hand, sequela
S62.347D	Nondisplaced fracture of base of fifth metacarpal bone. left hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.347G	Nondisplaced fracture of base of fifth metacarpal bone. left hand, subsequent encounter for fracture with delayed healing
S62.347S	Nondisplaced fracture of base of fifth metacarpal bone. left hand, sequela
S62.348D	Nondisplaced fracture of base of other metacarpal bone, subsequent encounter for fracture with routine healing
S62.348G	Nondisplaced fracture of base of other metacarpal bone, subsequent encounter for fracture with delayed healing
S62.348S	Nondisplaced fracture of base of other metacarpal bone, sequela
S62.349D	Nondisplaced fracture of base of unspecified metacarpal bone, subsequent encounter for fracture with routine healing
S62.349G	Nondisplaced fracture of base of unspecified metacarpal bone, subsequent encounter for fracture with delayed healing
S62.349S	Nondisplaced fracture of base of unspecified metacarpal bone, sequela
S62.350D	Nondisplaced fracture of shaft of second metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.350G	Nondisplaced fracture of shaft of second metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.350S	Nondisplaced fracture of shaft of second metacarpal bone, right hand, sequela
S62.351D	Nondisplaced fracture of shaft of second metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.351G	Nondisplaced fracture of shaft of second metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.351S	Nondisplaced fracture of shaft of second metacarpal bone, left hand, sequela
S62.352D	Nondisplaced fracture of shaft of third metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.352G	Nondisplaced fracture of shaft of third metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.352S	Nondisplaced fracture of shaft of third metacarpal bone, right hand, sequela
S62.353D	Nondisplaced fracture of shaft of third metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.353G	Nondisplaced fracture of shaft of third metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.353S	Nondisplaced fracture of shaft of third metacarpal bone, left hand, sequela
S62.354D	Nondisplaced fracture of shaft of fourth metacarpal bone, right hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.354G	Nondisplaced fracture of shaft of fourth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.354S	Nondisplaced fracture of shaft of fourth metacarpal bone, right hand, sequela
S62.355D	Nondisplaced fracture of shaft of fourth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.355G	Nondisplaced fracture of shaft of fourth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.355S	Nondisplaced fracture of shaft of fourth metacarpal bone, left hand, sequela
S62.356D	Nondisplaced fracture of shaft of fifth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.356G	Nondisplaced fracture of shaft of fifth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.356S	Nondisplaced fracture of shaft of fifth metacarpal bone, right hand, sequela
S62.357D	Nondisplaced fracture of shaft of fifth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.357G	Nondisplaced fracture of shaft of fifth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.357S	Nondisplaced fracture of shaft of fifth metacarpal bone, left hand, sequela
S62.358D	Nondisplaced fracture of shaft of other metacarpal bone, subsequent encounter for fracture with routine healing
S62.358G	Nondisplaced fracture of shaft of other metacarpal bone, subsequent encounter for fracture with delayed healing
S62.358S	Nondisplaced fracture of shaft of other metacarpal bone, sequela
S62.359D	Nondisplaced fracture of shaft of unspecified metacarpal bone, subsequent encounter for fracture with routine healing
S62.359G	Nondisplaced fracture of shaft of unspecified metacarpal bone, subsequent encounter for fracture with delayed healing
S62.359S	Nondisplaced fracture of shaft of unspecified metacarpal bone, sequela
S62.360D	Nondisplaced fracture of neck of second metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.360G	Nondisplaced fracture of neck of second metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.360S	Nondisplaced fracture of neck of second metacarpal bone, right hand, sequela
S62.361D	Nondisplaced fracture of neck of second metacarpal bone, left hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.361G	Nondisplaced fracture of neck of second metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.361S	Nondisplaced fracture of neck of second metacarpal bone, left hand, sequela
S62.362D	Nondisplaced fracture of neck of third metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.362G	Nondisplaced fracture of neck of third metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.362S	Nondisplaced fracture of neck of third metacarpal bone, right hand, sequela
S62.363D	Nondisplaced fracture of neck of third metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.363G	Nondisplaced fracture of neck of third metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.363S	Nondisplaced fracture of neck of third metacarpal bone, left hand, sequela
S62.364D	Nondisplaced fracture of neck of fourth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.364G	Nondisplaced fracture of neck of fourth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.364S	Nondisplaced fracture of neck of fourth metacarpal bone, right hand, sequela
S62.365D	Nondisplaced fracture of neck of fourth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.365G	Nondisplaced fracture of neck of fourth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.365S	Nondisplaced fracture of neck of fourth metacarpal bone, left hand, sequela
S62.366D	Nondisplaced fracture of neck of fifth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.366G	Nondisplaced fracture of neck of fifth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.366S	Nondisplaced fracture of neck of fifth metacarpal bone, right hand, sequela
S62.367D	Nondisplaced fracture of neck of fifth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.367G	Nondisplaced fracture of neck of fifth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.367S	Nondisplaced fracture of neck of fifth metacarpal bone, left hand, sequela
S62.368D	Nondisplaced fracture of neck of other metacarpal bone, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.368G	Nondisplaced fracture of neck of other metacarpal bone, subsequent encounter for fracture with delayed healing
S62.368S	Nondisplaced fracture of neck of other metacarpal bone, sequela
S62.369D	Nondisplaced fracture of neck of unspecified metacarpal bone, subsequent encounter for fracture with routine healing
S62.369G	Nondisplaced fracture of neck of unspecified metacarpal bone, subsequent encounter for fracture with delayed healing
S62.369S	Nondisplaced fracture of neck of unspecified metacarpal bone, sequela
S62.390D	Other fracture of second metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.390G	Other fracture of second metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.390S	Other fracture of second metacarpal bone, right hand, sequela
S62.391D	Other fracture of second metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.391G	Other fracture of second metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.391S	Other fracture of second metacarpal bone, left hand, sequela
S62.392D	Other fracture of third metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.392G	Other fracture of third metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.392S	Other fracture of third metacarpal bone, right hand, sequela
S62.393D	Other fracture of third metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.393G	Other fracture of third metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.393S	Other fracture of third metacarpal bone, left hand, sequela
S62.394D	Other fracture of fourth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.394G	Other fracture of fourth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.394S	Other fracture of fourth metacarpal bone, right hand, sequela
S62.395D	Other fracture of fourth metacarpal bone, left hand, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.395G	Other fracture of fourth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.395S	Other fracture of fourth metacarpal bone, left hand, sequela
S62.396D	Other fracture of fifth metacarpal bone, right hand, subsequent encounter for fracture with routine healing
S62.396G	Other fracture of fifth metacarpal bone, right hand, subsequent encounter for fracture with delayed healing
S62.396S	Other fracture of fifth metacarpal bone, right hand, sequela
S62.397D	Other fracture of fifth metacarpal bone, left hand, subsequent encounter for fracture with routine healing
S62.397G	Other fracture of fifth metacarpal bone, left hand, subsequent encounter for fracture with delayed healing
S62.397S	Other fracture of fifth metacarpal bone, left hand, sequela
S62.398D	Other fracture of other metacarpal bone, subsequent encounter for fracture with routine healing
S62.398G	Other fracture of other metacarpal bone, subsequent encounter for fracture with delayed healing
S62.398S	Other fracture of other metacarpal bone, sequela
S62.399D	Other fracture of unspecified metacarpal bone, subsequent encounter for fracture with routine healing
S62.399G	Other fracture of unspecified metacarpal bone, subsequent encounter for fracture with delayed healing
S62.399S	Other fracture of unspecified metacarpal bone, sequela
S62.501D	Fracture of unspecified phalanx of right thumb, subsequent encounter for fracture with routine healing
S62.501G	Fracture of unspecified phalanx of right thumb, subsequent encounter for fracture with delayed healing
S62.501S	Fracture of unspecified phalanx of right thumb, sequela
S62.502D	Fracture of unspecified phalanx of left thumb, subsequent encounter for fracture with routine healing
S62.502G	Fracture of unspecified phalanx of left thumb, subsequent encounter for fracture with delayed healing
S62.502S	Fracture of unspecified phalanx of left thumb, sequela
S62.509D	Fracture of unspecified phalanx of unspecified thumb, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.509G	Fracture of unspecified phalanx of unspecified thumb, subsequent encounter for fracture with delayed healing
S62.509S	Fracture of unspecified phalanx of unspecified thumb, sequela
S62.511D	Displaced fracture of proximal phalanx of right thumb, subsequent encounter for fracture with routine healing
S62.511G	Displaced fracture of proximal phalanx of right thumb, subsequent encounter for fracture with delayed healing
S62.511S	Displaced fracture of proximal phalanx of right thumb, sequela
S62.512D	Displaced fracture of proximal phalanx of left thumb, subsequent encounter for fracture with routine healing
S62.512G	Displaced fracture of proximal phalanx of left thumb, subsequent encounter for fracture with delayed healing
S62.512S	Displaced fracture of proximal phalanx of left thumb, sequela
S62.513D	Displaced fracture of proximal phalanx of unspecified thumb, subsequent encounter for fracture with routine healing
S62.513G	Displaced fracture of proximal phalanx of unspecified thumb, subsequent encounter for fracture with delayed healing
S62.513S	Displaced fracture of proximal phalanx of unspecified thumb, sequela
S62.514D	Nondisplaced fracture of proximal phalanx of right thumb, subsequent encounter for fracture with routine healing
S62.514G	Nondisplaced fracture of proximal phalanx of right thumb, subsequent encounter for fracture with delayed healing
S62.514S	Nondisplaced fracture of proximal phalanx of right thumb, sequela
S62.515D	Nondisplaced fracture of proximal phalanx of left thumb, subsequent encounter for fracture with routine healing
S62.515G	Nondisplaced fracture of proximal phalanx of left thumb, subsequent encounter for fracture with delayed healing
S62.515S	Nondisplaced fracture of proximal phalanx of left thumb, sequela
S62.516D	Nondisplaced fracture of proximal phalanx of unspecified thumb, subsequent encounter for fracture with routine healing
S62.516G	Nondisplaced fracture of proximal phalanx of unspecified thumb, subsequent encounter for fracture with delayed healing
S62.516S	Nondisplaced fracture of proximal phalanx of unspecified thumb, sequela
S62.521D	Displaced fracture of distal phalanx of right thumb, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.521G	Displaced fracture of distal phalanx of right thumb, subsequent encounter for fracture with delayed healing
S62.521S	Displaced fracture of distal phalanx of right thumb, sequela
S62.522D	Displaced fracture of distal phalanx of left thumb, subsequent encounter for fracture with routine healing
S62.522G	Displaced fracture of distal phalanx of left thumb, subsequent encounter for fracture with delayed healing
S62.522S	Displaced fracture of distal phalanx of left thumb, sequela
S62.523D	Displaced fracture of distal phalanx of unspecified thumb, subsequent encounter for fracture with routine healing
S62.523G	Displaced fracture of distal phalanx of unspecified thumb, subsequent encounter for fracture with delayed healing
S62.523S	Displaced fracture of distal phalanx of unspecified thumb, sequela
S62.524D	Nondisplaced fracture of distal phalanx of right thumb, subsequent encounter for fracture with routine healing
S62.524G	Nondisplaced fracture of distal phalanx of right thumb, subsequent encounter for fracture with delayed healing
S62.524S	Nondisplaced fracture of distal phalanx of right thumb, sequela
S62.525D	Nondisplaced fracture of distal phalanx of left thumb, subsequent encounter for fracture with routine healing
S62.525G	Nondisplaced fracture of distal phalanx of left thumb, subsequent encounter for fracture with delayed healing
S62.525S	Nondisplaced fracture of distal phalanx of left thumb, sequela
S62.526D	Nondisplaced fracture of distal phalanx of unspecified thumb, subsequent encounter for fracture with routine healing
S62.526G	Nondisplaced fracture of distal phalanx of unspecified thumb, subsequent encounter for fracture with delayed healing
S62.526S	Nondisplaced fracture of distal phalanx of unspecified thumb, sequela
S62.600D	Fracture of unspecified phalanx of right index finger, subsequent encounter for fracture with routine healing
S62.600G	Fracture of unspecified phalanx of right index finger, subsequent encounter for fracture with delayed healing
S62.600S	Fracture of unspecified phalanx of right index finger, sequela
S62.601D	Fracture of unspecified phalanx of left index finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.601G	Fracture of unspecified phalanx of left index finger, subsequent encounter for fracture with delayed healing
S62.601S	Fracture of unspecified phalanx of left index finger, sequela
S62.602D	Fracture of unspecified phalanx of right middle finger, subsequent encounter for fracture with routine healing
S62.602G	Fracture of unspecified phalanx of right middle finger, subsequent encounter for fracture with delayed healing
S62.602S	Fracture of unspecified phalanx of right middle finger, sequela
S62.603D	Fracture of unspecified phalanx of left middle finger, subsequent encounter for fracture with routine healing
S62.603G	Fracture of unspecified phalanx of left middle finger, subsequent encounter for fracture with delayed healing
S62.603S	Fracture of unspecified phalanx of left middle finger, sequela
S62.604D	Fracture of unspecified phalanx of right ring finger, subsequent encounter for fracture with routine healing
S62.604G	Fracture of unspecified phalanx of right ring finger, subsequent encounter for fracture with delayed healing
S62.604S	Fracture of unspecified phalanx of right ring finger, sequela
S62.605D	Fracture of unspecified phalanx of left ring finger, subsequent encounter for fracture with routine healing
S62.605G	Fracture of unspecified phalanx of left ring finger, subsequent encounter for fracture with delayed healing
S62.605S	Fracture of unspecified phalanx of left ring finger, sequela
S62.606D	Fracture of unspecified phalanx of right little finger, subsequent encounter for fracture with routine healing
S62.606G	Fracture of unspecified phalanx of right little finger, subsequent encounter for fracture with delayed healing
S62.606S	Fracture of unspecified phalanx of right little finger, sequela
S62.607D	Fracture of unspecified phalanx of left little finger, subsequent encounter for fracture with routine healing
S62.607G	Fracture of unspecified phalanx of left little finger, subsequent encounter for fracture with delayed healing
S62.607S	Fracture of unspecified phalanx of left little finger, sequela
S62.608D	Fracture of unspecified phalanx of other finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.608G	Fracture of unspecified phalanx of other finger, subsequent encounter for fracture with delayed healing
S62.608S	Fracture of unspecified phalanx of other finger, sequela
S62.609D	Fracture of unspecified phalanx of unspecified finger, subsequent encounter for fracture with routine healing
S62.609G	Fracture of unspecified phalanx of unspecified finger, subsequent encounter for fracture with delayed healing
S62.609S	Fracture of unspecified phalanx of unspecified finger, sequela
S62.610D	Displaced fracture of proximal phalanx of right index finger, subsequent encounter for fracture with routine healing
S62.610G	Displaced fracture of proximal phalanx of right index finger, subsequent encounter for fracture with delayed healing
S62.610S	Displaced fracture of proximal phalanx of right index finger, sequela
S62.611D	Displaced fracture of proximal phalanx of left index finger, subsequent encounter for fracture with routine healing
S62.611G	Displaced fracture of proximal phalanx of left index finger, subsequent encounter for fracture with delayed healing
S62.611S	Displaced fracture of proximal phalanx of left index finger, sequela
S62.612D	Displaced fracture of proximal phalanx of right middle finger, subsequent encounter for fracture with routine healing
S62.612G	Displaced fracture of proximal phalanx of right middle finger, subsequent encounter for fracture with delayed healing
S62.612S	Displaced fracture of proximal phalanx of right middle finger, sequela
S62.613D	Displaced fracture of proximal phalanx of left middle finger, subsequent encounter for fracture with routine healing
S62.613G	Displaced fracture of proximal phalanx of left middle finger, subsequent encounter for fracture with delayed healing
S62.613S	Displaced fracture of proximal phalanx of left middle finger, sequela
S62.614D	Displaced fracture of proximal phalanx of right ring finger, subsequent encounter for fracture with routine healing
S62.614G	Displaced fracture of proximal phalanx of right ring finger, subsequent encounter for fracture with delayed healing
S62.614S	Displaced fracture of proximal phalanx of right ring finger, sequela
S62.615D	Displaced fracture of proximal phalanx of left ring finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.615G	Displaced fracture of proximal phalanx of left ring finger, subsequent encounter for fracture with delayed healing
S62.615S	Displaced fracture of proximal phalanx of left ring finger, sequela
S62.616D	Displaced fracture of proximal phalanx of right little finger, subsequent encounter for fracture with routine healing
S62.616G	Displaced fracture of proximal phalanx of right little finger, subsequent encounter for fracture with delayed healing
S62.616S	Displaced fracture of proximal phalanx of right little finger, sequela
S62.617D	Displaced fracture of proximal phalanx of left little finger, subsequent encounter for fracture with routine healing
S62.617G	Displaced fracture of proximal phalanx of left little finger, subsequent encounter for fracture with delayed healing
S62.617S	Displaced fracture of proximal phalanx of left little finger, sequela
S62.618D	Displaced fracture of proximal phalanx of other finger, subsequent encounter for fracture with routine healing
S62.618G	Displaced fracture of proximal phalanx of other finger, subsequent encounter for fracture with delayed healing
S62.618S	Displaced fracture of proximal phalanx of other finger, sequela
S62.619D	Displaced fracture of proximal phalanx of unspecified finger, subsequent encounter for fracture with routine healing
S62.619G	Displaced fracture of proximal phalanx of unspecified finger, subsequent encounter for fracture with delayed healing
S62.619S	Displaced fracture of proximal phalanx of unspecified finger, sequela
S62.620D	Displaced fracture of medial phalanx of right index finger, subsequent encounter for fracture with routine healing
S62.620G	Displaced fracture of medial phalanx of right index finger, subsequent encounter for fracture with delayed healing
S62.620S	Displaced fracture of medial phalanx of right index finger, sequela
S62.621D	Displaced fracture of medial phalanx of left index finger, subsequent encounter for fracture with routine healing
S62.621G	Displaced fracture of medial phalanx of left index finger, subsequent encounter for fracture with delayed healing
S62.621S	Displaced fracture of medial phalanx of left index finger, sequela
S62.622D	Displaced fracture of medial phalanx of right middle finger, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.622G	Displaced fracture of medial phalanx of right middle finger, subsequent encounter for fracture with delayed healing
S62.622S	Displaced fracture of medial phalanx of right middle finger, sequela
S62.623D	Displaced fracture of medial phalanx of left middle finger, subsequent encounter for fracture with routine healing
S62.623G	Displaced fracture of medial phalanx of left middle finger, subsequent encounter for fracture with delayed healing
S62.623S	Displaced fracture of medial phalanx of left middle finger, sequela
S62.624D	Displaced fracture of medial phalanx of right ring finger, subsequent encounter for fracture with routine healing
S62.624G	Displaced fracture of medial phalanx of right ring finger, subsequent encounter for fracture with delayed healing
S62.624S	Displaced fracture of medial phalanx of right ring finger, sequela
S62.625D	Displaced fracture of medial phalanx of left ring finger, subsequent encounter for fracture with routine healing
S62.625G	Displaced fracture of medial phalanx of left ring finger, subsequent encounter for fracture with delayed healing
S62.625S	Displaced fracture of medial phalanx of left ring finger, sequela
S62.626D	Displaced fracture of medial phalanx of right little finger, subsequent encounter for fracture with routine healing
S62.626G	Displaced fracture of medial phalanx of right little finger, subsequent encounter for fracture with delayed healing
S62.626S	Displaced fracture of medial phalanx of right little finger, sequela
S62.627D	Displaced fracture of medial phalanx of left little finger, subsequent encounter for fracture with routine healing
S62.627G	Displaced fracture of medial phalanx of left little finger, subsequent encounter for fracture with delayed healing
S62.627S	Displaced fracture of medial phalanx of left little finger, sequela
S62.628D	Displaced fracture of medial phalanx of other finger, subsequent encounter for fracture with routine healing
S62.628G	Displaced fracture of medial phalanx of other finger, subsequent encounter for fracture with delayed healing
S62.628S	Displaced fracture of medial phalanx of other finger, sequela
S62.629D	Displaced fracture of medial phalanx of unspecified finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.629G	Displaced fracture of medial phalanx of unspecified finger, subsequent encounter for fracture with delayed healing
S62.629S	Displaced fracture of medial phalanx of unspecified finger, sequela
S62.630D	Displaced fracture of distal phalanx of right index finger, subsequent encounter for fracture with routine healing
S62.630G	Displaced fracture of distal phalanx of right index finger, subsequent encounter for fracture with delayed healing
S62.630S	Displaced fracture of distal phalanx of right index finger, sequela
S62.631D	Displaced fracture of distal phalanx of left index finger, subsequent encounter for fracture with routine healing
S62.631G	Displaced fracture of distal phalanx of left index finger, subsequent encounter for fracture with delayed healing
S62.631S	Displaced fracture of distal phalanx of left index finger, sequela
S62.632D	Displaced fracture of distal phalanx of right middle finger, subsequent encounter for fracture with routine healing
S62.632G	Displaced fracture of distal phalanx of right middle finger, subsequent encounter for fracture with delayed healing
S62.632S	Displaced fracture of distal phalanx of right middle finger, sequela
S62.633D	Displaced fracture of distal phalanx of left middle finger, subsequent encounter for fracture with routine healing
S62.633G	Displaced fracture of distal phalanx of left middle finger, subsequent encounter for fracture with delayed healing
S62.633S	Displaced fracture of distal phalanx of left middle finger, sequela
S62.634D	Displaced fracture of distal phalanx of right ring finger, subsequent encounter for fracture with routine healing
S62.634G	Displaced fracture of distal phalanx of right ring finger, subsequent encounter for fracture with delayed healing
S62.634S	Displaced fracture of distal phalanx of right ring finger, sequela
S62.635D	Displaced fracture of distal phalanx of left ring finger, subsequent encounter for fracture with routine healing
S62.635G	Displaced fracture of distal phalanx of left ring finger, subsequent encounter for fracture with delayed healing
S62.635S	Displaced fracture of distal phalanx of left ring finger, sequela
S62.636D	Displaced fracture of distal phalanx of right little finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.636G	Displaced fracture of distal phalanx of right little finger, subsequent encounter for fracture with delayed healing
S62.636S	Displaced fracture of distal phalanx of right little finger, sequela
S62.637D	Displaced fracture of distal phalanx of left little finger, subsequent encounter for fracture with routine healing
S62.637G	Displaced fracture of distal phalanx of left little finger, subsequent encounter for fracture with delayed healing
S62.637S	Displaced fracture of distal phalanx of left little finger, sequela
S62.638D	Displaced fracture of distal phalanx of other finger, subsequent encounter for fracture with routine healing
S62.638G	Displaced fracture of distal phalanx of other finger, subsequent encounter for fracture with delayed healing
S62.638S	Displaced fracture of distal phalanx of other finger, sequela
S62.639D	Displaced fracture of distal phalanx of unspecified finger, subsequent encounter for fracture with routine healing
S62.639G	Displaced fracture of distal phalanx of unspecified finger, subsequent encounter for fracture with delayed healing
S62.639S	Displaced fracture of distal phalanx of unspecified finger, sequela
S62.640D	Nondisplaced fracture of proximal phalanx of right index finger, subsequent encounter for fracture with routine healing
S62.640G	Nondisplaced fracture of proximal phalanx of right index finger, subsequent encounter for fracture with delayed healing
S62.640S	Nondisplaced fracture of proximal phalanx of right index finger, sequela
S62.641D	Nondisplaced fracture of proximal phalanx of left index finger, subsequent encounter for fracture with routine healing
S62.641G	Nondisplaced fracture of proximal phalanx of left index finger, subsequent encounter for fracture with delayed healing
S62.641S	Nondisplaced fracture of proximal phalanx of left index finger, sequela
S62.642D	Nondisplaced fracture of proximal phalanx of right middle finger, subsequent encounter for fracture with routine healing
S62.642G	Nondisplaced fracture of proximal phalanx of right middle finger, subsequent encounter for fracture with delayed healing
S62.642S	Nondisplaced fracture of proximal phalanx of right middle finger, sequela
S62.643D	Nondisplaced fracture of proximal phalanx of left middle finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.643G	Nondisplaced fracture of proximal phalanx of left middle finger, subsequent encounter for fracture with delayed healing
S62.643S	Nondisplaced fracture of proximal phalanx of left middle finger, sequela
S62.644D	Nondisplaced fracture of proximal phalanx of right ring finger, subsequent encounter for fracture with routine healing
S62.644G	Nondisplaced fracture of proximal phalanx of right ring finger, subsequent encounter for fracture with delayed healing
S62.644S	Nondisplaced fracture of proximal phalanx of right ring finger, sequela
S62.645D	Nondisplaced fracture of proximal phalanx of left ring finger, subsequent encounter for fracture with routine healing
S62.645G	Nondisplaced fracture of proximal phalanx of left ring finger, subsequent encounter for fracture with delayed healing
S62.645S	Nondisplaced fracture of proximal phalanx of left ring finger, sequela
S62.646D	Nondisplaced fracture of proximal phalanx of right little finger, subsequent encounter for fracture with routine healing
S62.646G	Nondisplaced fracture of proximal phalanx of right little finger, subsequent encounter for fracture with delayed healing
S62.646S	Nondisplaced fracture of proximal phalanx of right little finger, sequela
S62.647D	Nondisplaced fracture of proximal phalanx of left little finger, subsequent encounter for fracture with routine healing
S62.647G	Nondisplaced fracture of proximal phalanx of left little finger, subsequent encounter for fracture with delayed healing
S62.647S	Nondisplaced fracture of proximal phalanx of left little finger, sequela
S62.648D	Nondisplaced fracture of proximal phalanx of other finger, subsequent encounter for fracture with routine healing
S62.648G	Nondisplaced fracture of proximal phalanx of other finger, subsequent encounter for fracture with delayed healing
S62.648S	Nondisplaced fracture of proximal phalanx of other finger, sequela
S62.649D	Nondisplaced fracture of proximal phalanx of unspecified finger, subsequent encounter for fracture with routine healing
S62.649G	Nondisplaced fracture of proximal phalanx of unspecified finger, subsequent encounter for fracture with delayed healing
S62.649S	Nondisplaced fracture of proximal phalanx of unspecified finger, sequela
S62.650D	Nondisplaced fracture of medial phalanx of right index finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.650G	Nondisplaced fracture of medial phalanx of right index finger, subsequent encounter for fracture with delayed healing
S62.650S	Nondisplaced fracture of medial phalanx of right index finger, sequela
S62.651D	Nondisplaced fracture of medial phalanx of left index finger, subsequent encounter for fracture with routine healing
S62.651G	Nondisplaced fracture of medial phalanx of left index finger, subsequent encounter for fracture with delayed healing
S62.651S	Nondisplaced fracture of medial phalanx of left index finger, sequela
S62.652D	Nondisplaced fracture of medial phalanx of right middle finger, subsequent encounter for fracture with routine healing
S62.652G	Nondisplaced fracture of medial phalanx of right middle finger, subsequent encounter for fracture with delayed healing
S62.652S	Nondisplaced fracture of medial phalanx of right middle finger, sequela
S62.653D	Nondisplaced fracture of medial phalanx of left middle finger, subsequent encounter for fracture with routine healing
S62.653G	Nondisplaced fracture of medial phalanx of left middle finger, subsequent encounter for fracture with delayed healing
S62.653S	Nondisplaced fracture of medial phalanx of left middle finger, sequela
S62.654D	Nondisplaced fracture of medial phalanx of right ring finger, subsequent encounter for fracture with routine healing
S62.654G	Nondisplaced fracture of medial phalanx of right ring finger, subsequent encounter for fracture with delayed healing
S62.654S	Nondisplaced fracture of medial phalanx of right ring finger, sequela
S62.655D	Nondisplaced fracture of medial phalanx of left ring finger, subsequent encounter for fracture with routine healing
S62.655G	Nondisplaced fracture of medial phalanx of left ring finger, subsequent encounter for fracture with delayed healing
S62.655S	Nondisplaced fracture of medial phalanx of left ring finger, sequela
S62.656D	Nondisplaced fracture of medial phalanx of right little finger, subsequent encounter for fracture with routine healing
S62.656G	Nondisplaced fracture of medial phalanx of right little finger, subsequent encounter for fracture with delayed healing
S62.656S	Nondisplaced fracture of medial phalanx of right little finger, sequela
S62.657D	Nondisplaced fracture of medial phalanx of left little finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.657G	Nondisplaced fracture of medial phalanx of left little finger, subsequent encounter for fracture with delayed healing
S62.657S	Nondisplaced fracture of medial phalanx of left little finger, sequela
S62.658D	Nondisplaced fracture of medial phalanx of other finger, subsequent encounter for fracture with routine healing
S62.658G	Nondisplaced fracture of medial phalanx of other finger, subsequent encounter for fracture with delayed healing
S62.658S	Nondisplaced fracture of medial phalanx of other finger, sequela
S62.659D	Nondisplaced fracture of medial phalanx of unspecified finger, subsequent encounter for fracture with routine healing
S62.659G	Nondisplaced fracture of medial phalanx of unspecified finger, subsequent encounter for fracture with delayed healing
S62.659S	Nondisplaced fracture of medial phalanx of unspecified finger, sequela
S62.660D	Nondisplaced fracture of distal phalanx of right index finger, subsequent encounter for fracture with routine healing
S62.660G	Nondisplaced fracture of distal phalanx of right index finger, subsequent encounter for fracture with delayed healing
S62.660S	Nondisplaced fracture of distal phalanx of right index finger, sequela
S62.661D	Nondisplaced fracture of distal phalanx of left index finger, subsequent encounter for fracture with routine healing
S62.661G	Nondisplaced fracture of distal phalanx of left index finger, subsequent encounter for fracture with delayed healing
S62.661S	Nondisplaced fracture of distal phalanx of left index finger, sequela
S62.662D	Nondisplaced fracture of distal phalanx of right middle finger, subsequent encounter for fracture with routine healing
S62.662G	Nondisplaced fracture of distal phalanx of right middle finger, subsequent encounter for fracture with delayed healing
S62.662S	Nondisplaced fracture of distal phalanx of right middle finger, sequela
S62.663D	Nondisplaced fracture of distal phalanx of left middle finger, subsequent encounter for fracture with routine healing
S62.663G	Nondisplaced fracture of distal phalanx of left middle finger, subsequent encounter for fracture with delayed healing
S62.663S	Nondisplaced fracture of distal phalanx of left middle finger, sequela
S62.664D	Nondisplaced fracture of distal phalanx of right ring finger, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.664G	Nondisplaced fracture of distal phalanx of right ring finger, subsequent encounter for fracture with delayed healing
S62.664S	Nondisplaced fracture of distal phalanx of right ring finger, sequela
S62.665D	Nondisplaced fracture of distal phalanx of left ring finger, subsequent encounter for fracture with routine healing
S62.665G	Nondisplaced fracture of distal phalanx of left ring finger, subsequent encounter for fracture with delayed healing
S62.665S	Nondisplaced fracture of distal phalanx of left ring finger, sequela
S62.666D	Nondisplaced fracture of distal phalanx of right little finger, subsequent encounter for fracture with routine healing
S62.666G	Nondisplaced fracture of distal phalanx of right little finger, subsequent encounter for fracture with delayed healing
S62.666S	Nondisplaced fracture of distal phalanx of right little finger, sequela
S62.667D	Nondisplaced fracture of distal phalanx of left little finger, subsequent encounter for fracture with routine healing
S62.667G	Nondisplaced fracture of distal phalanx of left little finger, subsequent encounter for fracture with delayed healing
S62.667S	Nondisplaced fracture of distal phalanx of left little finger, sequela
S62.668D	Nondisplaced fracture of distal phalanx of other finger, subsequent encounter for fracture with routine healing
S62.668G	Nondisplaced fracture of distal phalanx of other finger, subsequent encounter for fracture with delayed healing
S62.668S	Nondisplaced fracture of distal phalanx of other finger, sequela
S62.669D	Nondisplaced fracture of distal phalanx of unspecified finger, subsequent encounter for fracture with routine healing
S62.669G	Nondisplaced fracture of distal phalanx of unspecified finger, subsequent encounter for fracture with delayed healing
S62.669S	Nondisplaced fracture of distal phalanx of unspecified finger, sequela
S62.90XD	Unspecified fracture of unspecified wrist and hand, subsequent encounter for fracture with routine healing
S62.90XG	Unspecified fracture of unspecified wrist and hand, subsequent encounter for fracture with delayed healing
S62.90XS	Unspecified fracture of unspecified wrist and hand, sequela
S62.91XD	Unspecified fracture of right wrist and hand, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S62.91XG	Unspecified fracture of right wrist and hand, subsequent encounter for fracture with delayed healing
S62.91XS	Unspecified fracture of right wrist and hand, sequela
S62.92XD	Unspecified fracture of left wrist and hand, subsequent encounter for fracture with routine healing
S62.92XG	Unspecified fracture of left wrist and hand, subsequent encounter for fracture with delayed healing
S62.92XS	Unspecified fracture of left wrist and hand, sequela
S63.001A	Unspecified subluxation of right wrist and hand, initial encounter
S63.001S	Unspecified subluxation of right wrist and hand, sequela
S63.002A	Unspecified subluxation of left wrist and hand, initial encounter
S63.002S	Unspecified subluxation of left wrist and hand, sequela
S63.003A	Unspecified subluxation of unspecified wrist and hand, initial encounter
S63.003S	Unspecified subluxation of unspecified wrist and hand, sequela
S63.004A	Unspecified dislocation of right wrist and hand, initial encounter
S63.004S	Unspecified dislocation of right wrist and hand, sequela
S63.005A	Unspecified dislocation of left wrist and hand, initial encounter
S63.005S	Unspecified dislocation of left wrist and hand, sequela
S63.006A	Unspecified dislocation of unspecified wrist and hand, initial encounter
S63.006S	Unspecified dislocation of unspecified wrist and hand, sequela
S63.011A	Subluxation of distal radioulnar joint of right wrist, initial encounter
S63.011S	Subluxation of distal radioulnar joint of right wrist, sequela
S63.012A	Subluxation of distal radioulnar joint of left wrist, initial encounter
S63.012S	Subluxation of distal radioulnar joint of left wrist, sequela
S63.013A	Subluxation of distal radioulnar joint of unspecified wrist, initial encounter
S63.013S	Subluxation of distal radioulnar joint of unspecified wrist, sequela
S63.014A	Dislocation of distal radioulnar joint of right wrist, initial encounter
S63.014S	Dislocation of distal radioulnar joint of right wrist, sequela
S63.015A	Dislocation of distal radioulnar joint of left wrist, initial encounter
S63.015S	Dislocation of distal radioulnar joint of left wrist, sequela
S63.016A	Dislocation of distal radioulnar joint of unspecified wrist, initial encounter

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.016S	Dislocation of distal radioulnar joint of unspecified wrist, sequela
S63.021A	Subluxation of radiocarpal joint of right wrist, initial encounter
S63.021S	Subluxation of radiocarpal joint of right wrist, sequela
S63.022A	Subluxation of radiocarpal joint of left wrist, initial encounter
S63.022S	Subluxation of radiocarpal joint of left wrist, sequela
S63.023A	Subluxation of radiocarpal joint of unspecified wrist, initial encounter
S63.023S	Subluxation of radiocarpal joint of unspecified wrist, sequela
S63.024A	Dislocation of radiocarpal joint of right wrist, initial encounter
S63.024S	Dislocation of radiocarpal joint of right wrist, sequela
S63.025A	Dislocation of radiocarpal joint of left wrist, initial encounter
S63.025S	Dislocation of radiocarpal joint of left wrist, sequela
S63.026A	Dislocation of radiocarpal joint of unspecified wrist, initial encounter
S63.026S	Dislocation of radiocarpal joint of unspecified wrist, sequela
S63.031A	Subluxation of midcarpal joint of right wrist, initial encounter
S63.031S	Subluxation of midcarpal joint of right wrist, sequela
S63.032A	Subluxation of midcarpal joint of left wrist, initial encounter
S63.032S	Subluxation of midcarpal joint of left wrist, sequela
S63.033A	Subluxation of midcarpal joint of unspecified wrist, initial encounter
S63.033S	Subluxation of midcarpal joint of unspecified wrist, sequela
S63.034A	Dislocation of midcarpal joint of right wrist, initial encounter
S63.034S	Dislocation of midcarpal joint of right wrist, sequela
S63.035A	Dislocation of midcarpal joint of left wrist, initial encounter
S63.035S	Dislocation of midcarpal joint of left wrist, sequela
S63.036A	Dislocation of midcarpal joint of unspecified wrist, initial encounter
S63.036S	Dislocation of midcarpal joint of unspecified wrist, sequela
S63.041A	Subluxation of carpometacarpal joint of right thumb, initial encounter
S63.041S	Subluxation of carpometacarpal joint of right thumb, sequela
S63.042A	Subluxation of carpometacarpal joint of left thumb, initial encounter
S63.042S	Subluxation of carpometacarpal joint of left thumb, sequela
S63.043A	Subluxation of carpometacarpal joint of unspecified thumb, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.043S	Subluxation of carpometacarpal joint of unspecified thumb, sequela
S63.044A	Dislocation of carpometacarpal joint of right thumb, initial encounter
S63.044S	Dislocation of carpometacarpal joint of right thumb, sequela
S63.045A	Dislocation of carpometacarpal joint of left thumb, initial encounter
S63.045S	Dislocation of carpometacarpal joint of left thumb, sequela
S63.046A	Dislocation of carpometacarpal joint of unspecified thumb, initial encounter
S63.046S	Dislocation of carpometacarpal joint of unspecified thumb, sequela
S63.051A	Subluxation of other carpometacarpal joint of right hand, initial encounter
S63.051S	Subluxation of other carpometacarpal joint of right hand, sequela
S63.052A	Subluxation of other carpometacarpal joint of left hand, initial encounter
S63.052S	Subluxation of other carpometacarpal joint of left hand, sequela
S63.053A	Subluxation of other carpometacarpal joint of unspecified hand, initial encounter
S63.053S	Subluxation of other carpometacarpal joint of unspecified hand, sequela
S63.054A	Dislocation of other carpometacarpal joint of right hand, initial encounter
S63.054S	Dislocation of other carpometacarpal joint of right hand, sequela
S63.055A	Dislocation of other carpometacarpal joint of left hand, initial encounter
S63.055S	Dislocation of other carpometacarpal joint of left hand, sequela
S63.056A	Dislocation of other carpometacarpal joint of unspecified hand, initial encounter
S63.056S	Dislocation of other carpometacarpal joint of unspecified hand, sequela
S63.061A	Subluxation of metacarpal (bone), proximal end of right hand, initial encounter
S63.061S	Subluxation of metacarpal (bone), proximal end of right hand, sequela
S63.062A	Subluxation of metacarpal (bone), proximal end of left hand, initial encounter
S63.062S	Subluxation of metacarpal (bone), proximal end of left hand, sequela
S63.063A	Subluxation of metacarpal (bone), proximal end of unspecified hand, initial encounter
S63.063S	Subluxation of metacarpal (bone), proximal end of unspecified hand, sequela
S63.064A	Dislocation of metacarpal (bone), proximal end of right hand, initial encounter
S63.064S	Dislocation of metacarpal (bone), proximal end of right hand, sequela
S63.065A	Dislocation of metacarpal (bone), proximal end of left hand, initial encounter
S63.065S	Dislocation of metacarpal (bone), proximal end of left hand, sequela
S63.066A	Dislocation of metacarpal (bone), proximal end of unspecified hand, initial encounter

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.066S	Dislocation of metacarpal (bone), proximal end of unspecified hand, sequela
S63.071A	Subluxation of distal end of right ulna, initial encounter
S63.071S	Subluxation of distal end of right ulna, sequela
S63.072A	Subluxation of distal end of left ulna, initial encounter
S63.072S	Subluxation of distal end of left ulna, sequela
S63.073A	Subluxation of distal end of unspecified ulna, initial encounter
S63.073S	Subluxation of distal end of unspecified ulna, sequela
S63.074A	Dislocation of distal end of right ulna, initial encounter
S63.074S	Dislocation of distal end of right ulna, sequela
S63.075A	Dislocation of distal end of left ulna, initial encounter
S63.075S	Dislocation of distal end of left ulna, sequela
S63.076A	Dislocation of distal end of unspecified ulna, initial encounter
S63.076S	Dislocation of distal end of unspecified ulna, sequela
S63.091A	Other subluxation of right wrist and hand, initial encounter
S63.091S	Other subluxation of right wrist and hand, sequela
S63.092A	Other subluxation of left wrist and hand, initial encounter
S63.092S	Other subluxation of left wrist and hand, sequela
S63.093A	Other subluxation of unspecified wrist and hand, initial encounter
S63.093S	Other subluxation of unspecified wrist and hand, sequela
S63.094A	Other dislocation of right wrist and hand, initial encounter
S63.094S	Other dislocation of right wrist and hand, sequela
S63.095A	Other dislocation of left wrist and hand, initial encounter
S63.095S	Other dislocation of left wrist and hand, sequela
S63.096A	Other dislocation of unspecified wrist and hand, initial encounter
S63.096S	Other dislocation of unspecified wrist and hand, sequela
S63.101A	Unspecified subluxation of right thumb, initial encounter
S63.101S	Unspecified subluxation of right thumb, sequela
S63.102A	Unspecified subluxation of left thumb, initial encounter
S63.102S	Unspecified subluxation of left thumb, sequela
S63.103A	Unspecified subluxation of unspecified thumb, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.103S	Unspecified subluxation of unspecified thumb, sequela
S63.104A	Unspecified dislocation of right thumb, initial encounter
S63.104S	Unspecified dislocation of right thumb, sequela
S63.105A	Unspecified dislocation of left thumb, initial encounter
S63.105S	Unspecified dislocation of left thumb, sequela
S63.106A	Unspecified dislocation of unspecified thumb, initial encounter
S63.106S	Unspecified dislocation of unspecified thumb, sequela
S63.111A	Subluxation of metacarpophalangeal joint of right thumb, initial encounter
S63.111S	Subluxation of metacarpophalangeal joint of right thumb, sequela
S63.112A	Subluxation of metacarpophalangeal joint of left thumb, initial encounter
S63.112S	Subluxation of metacarpophalangeal joint of left thumb, sequela
S63.113A	Subluxation of metacarpophalangeal joint of unspecified thumb, initial encounter
S63.113S	Subluxation of metacarpophalangeal joint of unspecified thumb, sequela
S63.114A	Dislocation of metacarpophalangeal joint of right thumb, initial encounter
S63.114S	Dislocation of metacarpophalangeal joint of right thumb, sequela
S63.115A	Dislocation of metacarpophalangeal joint of left thumb, initial encounter
S63.115S	Dislocation of metacarpophalangeal joint of left thumb, sequela
S63.116A	Dislocation of metacarpophalangeal joint of unspecified thumb, initial encounter
S63.116S	Dislocation of metacarpophalangeal joint of unspecified thumb, sequela
S63.121A	Subluxation of unspecified interphalangeal joint of right thumb, initial encounter
S63.121S	Subluxation of unspecified interphalangeal joint of right thumb, sequela
S63.122A	Subluxation of unspecified interphalangeal joint of left thumb, initial encounter
S63.122S	Subluxation of unspecified interphalangeal joint of left thumb, sequela
S63.123A	Subluxation of unspecified interphalangeal joint of unspecified thumb, initial encounter
S63.123S	Subluxation of unspecified interphalangeal joint of unspecified thumb, sequela
S63.124A	Dislocation of unspecified interphalangeal joint of right thumb, initial encounter
S63.124S	Dislocation of unspecified interphalangeal joint of right thumb, sequela
S63.125A	Dislocation of unspecified interphalangeal joint of left thumb, initial encounter
S63.125S	Dislocation of unspecified interphalangeal joint of left thumb, sequela
S63.126A	Dislocation of unspecified interphalangeal joint of unspecified thumb, initial encounter



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Code	Description
S63.126S	Dislocation of unspecified interphalangeal joint of unspecified thumb, sequela
S63.131A	Subluxation of proximal interphalangeal joint of right thumb, initial encounter
S63.131S	Subluxation of proximal interphalangeal joint of right thumb, sequela
S63.132A	Subluxation of proximal interphalangeal joint of left thumb, initial encounter
S63.132S	Subluxation of proximal interphalangeal joint of left thumb, sequela
S63.133A	Subluxation of proximal interphalangeal joint of unspecified thumb, initial encounter
S63.133S	Subluxation of proximal interphalangeal joint of unspecified thumb, sequela
S63.134A	Dislocation of proximal interphalangeal joint of right thumb, initial encounter
S63.134S	Dislocation of proximal interphalangeal joint of right thumb, sequela
S63.135A	Dislocation of proximal interphalangeal joint of left thumb, initial encounter
S63.135S	Dislocation of proximal interphalangeal joint of left thumb, sequela
S63.136A	Dislocation of proximal interphalangeal joint of unspecified thumb, initial encounter
S63.136S	Dislocation of proximal interphalangeal joint of unspecified thumb, sequela
S63.141A	Subluxation of distal interphalangeal joint of right thumb, initial encounter
S63.141S	Subluxation of distal interphalangeal joint of right thumb, sequela
S63.142A	Subluxation of distal interphalangeal joint of left thumb, initial encounter
S63.142S	Subluxation of distal interphalangeal joint of left thumb, sequela
S63.143A	Subluxation of distal interphalangeal joint of unspecified thumb, initial encounter
S63.143S	Subluxation of distal interphalangeal joint of unspecified thumb, sequela
S63.144A	Dislocation of distal interphalangeal joint of right thumb, initial encounter
S63.144S	Dislocation of distal interphalangeal joint of right thumb, sequela
S63.145A	Dislocation of distal interphalangeal joint of left thumb, initial encounter
S63.145S	Dislocation of distal interphalangeal joint of left thumb, sequela
S63.146A	Dislocation of distal interphalangeal joint of unspecified thumb, initial encounter
S63.146S	Dislocation of distal interphalangeal joint of unspecified thumb, sequela
S63.200A	Unspecified subluxation of right index finger, initial encounter
S63.200S	Unspecified subluxation of right index finger, sequela
S63.201A	Unspecified subluxation of left index finger, initial encounter
S63.201S	Unspecified subluxation of left index finger, sequela
S63.202A	Unspecified subluxation of right middle finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.202S	Unspecified subluxation of right middle finger, sequela
S63.203A	Unspecified subluxation of left middle finger, initial encounter
S63.203S	Unspecified subluxation of left middle finger, sequela
S63.204A	Unspecified subluxation of right ring finger, initial encounter
S63.204S	Unspecified subluxation of right ring finger, sequela
S63.205A	Unspecified subluxation of left ring finger, initial encounter
S63.205S	Unspecified subluxation of left ring finger, sequela
S63.206A	Unspecified subluxation of right little finger, initial encounter
S63.206S	Unspecified subluxation of right little finger, sequela
S63.207A	Unspecified subluxation of left little finger, initial encounter
S63.207S	Unspecified subluxation of left little finger, sequela
S63.208A	Unspecified subluxation of other finger, initial encounter
S63.208S	Unspecified subluxation of other finger, sequela
S63.209A	Unspecified subluxation of unspecified finger, initial encounter
S63.209S	Unspecified subluxation of unspecified finger, sequela
S63.210A	Subluxation of metacarpophalangeal joint of right index finger, initial encounter
S63.210S	Subluxation of metacarpophalangeal joint of right index finger, sequela
S63.211A	Subluxation of metacarpophalangeal joint of left index finger, initial encounter
S63.211S	Subluxation of metacarpophalangeal joint of left index finger, sequela
S63.212A	Subluxation of metacarpophalangeal joint of right middle finger, initial encounter
S63.212S	Subluxation of metacarpophalangeal joint of right middle finger, sequela
S63.213A	Subluxation of metacarpophalangeal joint of left middle finger, initial encounter
S63.213S	Subluxation of metacarpophalangeal joint of left middle finger, sequela
S63.214A	Subluxation of metacarpophalangeal joint of right ring finger, initial encounter
S63.214S	Subluxation of metacarpophalangeal joint of right ring finger, sequela
S63.215A	Subluxation of metacarpophalangeal joint of left ring finger, initial encounter
S63.215S	Subluxation of metacarpophalangeal joint of left ring finger, sequela
S63.216A	Subluxation of metacarpophalangeal joint of right little finger, initial encounter
S63.216S	Subluxation of metacarpophalangeal joint of right little finger, sequela
S63.217A	Subluxation of metacarpophalangeal joint of left little finger, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S63.217S	Subluxation of metacarpophalangeal joint of left little finger, sequela
S63.218A	Subluxation of metacarpophalangeal joint of other finger, initial encounter
S63.218S	Subluxation of metacarpophalangeal joint of other finger, sequela
S63.219A	Subluxation of metacarpophalangeal joint of unspecified finger, initial encounter
S63.219S	Subluxation of metacarpophalangeal joint of unspecified finger, sequela
S63.220A	Subluxation of unspecified interphalangeal joint of right index finger, initial encounter
S63.220S	Subluxation of unspecified interphalangeal joint of right index finger, sequela
S63.221A	Subluxation of unspecified interphalangeal joint of left index finger, initial encounter
S63.221S	Subluxation of unspecified interphalangeal joint of left index finger, sequela
S63.222A	Subluxation of unspecified interphalangeal joint of right middle finger, initial encounter
S63.222S	Subluxation of unspecified interphalangeal joint of right middle finger, sequela
S63.223A	Subluxation of unspecified interphalangeal joint of left middle finger, initial encounter
S63.223S	Subluxation of unspecified interphalangeal joint of left middle finger, sequela
S63.224A	Subluxation of unspecified interphalangeal joint of right ring finger, initial encounter
S63.224S	Subluxation of unspecified interphalangeal joint of right ring finger, sequela
S63.225A	Subluxation of unspecified interphalangeal joint of left ring finger, initial encounter
S63.225S	Subluxation of unspecified interphalangeal joint of left ring finger, sequela
S63.226A	Subluxation of unspecified interphalangeal joint of right little finger, initial encounter
S63.226S	Subluxation of unspecified interphalangeal joint of right little finger, sequela
S63.227A	Subluxation of unspecified interphalangeal joint of left little finger, initial encounter
S63.227S	Subluxation of unspecified interphalangeal joint of left little finger, sequela
S63.228A	Subluxation of unspecified interphalangeal joint of other finger, initial encounter
S63.228S	Subluxation of unspecified interphalangeal joint of other finger, sequela
S63.229A	Subluxation of unspecified interphalangeal joint of unspecified finger, initial encounter
S63.229S	Subluxation of unspecified interphalangeal joint of unspecified finger, sequela
S63.230A	Subluxation of proximal interphalangeal joint of right index finger, initial encounter
S63.230S	Subluxation of proximal interphalangeal joint of right index finger, sequela
S63.231A	Subluxation of proximal interphalangeal joint of left index finger, initial encounter
S63.231S	Subluxation of proximal interphalangeal joint of left index finger, sequela
S63.232A	Subluxation of proximal interphalangeal joint of right middle finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.232S	Subluxation of proximal interphalangeal joint of right middle finger, sequela
S63.233A	Subluxation of proximal interphalangeal joint of left middle finger, initial encounter
S63.233S	Subluxation of proximal interphalangeal joint of left middle finger, sequela
S63.234A	Subluxation of proximal interphalangeal joint of right ring finger, initial encounter
S63.234S	Subluxation of proximal interphalangeal joint of right ring finger, sequela
S63.235A	Subluxation of proximal interphalangeal joint of left ring finger, initial encounter
S63.235S	Subluxation of proximal interphalangeal joint of left ring finger, sequela
S63.236A	Subluxation of proximal interphalangeal joint of right little finger, initial encounter
S63.236S	Subluxation of proximal interphalangeal joint of right little finger, sequela
S63.237A	Subluxation of proximal interphalangeal joint of left little finger, initial encounter
S63.237S	Subluxation of proximal interphalangeal joint of left little finger, sequela
S63.238A	Subluxation of proximal interphalangeal joint of other finger, initial encounter
S63.238S	Subluxation of proximal interphalangeal joint of other finger, sequela
S63.239A	Subluxation of proximal interphalangeal joint of unspecified finger, initial encounter
S63.239S	Subluxation of proximal interphalangeal joint of unspecified finger, sequela
S63.240A	Subluxation of distal interphalangeal joint of right index finger, initial encounter
S63.240S	Subluxation of distal interphalangeal joint of right index finger, sequela
S63.241A	Subluxation of distal interphalangeal joint of left index finger, initial encounter
S63.241S	Subluxation of distal interphalangeal joint of left index finger, sequela
S63.242A	Subluxation of distal interphalangeal joint of right middle finger, initial encounter
S63.242S	Subluxation of distal interphalangeal joint of right middle finger, sequela
S63.243A	Subluxation of distal interphalangeal joint of left middle finger, initial encounter
S63.243S	Subluxation of distal interphalangeal joint of left middle finger, sequela
S63.244A	Subluxation of distal interphalangeal joint of right ring finger, initial encounter
S63.244S	Subluxation of distal interphalangeal joint of right ring finger, sequela
S63.245A	Subluxation of distal interphalangeal joint of left ring finger, initial encounter
S63.245S	Subluxation of distal interphalangeal joint of left ring finger, sequela
S63.246A	Subluxation of distal interphalangeal joint of right little finger, initial encounter
S63.246S	Subluxation of distal interphalangeal joint of right little finger, sequela
S63.247A	Subluxation of distal interphalangeal joint of left little finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.247S	Subluxation of distal interphalangeal joint of left little finger, sequela
S63.248A	Subluxation of distal interphalangeal joint of other finger, initial encounter
S63.248S	Subluxation of distal interphalangeal joint of other finger, sequela
S63.249A	Subluxation of distal interphalangeal joint of unspecified finger, initial encounter
S63.249S	Subluxation of distal interphalangeal joint of unspecified finger, sequela
S63.250A	Unspecified dislocation of right index finger, initial encounter
S63.250S	Unspecified dislocation of right index finger, sequela
S63.251A	Unspecified dislocation of left index finger, initial encounter
S63.251S	Unspecified dislocation of left index finger, sequela
S63.252A	Unspecified dislocation of right middle finger, initial encounter
S63.252S	Unspecified dislocation of right middle finger, sequela
S63.253A	Unspecified dislocation of left middle finger, initial encounter
S63.253S	Unspecified dislocation of left middle finger, sequela
S63.254A	Unspecified dislocation of right ring finger, initial encounter
S63.254S	Unspecified dislocation of right ring finger, sequela
S63.255A	Unspecified dislocation of left ring finger, initial encounter
S63.255S	Unspecified dislocation of left ring finger, sequela
S63.256A	Unspecified dislocation of right little finger, initial encounter
S63.256S	Unspecified dislocation of right little finger, sequela
S63.257A	Unspecified dislocation of left little finger, initial encounter
S63.257S	Unspecified dislocation of left little finger, sequela
S63.258A	Unspecified dislocation of other finger, initial encounter
S63.258S	Unspecified dislocation of other finger, sequela
S63.259A	Unspecified dislocation of unspecified finger, initial encounter
S63.259S	Unspecified dislocation of unspecified finger, sequela
S63.260A	Dislocation of metacarpophalangeal joint of right index finger, initial encounter
S63.260S	Dislocation of metacarpophalangeal joint of right index finger, sequela
S63.261A	Dislocation of metacarpophalangeal joint of left index finger, initial encounter
S63.261S	Dislocation of metacarpophalangeal joint of left index finger, sequela
S63.262A	Dislocation of metacarpophalangeal joint of right middle finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.262S	Dislocation of metacarpophalangeal joint of right middle finger, sequela
S63.263A	Dislocation of metacarpophalangeal joint of left middle finger, initial encounter
S63.263S	Dislocation of metacarpophalangeal joint of left middle finger, sequela
S63.264A	Dislocation of metacarpophalangeal joint of right ring finger, initial encounter
S63.264S	Dislocation of metacarpophalangeal joint of right ring finger, sequela
S63.265A	Dislocation of metacarpophalangeal joint of left ring finger, initial encounter
S63.265S	Dislocation of metacarpophalangeal joint of left ring finger, sequela
S63.266A	Dislocation of metacarpophalangeal joint of right little finger, initial encounter
S63.266S	Dislocation of metacarpophalangeal joint of right little finger, sequela
S63.267A	Dislocation of metacarpophalangeal joint of left little finger, initial encounter
S63.267S	Dislocation of metacarpophalangeal joint of left little finger, sequela
S63.268A	Dislocation of metacarpophalangeal joint of other finger, initial encounter
S63.268S	Dislocation of metacarpophalangeal joint of other finger, sequela
S63.269A	Dislocation of metacarpophalangeal joint of unspecified finger, initial encounter
S63.269S	Dislocation of metacarpophalangeal joint of unspecified finger, sequela
S63.270A	Dislocation of unspecified interphalangeal joint of right index finger, initial encounter
S63.270S	Dislocation of unspecified interphalangeal joint of right index finger, sequela
S63.271A	Dislocation of unspecified interphalangeal joint of left index finger, initial encounter
S63.271S	Dislocation of unspecified interphalangeal joint of left index finger, sequela
S63.272A	Dislocation of unspecified interphalangeal joint of right middle finger, initial encounter
S63.272S	Dislocation of unspecified interphalangeal joint of right middle finger, sequela
S63.273A	Dislocation of unspecified interphalangeal joint of left middle finger, initial encounter
S63.273S	Dislocation of unspecified interphalangeal joint of left middle finger, sequela
S63.274A	Dislocation of unspecified interphalangeal joint of right ring finger, initial encounter
S63.274S	Dislocation of unspecified interphalangeal joint of right ring finger, sequela
S63.275A	Dislocation of unspecified interphalangeal joint of left ring finger, initial encounter
S63.275S	Dislocation of unspecified interphalangeal joint of left ring finger, sequela
S63.276A	Dislocation of unspecified interphalangeal joint of right little finger, initial encounter
S63.276S	Dislocation of unspecified interphalangeal joint of right little finger, sequela
S63.277A	Dislocation of unspecified interphalangeal joint of left little finger, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S63.277S	Dislocation of unspecified interphalangeal joint of left little finger, sequela
S63.278A	Dislocation of unspecified interphalangeal joint of other finger, initial encounter
S63.278S	Dislocation of unspecified interphalangeal joint of other finger, sequela
S63.279A	Dislocation of unspecified interphalangeal joint of unspecified finger, initial encounter
S63.279S	Dislocation of unspecified interphalangeal joint of unspecified finger, sequela
S63.280A	Dislocation of proximal interphalangeal joint of right index finger, initial encounter
S63.280S	Dislocation of proximal interphalangeal joint of right index finger, sequela
S63.281A	Dislocation of proximal interphalangeal joint of left index finger, initial encounter
S63.281S	Dislocation of proximal interphalangeal joint of left index finger, sequela
S63.282A	Dislocation of proximal interphalangeal joint of right middle finger, initial encounter
S63.282S	Dislocation of proximal interphalangeal joint of right middle finger, sequela
S63.283A	Dislocation of proximal interphalangeal joint of left middle finger, initial encounter
S63.283S	Dislocation of proximal interphalangeal joint of left middle finger, sequela
S63.284A	Dislocation of proximal interphalangeal joint of right ring finger, initial encounter
S63.284S	Dislocation of proximal interphalangeal joint of right ring finger, sequela
S63.285A	Dislocation of proximal interphalangeal joint of left ring finger, initial encounter
S63.285S	Dislocation of proximal interphalangeal joint of left ring finger, sequela
S63.286A	Dislocation of proximal interphalangeal joint of right little finger, initial encounter
S63.286S	Dislocation of proximal interphalangeal joint of right little finger, sequela
S63.287A	Dislocation of proximal interphalangeal joint of left little finger, initial encounter
S63.287S	Dislocation of proximal interphalangeal joint of left little finger, sequela
S63.288A	Dislocation of proximal interphalangeal joint of other finger, initial encounter
S63.288S	Dislocation of proximal interphalangeal joint of other finger, sequela
S63.289A	Dislocation of proximal interphalangeal joint of unspecified finger, initial encounter
S63.289S	Dislocation of proximal interphalangeal joint of unspecified finger, sequela
S63.290A	Dislocation of distal interphalangeal joint of right index finger, initial encounter
S63.290S	Dislocation of distal interphalangeal joint of right index finger, sequela
S63.291A	Dislocation of distal interphalangeal joint of left index finger, initial encounter
S63.291S	Dislocation of distal interphalangeal joint of left index finger, sequela
S63.292A	Dislocation of distal interphalangeal joint of right middle finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.292S	Dislocation of distal interphalangeal joint of right middle finger, sequela
S63.293A	Dislocation of distal interphalangeal joint of left middle finger, initial encounter
S63.293S	Dislocation of distal interphalangeal joint of left middle finger, sequela
S63.294A	Dislocation of distal interphalangeal joint of right ring finger, initial encounter
S63.294S	Dislocation of distal interphalangeal joint of right ring finger, sequela
S63.295A	Dislocation of distal interphalangeal joint of left ring finger, initial encounter
S63.295S	Dislocation of distal interphalangeal joint of left ring finger, sequela
S63.296A	Dislocation of distal interphalangeal joint of right little finger, initial encounter
S63.296S	Dislocation of distal interphalangeal joint of right little finger, sequela
S63.297A	Dislocation of distal interphalangeal joint of left little finger, initial encounter
S63.297S	Dislocation of distal interphalangeal joint of left little finger, sequela
S63.298A	Dislocation of distal interphalangeal joint of other finger, initial encounter
S63.298S	Dislocation of distal interphalangeal joint of other finger, sequela
S63.299A	Dislocation of distal interphalangeal joint of unspecified finger, initial encounter
S63.299S	Dislocation of distal interphalangeal joint of unspecified finger, sequela
S63.301A	Traumatic rupture of unspecified ligament of right wrist, initial encounter
S63.301S	Traumatic rupture of unspecified ligament of right wrist, sequela
S63.302A	Traumatic rupture of unspecified ligament of left wrist, initial encounter
S63.302S	Traumatic rupture of unspecified ligament of left wrist, sequela
S63.309A	Traumatic rupture of unspecified ligament of unspecified wrist, initial encounter
S63.309S	Traumatic rupture of unspecified ligament of unspecified wrist, sequela
S63.311A	Traumatic rupture of collateral ligament of right wrist, initial encounter
S63.311S	Traumatic rupture of collateral ligament of right wrist, sequela
S63.312A	Traumatic rupture of collateral ligament of left wrist, initial encounter
S63.312S	Traumatic rupture of collateral ligament of left wrist, sequela
S63.319A	Traumatic rupture of collateral ligament of unspecified wrist, initial encounter
S63.319S	Traumatic rupture of collateral ligament of unspecified wrist, sequela
S63.321A	Traumatic rupture of right radiocarpal ligament, initial encounter
S63.321S	Traumatic rupture of right radiocarpal ligament, sequela
S63.322A	Traumatic rupture of left radiocarpal ligament, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S63.322S	Traumatic rupture of left radiocarpal ligament, sequela
S63.329A	Traumatic rupture of unspecified radiocarpal ligament, initial encounter
S63.329S	Traumatic rupture of unspecified radiocarpal ligament, sequela
S63.331A	Traumatic rupture of right ulnocarpal (palmar) ligament, initial encounter
S63.331S	Traumatic rupture of right ulnocarpal (palmar) ligament, sequela
S63.332A	Traumatic rupture of left ulnocarpal (palmar) ligament, initial encounter
S63.332S	Traumatic rupture of left ulnocarpal (palmar) ligament, sequela
S63.339A	Traumatic rupture of unspecified ulnocarpal (palmar) ligament, initial encounter
S63.339S	Traumatic rupture of unspecified ulnocarpal (palmar) ligament, sequela
S63.391A	Traumatic rupture of other ligament of right wrist, initial encounter
S63.391S	Traumatic rupture of other ligament of right wrist, sequela
S63.392A	Traumatic rupture of other ligament of left wrist, initial encounter
S63.392S	Traumatic rupture of other ligament of left wrist, sequela
S63.399A	Traumatic rupture of other ligament of unspecified wrist, initial encounter
S63.399S	Traumatic rupture of other ligament of unspecified wrist, sequela
S63.400A	Traumatic rupture of unspecified ligament of right index finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.400S	Traumatic rupture of unspecified ligament of right index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.401A	Traumatic rupture of unspecified ligament of left index finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.401S	Traumatic rupture of unspecified ligament of left index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.402A	Traumatic rupture of unspecified ligament of right middle finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.402S	Traumatic rupture of unspecified ligament of right middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.403A	Traumatic rupture of unspecified ligament of left middle finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.403S	Traumatic rupture of unspecified ligament of left middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.404A	Traumatic rupture of unspecified ligament of right ring finger at metacarpophalangeal and interphalangeal joint, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.404S	Traumatic rupture of unspecified ligament of right ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.405A	Traumatic rupture of unspecified ligament of left ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.405S	Traumatic rupture of unspecified ligament of left ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.406A	Traumatic rupture of unspecified ligament of right little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.406S	Traumatic rupture of unspecified ligament of right little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.407A	Traumatic rupture of unspecified ligament of left little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.407S	Traumatic rupture of unspecified ligament of left little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.408A	Traumatic rupture of unspecified ligament of other finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.408S	Traumatic rupture of unspecified ligament of other finger at metacarpophalangeal and interphalangeal joint, sequela
S63.409A	Traumatic rupture of unspecified ligament of unspecified finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.409S	Traumatic rupture of unspecified ligament of unspecified finger at metacarpophalangeal and interphalangeal joint, sequela
S63.410A	Traumatic rupture of collateral ligament of right index finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.410S	Traumatic rupture of collateral ligament of right index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.411A	Traumatic rupture of collateral ligament of left index finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.411S	Traumatic rupture of collateral ligament of left index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.412A	Traumatic rupture of collateral ligament of right middle finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.412S	Traumatic rupture of collateral ligament of right middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.413A	Traumatic rupture of collateral ligament of left middle finger at metacarpophalangeal and interphalangeal joint, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.413S	Traumatic rupture of collateral ligament of left middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.414A	Traumatic rupture of collateral ligament of right ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.414S	Traumatic rupture of collateral ligament of right ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.415A	Traumatic rupture of collateral ligament of left ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.415S	Traumatic rupture of collateral ligament of left ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.416A	Traumatic rupture of collateral ligament of right little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.416S	Traumatic rupture of collateral ligament of right little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.417A	Traumatic rupture of collateral ligament of left little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.417S	Traumatic rupture of collateral ligament of left little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.418A	Traumatic rupture of collateral ligament of other finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.418S	Traumatic rupture of collateral ligament of other finger at metacarpophalangeal and interphalangeal joint, sequela
S63.419A	Traumatic rupture of collateral ligament of unspecified finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.419S	Traumatic rupture of collateral ligament of unspecified finger at metacarpophalangeal and interphalangeal joint, sequela
S63.420A	Traumatic rupture of palmar ligament of right index finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.420S	Traumatic rupture of palmar ligament of right index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.421A	Traumatic rupture of palmar ligament of left index finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.421S	Traumatic rupture of palmar ligament of left index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.422A	Traumatic rupture of palmar ligament of right middle finger at metacarpophalangeal and interphalangeal joint, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.422S	Traumatic rupture of palmar ligament of right middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.423A	Traumatic rupture of palmar ligament of left middle finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.423S	Traumatic rupture of palmar ligament of left middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.424A	Traumatic rupture of palmar ligament of right ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.424S	Traumatic rupture of palmar ligament of right ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.425A	Traumatic rupture of palmar ligament of left ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.425S	Traumatic rupture of palmar ligament of left ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.426A	Traumatic rupture of palmar ligament of right little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.426S	Traumatic rupture of palmar ligament of right little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.427A	Traumatic rupture of palmar ligament of left little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.427S	Traumatic rupture of palmar ligament of left little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.428A	Traumatic rupture of palmar ligament of other finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.428S	Traumatic rupture of palmar ligament of other finger at metacarpophalangeal and interphalangeal joint, sequela
S63.429A	Traumatic rupture of palmar ligament of unspecified finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.429S	Traumatic rupture of palmar ligament of unspecified finger at metacarpophalangeal and interphalangeal joint, sequela
S63.430A	Traumatic rupture of volar plate of right index finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.430S	Traumatic rupture of volar plate of right index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.431A	Traumatic rupture of volar plate of left index finger at metacarpophalangeal and interphalangeal joint, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.431S	Traumatic rupture of volar plate of left index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.432A	Traumatic rupture of volar plate of right middle finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.432S	Traumatic rupture of volar plate of right middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.433A	Traumatic rupture of volar plate of left middle finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.433S	Traumatic rupture of volar plate of left middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.434A	Traumatic rupture of volar plate of right ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.434S	Traumatic rupture of volar plate of right ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.435A	Traumatic rupture of volar plate of left ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.435S	Traumatic rupture of volar plate of left ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.436A	Traumatic rupture of volar plate of right little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.436S	Traumatic rupture of volar plate of right little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.437A	Traumatic rupture of volar plate of left little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.437S	Traumatic rupture of volar plate of left little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.438A	Traumatic rupture of volar plate of other finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.438S	Traumatic rupture of volar plate of other finger at metacarpophalangeal and interphalangeal joint, sequela
S63.439A	Traumatic rupture of volar plate of unspecified finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.439S	Traumatic rupture of volar plate of unspecified finger at metacarpophalangeal and interphalangeal joint, sequela
S63.490A	Traumatic rupture of other ligament of right index finger at metacarpophalangeal and interphalangeal joint, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.490S	Traumatic rupture of other ligament of right index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.491A	Traumatic rupture of other ligament of left index finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.491S	Traumatic rupture of other ligament of left index finger at metacarpophalangeal and interphalangeal joint, sequela
S63.492A	Traumatic rupture of other ligament of right middle finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.492S	Traumatic rupture of other ligament of right middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.493A	Traumatic rupture of other ligament of left middle finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.493S	Traumatic rupture of other ligament of left middle finger at metacarpophalangeal and interphalangeal joint, sequela
S63.494A	Traumatic rupture of other ligament of right ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.494S	Traumatic rupture of other ligament of right ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.495A	Traumatic rupture of other ligament of left ring finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.495S	Traumatic rupture of other ligament of left ring finger at metacarpophalangeal and interphalangeal joint, sequela
S63.496A	Traumatic rupture of other ligament of right little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.496S	Traumatic rupture of other ligament of right little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.497A	Traumatic rupture of other ligament of left little finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.497S	Traumatic rupture of other ligament of left little finger at metacarpophalangeal and interphalangeal joint, sequela
S63.498A	Traumatic rupture of other ligament of other finger at metacarpophalangeal and interphalangeal joint, initial encounter
S63.498S	Traumatic rupture of other ligament of other finger at metacarpophalangeal and interphalangeal joint, sequela
S63.499A	Traumatic rupture of other ligament of unspecified finger at metacarpophalangeal and interphalangeal joint, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.499S	Traumatic rupture of other ligament of unspecified finger at metacarpophalangeal and interphalangeal joint, sequela
S63.501A	Unspecified sprain of right wrist, initial encounter
S63.501S	Unspecified sprain of right wrist, sequela
S63.502A	Unspecified sprain of left wrist, initial encounter
S63.502S	Unspecified sprain of left wrist, sequela
S63.509A	Unspecified sprain of unspecified wrist, initial encounter
S63.509S	Unspecified sprain of unspecified wrist, sequela
S63.511A	Sprain of carpal joint of right wrist, initial encounter
S63.511S	Sprain of carpal joint of right wrist, sequela
S63.512A	Sprain of carpal joint of left wrist, initial encounter
S63.512S	Sprain of carpal joint of left wrist, sequela
S63.519A	Sprain of carpal joint of unspecified wrist, initial encounter
S63.519S	Sprain of carpal joint of unspecified wrist, sequela
S63.521A	Sprain of radiocarpal joint of right wrist, initial encounter
S63.521S	Sprain of radiocarpal joint of right wrist, sequela
S63.522A	Sprain of radiocarpal joint of left wrist, initial encounter
S63.522S	Sprain of radiocarpal joint of left wrist, sequela
S63.529A	Sprain of radiocarpal joint of unspecified wrist, initial encounter
S63.529S	Sprain of radiocarpal joint of unspecified wrist, sequela
S63.591A	Other specified sprain of right wrist, initial encounter
S63.591S	Other specified sprain of right wrist, sequela
S63.592A	Other specified sprain of left wrist, initial encounter
S63.592S	Other specified sprain of left wrist, sequela
S63.599A	Other specified sprain of unspecified wrist, initial encounter
S63.599S	Other specified sprain of unspecified wrist, sequela
S63.601A	Unspecified sprain of right thumb, initial encounter
S63.601S	Unspecified sprain of right thumb, sequela
S63.602A	Unspecified sprain of left thumb, initial encounter
S63.602S	Unspecified sprain of left thumb, sequela
S63.609A	Unspecified sprain of unspecified thumb, initial encounter

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.609S	Unspecified sprain of unspecified thumb, sequela
S63.610A	Unspecified sprain of right index finger, initial encounter
S63.610S	Unspecified sprain of right index finger, sequela
S63.611A	Unspecified sprain of left index finger, initial encounter
S63.611S	Unspecified sprain of left index finger, sequela
S63.612A	Unspecified sprain of right middle finger, initial encounter
S63.612S	Unspecified sprain of right middle finger, sequela
S63.613A	Unspecified sprain of left middle finger, initial encounter
S63.613S	Unspecified sprain of left middle finger, sequela
S63.614A	Unspecified sprain of right ring finger, initial encounter
S63.614S	Unspecified sprain of right ring finger, sequela
S63.615A	Unspecified sprain of left ring finger, initial encounter
S63.615S	Unspecified sprain of left ring finger, sequela
S63.616A	Unspecified sprain of right little finger, initial encounter
S63.616S	Unspecified sprain of right little finger, sequela
S63.617A	Unspecified sprain of left little finger, initial encounter
S63.617S	Unspecified sprain of left little finger, sequela
S63.618A	Unspecified sprain of other finger, initial encounter
S63.618S	Unspecified sprain of other finger, sequela
S63.619A	Unspecified sprain of unspecified finger, initial encounter
S63.619S	Unspecified sprain of unspecified finger, sequela
S63.621A	Sprain of interphalangeal joint of right thumb, initial encounter
S63.621S	Sprain of interphalangeal joint of right thumb, sequela
S63.622A	Sprain of interphalangeal joint of left thumb, initial encounter
S63.622S	Sprain of interphalangeal joint of left thumb, sequela
S63.629A	Sprain of interphalangeal joint of unspecified thumb, initial encounter
S63.629S	Sprain of interphalangeal joint of unspecified thumb, sequela
S63.630A	Sprain of interphalangeal joint of right index finger, initial encounter
S63.630S	Sprain of interphalangeal joint of right index finger, sequela
S63.631A	Sprain of interphalangeal joint of left index finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.631S	Sprain of interphalangeal joint of left index finger, sequela
S63.632A	Sprain of interphalangeal joint of right middle finger, initial encounter
S63.632S	Sprain of interphalangeal joint of right middle finger, sequela
S63.633A	Sprain of interphalangeal joint of left middle finger, initial encounter
S63.633S	Sprain of interphalangeal joint of left middle finger, sequela
S63.634A	Sprain of interphalangeal joint of right ring finger, initial encounter
S63.634S	Sprain of interphalangeal joint of right ring finger, sequela
S63.635A	Sprain of interphalangeal joint of left ring finger, initial encounter
S63.635S	Sprain of interphalangeal joint of left ring finger, sequela
S63.636A	Sprain of interphalangeal joint of right little finger, initial encounter
S63.636S	Sprain of interphalangeal joint of right little finger, sequela
S63.637A	Sprain of interphalangeal joint of left little finger, initial encounter
S63.637S	Sprain of interphalangeal joint of left little finger, sequela
S63.638A	Sprain of interphalangeal joint of other finger, initial encounter
S63.638S	Sprain of interphalangeal joint of other finger, sequela
S63.639A	Sprain of interphalangeal joint of unspecified finger, initial encounter
S63.639S	Sprain of interphalangeal joint of unspecified finger, sequela
S63.641A	Sprain of metacarpophalangeal joint of right thumb, initial encounter
S63.641S	Sprain of metacarpophalangeal joint of right thumb, sequela
S63.642A	Sprain of metacarpophalangeal joint of left thumb, initial encounter
S63.642S	Sprain of metacarpophalangeal joint of left thumb, sequela
S63.649A	Sprain of metacarpophalangeal joint of unspecified thumb, initial encounter
S63.649S	Sprain of metacarpophalangeal joint of unspecified thumb, sequela
S63.650A	Sprain of metacarpophalangeal joint of right index finger, initial encounter
S63.650S	Sprain of metacarpophalangeal joint of right index finger, sequela
S63.651A	Sprain of metacarpophalangeal joint of left index finger, initial encounter
S63.651S	Sprain of metacarpophalangeal joint of left index finger, sequela
S63.652A	Sprain of metacarpophalangeal joint of right middle finger, initial encounter
S63.652S	Sprain of metacarpophalangeal joint of right middle finger, sequela
S63.653A	Sprain of metacarpophalangeal joint of left middle finger, initial encounter

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.653S	Sprain of metacarpophalangeal joint of left middle finger, sequela
S63.654A	Sprain of metacarpophalangeal joint of right ring finger, initial encounter
S63.654S	Sprain of metacarpophalangeal joint of right ring finger, sequela
S63.655A	Sprain of metacarpophalangeal joint of left ring finger, initial encounter
S63.655S	Sprain of metacarpophalangeal joint of left ring finger, sequela
S63.656A	Sprain of metacarpophalangeal joint of right little finger, initial encounter
S63.656S	Sprain of metacarpophalangeal joint of right little finger, sequela
S63.657A	Sprain of metacarpophalangeal joint of left little finger, initial encounter
S63.657S	Sprain of metacarpophalangeal joint of left little finger, sequela
S63.658A	Sprain of metacarpophalangeal joint of other finger, initial encounter
S63.658S	Sprain of metacarpophalangeal joint of other finger, sequela
S63.659A	Sprain of metacarpophalangeal joint of unspecified finger, initial encounter
S63.659S	Sprain of metacarpophalangeal joint of unspecified finger, sequela
S63.681A	Other sprain of right thumb, initial encounter
S63.681S	Other sprain of right thumb, sequela
S63.682A	Other sprain of left thumb, initial encounter
S63.682S	Other sprain of left thumb, sequela
S63.689A	Other sprain of unspecified thumb, initial encounter
S63.689S	Other sprain of unspecified thumb, sequela
S63.690A	Other sprain of right index finger, initial encounter
S63.690S	Other sprain of right index finger, sequela
S63.691A	Other sprain of left index finger, initial encounter
S63.691S	Other sprain of left index finger, sequela
S63.692A	Other sprain of right middle finger, initial encounter
S63.692S	Other sprain of right middle finger, sequela
S63.693A	Other sprain of left middle finger, initial encounter
S63.693S	Other sprain of left middle finger, sequela
S63.694A	Other sprain of right ring finger, initial encounter
S63.694S	Other sprain of right ring finger, sequela
S63.695A	Other sprain of left ring finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S63.695S	Other sprain of left ring finger, sequela
S63.696A	Other sprain of right little finger, initial encounter
S63.696S	Other sprain of right little finger, sequela
S63.697A	Other sprain of left little finger, initial encounter
S63.697S	Other sprain of left little finger, sequela
S63.698A	Other sprain of other finger, initial encounter
S63.698S	Other sprain of other finger, sequela
S63.699A	Other sprain of unspecified finger, initial encounter
S63.699S	Other sprain of unspecified finger, sequela
S63.8X1A	Sprain of other part of right wrist and hand, initial encounter
S63.8X1S	Sprain of other part of right wrist and hand, sequela
S63.8X2A	Sprain of other part of left wrist and hand, initial encounter
S63.8X2S	Sprain of other part of left wrist and hand, sequela
S63.8X9A	Sprain of other part of unspecified wrist and hand, initial encounter
S63.8X9S	Sprain of other part of unspecified wrist and hand, sequela
S63.90XA	Sprain of unspecified part of unspecified wrist and hand, initial encounter
S63.90XS	Sprain of unspecified part of unspecified wrist and hand, sequela
S63.91XA	Sprain of unspecified part of right wrist and hand, initial encounter
S63.91XS	Sprain of unspecified part of right wrist and hand, sequela
S63.92XA	Sprain of unspecified part of left wrist and hand, initial encounter
S63.92XS	Sprain of unspecified part of left wrist and hand, sequela
S64.00XA	Injury of ulnar nerve at wrist and hand level of unspecified arm, initial encounter
S64.00XS	Injury of ulnar nerve at wrist and hand level of unspecified arm, sequela
S64.01XA	Injury of ulnar nerve at wrist and hand level of right arm, initial encounter
S64.01XS	Injury of ulnar nerve at wrist and hand level of right arm, sequela
S64.02XA	Injury of ulnar nerve at wrist and hand level of left arm, initial encounter
S64.02XS	Injury of ulnar nerve at wrist and hand level of left arm, sequela
S64.10XA	Injury of median nerve at wrist and hand level of unspecified arm, initial encounter
S64.10XS	Injury of median nerve at wrist and hand level of unspecified arm, sequela
S64.11XA	Injury of median nerve at wrist and hand level of right arm, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S64.11XS	Injury of median nerve at wrist and hand level of right arm, sequela
S64.12XA	Injury of median nerve at wrist and hand level of left arm, initial encounter
S64.12XS	Injury of median nerve at wrist and hand level of left arm, sequela
S64.20XA	Injury of radial nerve at wrist and hand level of unspecified arm, initial encounter
S64.20XS	Injury of radial nerve at wrist and hand level of unspecified arm, sequela
S64.21XA	Injury of radial nerve at wrist and hand level of right arm, initial encounter
S64.21XS	Injury of radial nerve at wrist and hand level of right arm, sequela
S64.22XA	Injury of radial nerve at wrist and hand level of left arm, initial encounter
S64.22XS	Injury of radial nerve at wrist and hand level of left arm, sequela
S64.30XA	Injury of digital nerve of unspecified thumb, initial encounter
S64.30XS	Injury of digital nerve of unspecified thumb, sequela
S64.31XA	Injury of digital nerve of right thumb, initial encounter
S64.31XS	Injury of digital nerve of right thumb, sequela
S64.32XA	Injury of digital nerve of left thumb, initial encounter
S64.32XS	Injury of digital nerve of left thumb, sequela
S64.40XA	Injury of digital nerve of unspecified finger, initial encounter
S64.40XS	Injury of digital nerve of unspecified finger, sequela
S64.490A	Injury of digital nerve of right index finger, initial encounter
S64.490S	Injury of digital nerve of right index finger, sequela
S64.491A	Injury of digital nerve of left index finger, initial encounter
S64.491S	Injury of digital nerve of left index finger, sequela
S64.492A	Injury of digital nerve of right middle finger, initial encounter
S64.492S	Injury of digital nerve of right middle finger, sequela
S64.493A	Injury of digital nerve of left middle finger, initial encounter
S64.493S	Injury of digital nerve of left middle finger, sequela
S64.494A	Injury of digital nerve of right ring finger, initial encounter
S64.494S	Injury of digital nerve of right ring finger, sequela
S64.495A	Injury of digital nerve of left ring finger, initial encounter
S64.495S	Injury of digital nerve of left ring finger, sequela
S64.496A	Injury of digital nerve of right little finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S64.496S	Injury of digital nerve of right little finger, sequela
S64.497A	Injury of digital nerve of left little finger, initial encounter
S64.497S	Injury of digital nerve of left little finger, sequela
S64.498A	Injury of digital nerve of other finger, initial encounter
S64.498S	Injury of digital nerve of other finger, sequela
S64.8X1A	Injury of other nerves at wrist and hand level of right arm, initial encounter
S64.8X1S	Injury of other nerves at wrist and hand level of right arm, sequela
S64.8X2A	Injury of other nerves at wrist and hand level of left arm, initial encounter
S64.8X2S	Injury of other nerves at wrist and hand level of left arm, sequela
S64.8X9A	Injury of other nerves at wrist and hand level of unspecified arm, initial encounter
S64.8X9S	Injury of other nerves at wrist and hand level of unspecified arm, sequela
S64.90XA	Injury of unspecified nerve at wrist and hand level of unspecified arm, initial encounter
S64.90XS	Injury of unspecified nerve at wrist and hand level of unspecified arm, sequela
S64.91XA	Injury of unspecified nerve at wrist and hand level of right arm, initial encounter
S64.91XS	Injury of unspecified nerve at wrist and hand level of right arm, sequela
S64.92XA	Injury of unspecified nerve at wrist and hand level of left arm, initial encounter
S64.92XS	Injury of unspecified nerve at wrist and hand level of left arm, sequela
S65.001S	Unspecified injury of ulnar artery at wrist and hand level of right arm, sequela
S65.002S	Unspecified injury of ulnar artery at wrist and hand level of left arm, sequela
S65.009S	Unspecified injury of ulnar artery at wrist and hand level of unspecified arm, sequela
S65.011S	Laceration of ulnar artery at wrist and hand level of right arm, sequela
S65.012S	Laceration of ulnar artery at wrist and hand level of left arm, sequela
S65.019S	Laceration of ulnar artery at wrist and hand level of unspecified arm, sequela
S65.091S	Other specified injury of ulnar artery at wrist and hand level of right arm, sequela
S65.092S	Other specified injury of ulnar artery at wrist and hand level of left arm, sequela
S65.099S	Other specified injury of ulnar artery at wrist and hand level of unspecified arm, sequela
S65.101S	Unspecified injury of radial artery at wrist and hand level of right arm, sequela
S65.102S	Unspecified injury of radial artery at wrist and hand level of left arm, sequela
S65.109S	Unspecified injury of radial artery at wrist and hand level of unspecified arm, sequela
S65.111S	Laceration of radial artery at wrist and hand level of right arm, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S65.112S	Laceration of radial artery at wrist and hand level of left arm, sequela
S65.119S	Laceration of radial artery at wrist and hand level of unspecified arm, sequela
S65.191S	Other specified injury of radial artery at wrist and hand level of right arm, sequela
S65.192S	Other specified injury of radial artery at wrist and hand level of left arm, sequela
S65.199S	Other specified injury of radial artery at wrist and hand level of unspecified arm, sequela
S65.201S	Unspecified injury of superficial palmar arch of right hand, sequela
S65.202S	Unspecified injury of superficial palmar arch of left hand, sequela
S65.209S	Unspecified injury of superficial palmar arch of unspecified hand, sequela
S65.211S	Laceration of superficial palmar arch of right hand, sequela
S65.212S	Laceration of superficial palmar arch of left hand, sequela
S65.219S	Laceration of superficial palmar arch of unspecified hand, sequela
S65.291S	Other specified injury of superficial palmar arch of right hand, sequela
S65.292S	Other specified injury of superficial palmar arch of left hand, sequela
S65.299S	Other specified injury of superficial palmar arch of unspecified hand, sequela
S65.301S	Unspecified injury of deep palmar arch of right hand, sequela
S65.302S	Unspecified injury of deep palmar arch of left hand, sequela
S65.309S	Unspecified injury of deep palmar arch of unspecified hand, sequela
S65.311S	Laceration of deep palmar arch of right hand, sequela
S65.312S	Laceration of deep palmar arch of left hand, sequela
S65.319S	Laceration of deep palmar arch of unspecified hand, sequela
S65.391S	Other specified injury of deep palmar arch of right hand, sequela
S65.392S	Other specified injury of deep palmar arch of left hand, sequela
S65.399S	Other specified injury of deep palmar arch of unspecified hand, sequela
S65.401S	Unspecified injury of blood vessel of right thumb, sequela
S65.402S	Unspecified injury of blood vessel of left thumb, sequela
S65.409S	Unspecified injury of blood vessel of unspecified thumb, sequela
S65.411S	Laceration of blood vessel of right thumb, sequela
S65.412S	Laceration of blood vessel of left thumb, sequela
S65.419S	Laceration of blood vessel of unspecified thumb, sequela
S65.491S	Other specified injury of blood vessel of right thumb, sequela

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S65.492S	Other specified injury of blood vessel of left thumb, sequela
S65.499S	Other specified injury of blood vessel of unspecified thumb, sequela
S65.500S	Unspecified injury of blood vessel of right index finger, sequela
S65.501S	Unspecified injury of blood vessel of left index finger, sequela
S65.502S	Unspecified injury of blood vessel of right middle finger, sequela
S65.503S	Unspecified injury of blood vessel of left middle finger, sequela
S65.504S	Unspecified injury of blood vessel of right ring finger, sequela
S65.505S	Unspecified injury of blood vessel of left ring finger, sequela
S65.506S	Unspecified injury of blood vessel of right little finger, sequela
S65.507S	Unspecified injury of blood vessel of left little finger, sequela
S65.508S	Unspecified injury of blood vessel of other finger, sequela
S65.509S	Unspecified injury of blood vessel of unspecified finger, sequela
S65.510S	Laceration of blood vessel of right index finger, sequela
S65.511S	Laceration of blood vessel of left index finger, sequela
S65.512S	Laceration of blood vessel of right middle finger, sequela
S65.513S	Laceration of blood vessel of left middle finger, sequela
S65.514S	Laceration of blood vessel of right ring finger, sequela
S65.515S	Laceration of blood vessel of left ring finger, sequela
S65.516S	Laceration of blood vessel of right little finger, sequela
S65.517S	Laceration of blood vessel of left little finger, sequela
S65.518S	Laceration of blood vessel of other finger, sequela
S65.519S	Laceration of blood vessel of unspecified finger, sequela
S65.590S	Other specified injury of blood vessel of right index finger, sequela
S65.591S	Other specified injury of blood vessel of left index finger, sequela
S65.592S	Other specified injury of blood vessel of right middle finger, sequela
S65.593S	Other specified injury of blood vessel of left middle finger, sequela
S65.594S	Other specified injury of blood vessel of right ring finger, sequela
S65.595S	Other specified injury of blood vessel of left ring finger, sequela
S65.596S	Other specified injury of blood vessel of right little finger, sequela
S65.597S	Other specified injury of blood vessel of left little finger, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S65.598S	Other specified injury of blood vessel of other finger, sequela
S65.599S	Other specified injury of blood vessel of unspecified finger, sequela
S65.801S	Unspecified injury of other blood vessels at wrist and hand level of right arm, sequela
S65.802S	Unspecified injury of other blood vessels at wrist and hand level of left arm, sequela
S65.809S	Unspecified injury of other blood vessels at wrist and hand level of unspecified arm, sequela
S65.811S	Laceration of other blood vessels at wrist and hand level of right arm, sequela
S65.812S	Laceration of other blood vessels at wrist and hand level of left arm, sequela
S65.819S	Laceration of other blood vessels at wrist and hand level of unspecified arm, sequela
S65.891S	Other specified injury of other blood vessels at wrist and hand level of right arm, sequela
S65.892S	Other specified injury of other blood vessels at wrist and hand level of left arm, sequela
S65.899S	Other specified injury of other blood vessels at wrist and hand level of unspecified arm, sequela
S65.901S	Unspecified injury of unspecified blood vessel at wrist and hand level of right arm, sequela
S65.902S	Unspecified injury of unspecified blood vessel at wrist and hand level of left arm, sequela
S65.909S	Unspecified injury of unspecified blood vessel at wrist and hand level of unspecified arm, sequela
S65.911S	Laceration of unspecified blood vessel at wrist and hand level of right arm, sequela
S65.912S	Laceration of unspecified blood vessel at wrist and hand level of left arm, sequela
S65.919S	Laceration of unspecified blood vessel at wrist and hand level of unspecified arm, sequela
S65.991S	Other specified injury of unspecified blood vessel at wrist and hand of right arm, sequela
S65.992S	Other specified injury of unspecified blood vessel at wrist and hand of left arm, sequela
S65.999S	Other specified injury of unspecified blood vessel at wrist and hand of unspecified arm, sequela
S66.001S	Unspecified injury of long flexor muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.002S	Unspecified injury of long flexor muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.009S	Unspecified injury of long flexor muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.011A	Strain of long flexor muscle, fascia and tendon of right thumb at wrist and hand level, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.011S	Strain of long flexor muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.012A	Strain of long flexor muscle, fascia and tendon of left thumb at wrist and hand level, initial encounter
S66.012S	Strain of long flexor muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.019A	Strain of long flexor muscle, fascia and tendon of unspecified thumb at wrist and hand level, initial encounter
S66.019S	Strain of long flexor muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.021S	Laceration of long flexor muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.022S	Laceration of long flexor muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.029S	Laceration of long flexor muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.091S	Other specified injury of long flexor muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.092S	Other specified injury of long flexor muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.099S	Other specified injury of long flexor muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.100S	Unspecified injury of flexor muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.101S	Unspecified injury of flexor muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.102S	Unspecified injury of flexor muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.103S	Unspecified injury of flexor muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.104S	Unspecified injury of flexor muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.105S	Unspecified injury of flexor muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.106S	Unspecified injury of flexor muscle, fascia and tendon of right little finger at wrist and hand level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.107S	Unspecified injury of flexor muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.108S	Unspecified injury of flexor muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.109S	Unspecified injury of flexor muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.110A	Strain of flexor muscle, fascia and tendon of right index finger at wrist and hand level, initial encounter
S66.110S	Strain of flexor muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.111A	Strain of flexor muscle, fascia and tendon of left index finger at wrist and hand level, initial encounter
S66.111S	Strain of flexor muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.112A	Strain of flexor muscle, fascia and tendon of right middle finger at wrist and hand level, initial encounter
S66.112S	Strain of flexor muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.113A	Strain of flexor muscle, fascia and tendon of left middle finger at wrist and hand level, initial encounter
S66.113S	Strain of flexor muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.114A	Strain of flexor muscle, fascia and tendon of right ring finger at wrist and hand level, initial encounter
S66.114S	Strain of flexor muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.115A	Strain of flexor muscle, fascia and tendon of left ring finger at wrist and hand level, initial encounter
S66.115S	Strain of flexor muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.116A	Strain of flexor muscle, fascia and tendon of right little finger at wrist and hand level, initial encounter
S66.116S	Strain of flexor muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.117A	Strain of flexor muscle, fascia and tendon of left little finger at wrist and hand level, initial encounter
S66.117S	Strain of flexor muscle, fascia and tendon of left little finger at wrist and hand level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.118A	Strain of flexor muscle, fascia and tendon of other finger at wrist and hand level, initial encounter
S66.118S	Strain of flexor muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.119A	Strain of flexor muscle, fascia and tendon of unspecified finger at wrist and hand level, initial encounter
S66.119S	Strain of flexor muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.120S	Laceration of flexor muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.121S	Laceration of flexor muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.122S	Laceration of flexor muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.123S	Laceration of flexor muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.124S	Laceration of flexor muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.125S	Laceration of flexor muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.126S	Laceration of flexor muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.127S	Laceration of flexor muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.128S	Laceration of flexor muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.129S	Laceration of flexor muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.190S	Other injury of flexor muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.191S	Other injury of flexor muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.192S	Other injury of flexor muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.193S	Other injury of flexor muscle, fascia and tendon of left middle finger at wrist and hand level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.194S	Other injury of flexor muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.195S	Other injury of flexor muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.196S	Other injury of flexor muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.197S	Other injury of flexor muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.198S	Other injury of flexor muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.199S	Other injury of flexor muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.201S	Unspecified injury of extensor muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.202S	Unspecified injury of extensor muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.209S	Unspecified injury of extensor muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.211A	Strain of extensor muscle, fascia and tendon of right thumb at wrist and hand level, initial encounter
S66.211S	Strain of extensor muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.212A	Strain of extensor muscle, fascia and tendon of left thumb at wrist and hand level, initial encounter
S66.212S	Strain of extensor muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.219A	Strain of extensor muscle, fascia and tendon of unspecified thumb at wrist and hand level, initial encounter
S66.219S	Strain of extensor muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.221S	Laceration of extensor muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.222S	Laceration of extensor muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.229S	Laceration of extensor muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.291S	Other specified injury of extensor muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.292S	Other specified injury of extensor muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.299S	Other specified injury of extensor muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.300S	Unspecified injury of extensor muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.301S	Unspecified injury of extensor muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.302S	Unspecified injury of extensor muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.303S	Unspecified injury of extensor muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.304S	Unspecified injury of extensor muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.305S	Unspecified injury of extensor muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.306S	Unspecified injury of extensor muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.307S	Unspecified injury of extensor muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.308S	Unspecified injury of extensor muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.309S	Unspecified injury of extensor muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.310A	Strain of extensor muscle, fascia and tendon of right index finger at wrist and hand level, initial encounter
S66.310S	Strain of extensor muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.311A	Strain of extensor muscle, fascia and tendon of left index finger at wrist and hand level, initial encounter
S66.311S	Strain of extensor muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.312A	Strain of extensor muscle, fascia and tendon of right middle finger at wrist and hand level, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.312S	Strain of extensor muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.313A	Strain of extensor muscle, fascia and tendon of left middle finger at wrist and hand level, initial encounter
S66.313S	Strain of extensor muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.314A	Strain of extensor muscle, fascia and tendon of right ring finger at wrist and hand level, initial encounter
S66.314S	Strain of extensor muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.315A	Strain of extensor muscle, fascia and tendon of left ring finger at wrist and hand level, initial encounter
S66.315S	Strain of extensor muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.316A	Strain of extensor muscle, fascia and tendon of right little finger at wrist and hand level, initial encounter
S66.316S	Strain of extensor muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.317A	Strain of extensor muscle, fascia and tendon of left little finger at wrist and hand level, initial encounter
S66.317S	Strain of extensor muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.318A	Strain of extensor muscle, fascia and tendon of other finger at wrist and hand level, initial encounter
S66.318S	Strain of extensor muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.319A	Strain of extensor muscle, fascia and tendon of unspecified finger at wrist and hand level, initial encounter
S66.319S	Strain of extensor muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.320S	Laceration of extensor muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.321S	Laceration of extensor muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.322S	Laceration of extensor muscle, fascia and tendon of right middle finger at wrist and hand level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.323S	Laceration of extensor muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.324S	Laceration of extensor muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.325S	Laceration of extensor muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.326S	Laceration of extensor muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.327S	Laceration of extensor muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.328S	Laceration of extensor muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.329S	Laceration of extensor muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.390S	Other injury of extensor muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.391S	Other injury of extensor muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.392S	Other injury of extensor muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.393S	Other injury of extensor muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.394S	Other injury of extensor muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.395S	Other injury of extensor muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.396S	Other injury of extensor muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.397S	Other injury of extensor muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.398S	Other injury of extensor muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.399S	Other injury of extensor muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.401S	Unspecified injury of intrinsic muscle, fascia and tendon of right thumb at wrist and hand level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.402S	Unspecified injury of intrinsic muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.409S	Unspecified injury of intrinsic muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.411A	Strain of intrinsic muscle, fascia and tendon of right thumb at wrist and hand level, initial encounter
S66.411S	Strain of intrinsic muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.412A	Strain of intrinsic muscle, fascia and tendon of left thumb at wrist and hand level, initial encounter
S66.412S	Strain of intrinsic muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.419A	Strain of intrinsic muscle, fascia and tendon of unspecified thumb at wrist and hand level, initial encounter
S66.419S	Strain of intrinsic muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.421S	Laceration of intrinsic muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.422S	Laceration of intrinsic muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.429S	Laceration of intrinsic muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.491S	Other specified injury of intrinsic muscle, fascia and tendon of right thumb at wrist and hand level, sequela
S66.492S	Other specified injury of intrinsic muscle, fascia and tendon of left thumb at wrist and hand level, sequela
S66.499S	Other specified injury of intrinsic muscle, fascia and tendon of unspecified thumb at wrist and hand level, sequela
S66.500S	Unspecified injury of intrinsic muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.501S	Unspecified injury of intrinsic muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.502S	Unspecified injury of intrinsic muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.503S	Unspecified injury of intrinsic muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.504S	Unspecified injury of intrinsic muscle, fascia and tendon of right ring finger at wrist and hand level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.505S	Unspecified injury of intrinsic muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.506S	Unspecified injury of intrinsic muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.507S	Unspecified injury of intrinsic muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.508S	Unspecified injury of intrinsic muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.509S	Unspecified injury of intrinsic muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.510A	Strain of intrinsic muscle, fascia and tendon of right index finger at wrist and hand level, initial encounter
S66.510S	Strain of intrinsic muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.511A	Strain of intrinsic muscle, fascia and tendon of left index finger at wrist and hand level, initial encounter
S66.511S	Strain of intrinsic muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.512A	Strain of intrinsic muscle, fascia and tendon of right middle finger at wrist and hand level, initial encounter
S66.512S	Strain of intrinsic muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.513A	Strain of intrinsic muscle, fascia and tendon of left middle finger at wrist and hand level, initial encounter
S66.513S	Strain of intrinsic muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.514A	Strain of intrinsic muscle, fascia and tendon of right ring finger at wrist and hand level, initial encounter
S66.514S	Strain of intrinsic muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.515A	Strain of intrinsic muscle, fascia and tendon of left ring finger at wrist and hand level, initial encounter
S66.515S	Strain of intrinsic muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.516A	Strain of intrinsic muscle, fascia and tendon of right little finger at wrist and hand level, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.516S	Strain of intrinsic muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.517A	Strain of intrinsic muscle, fascia and tendon of left little finger at wrist and hand level, initial encounter
S66.517S	Strain of intrinsic muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.518A	Strain of intrinsic muscle, fascia and tendon of other finger at wrist and hand level, initial encounter
S66.518S	Strain of intrinsic muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.519A	Strain of intrinsic muscle, fascia and tendon of unspecified finger at wrist and hand level, initial encounter
S66.519S	Strain of intrinsic muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.520S	Laceration of intrinsic muscle, fascia and tendon of right index finger at wrist and hand level, sequela
S66.521S	Laceration of intrinsic muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.522S	Laceration of intrinsic muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.523S	Laceration of intrinsic muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.524S	Laceration of intrinsic muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.525S	Laceration of intrinsic muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.526S	Laceration of intrinsic muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.527S	Laceration of intrinsic muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.528S	Laceration of intrinsic muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.529S	Laceration of intrinsic muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.590S	Other injury of intrinsic muscle, fascia and tendon of right index finger at wrist and hand level, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.591S	Other injury of intrinsic muscle, fascia and tendon of left index finger at wrist and hand level, sequela
S66.592S	Other injury of intrinsic muscle, fascia and tendon of right middle finger at wrist and hand level, sequela
S66.593S	Other injury of intrinsic muscle, fascia and tendon of left middle finger at wrist and hand level, sequela
S66.594S	Other injury of intrinsic muscle, fascia and tendon of right ring finger at wrist and hand level, sequela
S66.595S	Other injury of intrinsic muscle, fascia and tendon of left ring finger at wrist and hand level, sequela
S66.596S	Other injury of intrinsic muscle, fascia and tendon of right little finger at wrist and hand level, sequela
S66.597S	Other injury of intrinsic muscle, fascia and tendon of left little finger at wrist and hand level, sequela
S66.598S	Other injury of intrinsic muscle, fascia and tendon of other finger at wrist and hand level, sequela
S66.599S	Other injury of intrinsic muscle, fascia and tendon of unspecified finger at wrist and hand level, sequela
S66.801S	Unspecified injury of other specified muscles, fascia and tendons at wrist and hand level, right hand, sequela
S66.802S	Unspecified injury of other specified muscles, fascia and tendons at wrist and hand level, left hand, sequela
S66.809S	Unspecified injury of other specified muscles, fascia and tendons at wrist and hand level, unspecified hand, sequela
S66.811A	Strain of other specified muscles, fascia and tendons at wrist and hand level, right hand, initial encounter
S66.811S	Strain of other specified muscles, fascia and tendons at wrist and hand level, right hand, sequela
S66.812A	Strain of other specified muscles, fascia and tendons at wrist and hand level, left hand, initial encounter
S66.812S	Strain of other specified muscles, fascia and tendons at wrist and hand level, left hand, sequela
S66.819A	Strain of other specified muscles, fascia and tendons at wrist and hand level, unspecified hand, initial encounter
S66.819S	Strain of other specified muscles, fascia and tendons at wrist and hand level, unspecified hand, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S66.821S	Laceration of other specified muscles, fascia and tendons at wrist and hand level, right hand, sequela
S66.822S	Laceration of other specified muscles, fascia and tendons at wrist and hand level, left hand, sequela
S66.829S	Laceration of other specified muscles, fascia and tendons at wrist and hand level, unspecified hand, sequela
S66.891S	Other injury of other specified muscles, fascia and tendons at wrist and hand level, right hand, sequela
S66.892S	Other injury of other specified muscles, fascia and tendons at wrist and hand level, left hand, sequela
S66.899S	Other injury of other specified muscles, fascia and tendons at wrist and hand level, unspecified hand, sequela
S66.901S	Unspecified injury of unspecified muscle, fascia and tendon at wrist and hand level, right hand, sequela
S66.902S	Unspecified injury of unspecified muscle, fascia and tendon at wrist and hand level, left hand, sequela
S66.909S	Unspecified injury of unspecified muscle, fascia and tendon at wrist and hand level, unspecified hand, sequela
S66.911A	Strain of unspecified muscle, fascia and tendon at wrist and hand level, right hand, initial encounter
S66.911S	Strain of unspecified muscle, fascia and tendon at wrist and hand level, right hand, sequela
S66.912A	Strain of unspecified muscle, fascia and tendon at wrist and hand level, left hand, initial encounter
S66.912S	Strain of unspecified muscle, fascia and tendon at wrist and hand level, left hand, sequela
S66.919A	Strain of unspecified muscle, fascia and tendon at wrist and hand level, unspecified hand, initial encounter
S66.919S	Strain of unspecified muscle, fascia and tendon at wrist and hand level, unspecified hand, sequela
S66.921S	Laceration of unspecified muscle, fascia and tendon at wrist and hand level, right hand, sequela
S66.922S	Laceration of unspecified muscle, fascia and tendon at wrist and hand level, left hand, sequela
S66.929S	Laceration of unspecified muscle, fascia and tendon at wrist and hand level, unspecified hand, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S66.991S	Other injury of unspecified muscle, fascia and tendon at wrist and hand level, right hand, sequela
S66.992S	Other injury of unspecified muscle, fascia and tendon at wrist and hand level, left hand, sequela
S66.999S	Other injury of unspecified muscle, fascia and tendon at wrist and hand level, unspecified hand, sequela
S67.00XS	Crushing injury of unspecified thumb, sequela
S67.01XS	Crushing injury of right thumb, sequela
S67.02XS	Crushing injury of left thumb, sequela
S67.10XS	Crushing injury of unspecified finger(s), sequela
S67.190S	Crushing injury of right index finger, sequela
S67.191S	Crushing injury of left index finger, sequela
S67.192S	Crushing injury of right middle finger, sequela
S67.193S	Crushing injury of left middle finger, sequela
S67.194S	Crushing injury of right ring finger, sequela
S67.195S	Crushing injury of left ring finger, sequela
S67.196S	Crushing injury of right little finger, sequela
S67.197S	Crushing injury of left little finger, sequela
S67.198S	Crushing injury of other finger, sequela
S67.20XS	Crushing injury of unspecified hand, sequela
S67.21XS	Crushing injury of right hand, sequela
S67.22XS	Crushing injury of left hand, sequela
S67.30XS	Crushing injury of unspecified wrist, sequela
S67.31XS	Crushing injury of right wrist, sequela
S67.32XS	Crushing injury of left wrist, sequela
S67.40XS	Crushing injury of unspecified wrist and hand, sequela
S67.41XS	Crushing injury of right wrist and hand, sequela
S67.42XS	Crushing injury of left wrist and hand, sequela
S67.90XS	Crushing injury of unspecified part(s) of unspecified wrist, hand and fingers, sequela
S67.91XS	Crushing injury of unspecified part(s) of right wrist, hand and fingers, sequela
S67.92XS	Crushing injury of unspecified part(s) of left wrist, hand and fingers, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S68.011S	Complete traumatic metacarpophalangeal amputation of right thumb, sequela
S68.012S	Complete traumatic metacarpophalangeal amputation of left thumb, sequela
S68.019S	Complete traumatic metacarpophalangeal amputation of unspecified thumb, sequela
S68.021S	Partial traumatic metacarpophalangeal amputation of right thumb, sequela
S68.022S	Partial traumatic metacarpophalangeal amputation of left thumb, sequela
S68.029S	Partial traumatic metacarpophalangeal amputation of unspecified thumb, sequela
S68.110S	Complete traumatic metacarpophalangeal amputation of right index finger, sequela
S68.111S	Complete traumatic metacarpophalangeal amputation of left index finger, sequela
S68.112S	Complete traumatic metacarpophalangeal amputation of right middle finger, sequela
S68.113S	Complete traumatic metacarpophalangeal amputation of left middle finger, sequela
S68.114S	Complete traumatic metacarpophalangeal amputation of right ring finger, sequela
S68.115S	Complete traumatic metacarpophalangeal amputation of left ring finger, sequela
S68.116S	Complete traumatic metacarpophalangeal amputation of right little finger, sequela
S68.117S	Complete traumatic metacarpophalangeal amputation of left little finger, sequela
S68.118S	Complete traumatic metacarpophalangeal amputation of other finger, sequela
S68.119S	Complete traumatic metacarpophalangeal amputation of unspecified finger, sequela
S68.120S	Partial traumatic metacarpophalangeal amputation of right index finger, sequela
S68.121S	Partial traumatic metacarpophalangeal amputation of left index finger, sequela
S68.122S	Partial traumatic metacarpophalangeal amputation of right middle finger, sequela
S68.123S	Partial traumatic metacarpophalangeal amputation of left middle finger, sequela
S68.124S	Partial traumatic metacarpophalangeal amputation of right ring finger, sequela
S68.125S	Partial traumatic metacarpophalangeal amputation of left ring finger, sequela
S68.126S	Partial traumatic metacarpophalangeal amputation of right little finger, sequela
S68.127S	Partial traumatic metacarpophalangeal amputation of left little finger, sequela
S68.128S	Partial traumatic metacarpophalangeal amputation of other finger, sequela
S68.129S	Partial traumatic metacarpophalangeal amputation of unspecified finger, sequela
S68.411S	Complete traumatic amputation of right hand at wrist level, sequela
S68.412S	Complete traumatic amputation of left hand at wrist level, sequela
S68.419S	Complete traumatic amputation of unspecified hand at wrist level, sequela
S68.421S	Partial traumatic amputation of right hand at wrist level, sequela

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Code	Description
S68.422S	Partial traumatic amputation of left hand at wrist level, sequela
S68.429S	Partial traumatic amputation of unspecified hand at wrist level, sequela
S68.511S	Complete traumatic transphalangeal amputation of right thumb, sequela
S68.512S	Complete traumatic transphalangeal amputation of left thumb, sequela
S68.519S	Complete traumatic transphalangeal amputation of unspecified thumb, sequela
S68.521S	Partial traumatic transphalangeal amputation of right thumb, sequela
S68.522S	Partial traumatic transphalangeal amputation of left thumb, sequela
S68.529S	Partial traumatic transphalangeal amputation of unspecified thumb, sequela
S68.610S	Complete traumatic transphalangeal amputation of right index finger, sequela
S68.611S	Complete traumatic transphalangeal amputation of left index finger, sequela
S68.612S	Complete traumatic transphalangeal amputation of right middle finger, sequela
S68.613S	Complete traumatic transphalangeal amputation of left middle finger, sequela
S68.614S	Complete traumatic transphalangeal amputation of right ring finger, sequela
S68.615S	Complete traumatic transphalangeal amputation of left ring finger, sequela
S68.616S	Complete traumatic transphalangeal amputation of right little finger, sequela
S68.617S	Complete traumatic transphalangeal amputation of left little finger, sequela
S68.618S	Complete traumatic transphalangeal amputation of other finger, sequela
S68.619S	Complete traumatic transphalangeal amputation of unspecified finger, sequela
S68.620S	Partial traumatic transphalangeal amputation of right index finger, sequela
S68.621S	Partial traumatic transphalangeal amputation of left index finger, sequela
S68.622S	Partial traumatic transphalangeal amputation of right middle finger, sequela
S68.623S	Partial traumatic transphalangeal amputation of left middle finger, sequela
S68.624S	Partial traumatic transphalangeal amputation of right ring finger, sequela
S68.625S	Partial traumatic transphalangeal amputation of left ring finger, sequela
S68.626S	Partial traumatic transphalangeal amputation of right little finger, sequela
S68.627S	Partial traumatic transphalangeal amputation of left little finger, sequela
S68.628S	Partial traumatic transphalangeal amputation of other finger, sequela
S68.629S	Partial traumatic transphalangeal amputation of unspecified finger, sequela
S68.711S	Complete traumatic transmetacarpal amputation of right hand, sequela
S68.712S	Complete traumatic transmetacarpal amputation of left hand, sequela



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Code	Description
S68.719S	Complete traumatic transmetacarpal amputation of unspecified hand, sequela
S68.721S	Partial traumatic transmetacarpal amputation of right hand, sequela
S68.722S	Partial traumatic transmetacarpal amputation of left hand, sequela
S68.729S	Partial traumatic transmetacarpal amputation of unspecified hand, sequela
S69.80XS	Other specified injuries of unspecified wrist, hand and finger(s), sequela
S69.81XS	Other specified injuries of right wrist, hand and finger(s), sequela
S69.82XS	Other specified injuries of left wrist, hand and finger(s), sequela
S69.90XS	Unspecified injury of unspecified wrist, hand and finger(s), sequela
S69.91XS	Unspecified injury of right wrist, hand and finger(s), sequela
S69.92XS	Unspecified injury of left wrist, hand and finger(s), sequela
S70.00XS	Contusion of unspecified hip, sequela
S70.01XS	Contusion of right hip, sequela
S70.02XS	Contusion of left hip, sequela
S70.10XS	Contusion of unspecified thigh, sequela
S70.11XS	Contusion of right thigh, sequela
S70.12XS	Contusion of left thigh, sequela
S70.211A	Abrasion, right hip, initial encounter
S70.211S	Abrasion, right hip, sequela
S70.212A	Abrasion, left hip, initial encounter
S70.212S	Abrasion, left hip, sequela
S70.219A	Abrasion, unspecified hip, initial encounter
S70.219S	Abrasion, unspecified hip, sequela
S70.221A	Blister (nonthermal), right hip, initial encounter
S70.221S	Blister (nonthermal), right hip, sequela
S70.222A	Blister (nonthermal), left hip, initial encounter
S70.222S	Blister (nonthermal), left hip, sequela
S70.229A	Blister (nonthermal), unspecified hip, initial encounter
S70.229S	Blister (nonthermal), unspecified hip, sequela
S70.241A	External constriction, right hip, initial encounter
S70.241S	External constriction, right hip, sequela



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S70.242A	External constriction, left hip, initial encounter
S70.242S	External constriction, left hip, sequela
S70.249A	External constriction, unspecified hip, initial encounter
S70.249S	External constriction, unspecified hip, sequela
S70.251A	Superficial foreign body, right hip, initial encounter
S70.251S	Superficial foreign body, right hip, sequela
S70.252A	Superficial foreign body, left hip, initial encounter
S70.252S	Superficial foreign body, left hip, sequela
S70.259A	Superficial foreign body, unspecified hip, initial encounter
S70.259S	Superficial foreign body, unspecified hip, sequela
S70.261A	Insect bite (nonvenomous), right hip, initial encounter
S70.261S	Insect bite (nonvenomous), right hip, sequela
S70.262A	Insect bite (nonvenomous), left hip, initial encounter
S70.262S	Insect bite (nonvenomous), left hip, sequela
S70.269A	Insect bite (nonvenomous), unspecified hip, initial encounter
S70.269S	Insect bite (nonvenomous), unspecified hip, sequela
S70.271A	Other superficial bite of hip, right hip, initial encounter
S70.271S	Other superficial bite of hip, right hip, sequela
S70.272A	Other superficial bite of hip, left hip, initial encounter
S70.272S	Other superficial bite of hip, left hip, sequela
S70.279A	Other superficial bite of hip, unspecified hip, initial encounter
S70.279S	Other superficial bite of hip, unspecified hip, sequela
S70.311A	Abrasion, right thigh, initial encounter
S70.311S	Abrasion, right thigh, sequela
S70.312A	Abrasion, left thigh, initial encounter
S70.312S	Abrasion, left thigh, sequela
S70.319A	Abrasion, unspecified thigh, initial encounter
S70.319S	Abrasion, unspecified thigh, sequela
S70.321A	Blister (nonthermal), right thigh, initial encounter
S70.321S	Blister (nonthermal), right thigh, sequela



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Code	Description
S70.322A	Blister (nonthermal), left thigh, initial encounter
S70.322S	Blister (nonthermal), left thigh, sequela
S70.329A	Blister (nonthermal), unspecified thigh, initial encounter
S70.329S	Blister (nonthermal), unspecified thigh, sequela
S70.341A	External constriction, right thigh, initial encounter
S70.341S	External constriction, right thigh, sequela
S70.342A	External constriction, left thigh, initial encounter
S70.342S	External constriction, left thigh, sequela
S70.349A	External constriction, unspecified thigh, initial encounter
S70.349S	External constriction, unspecified thigh, sequela
S70.351A	Superficial foreign body, right thigh, initial encounter
S70.351S	Superficial foreign body, right thigh, sequela
S70.352A	Superficial foreign body, left thigh, initial encounter
S70.352S	Superficial foreign body, left thigh, sequela
S70.359A	Superficial foreign body, unspecified thigh, initial encounter
S70.359S	Superficial foreign body, unspecified thigh, sequela
S70.361A	Insect bite (nonvenomous), right thigh, initial encounter
S70.361S	Insect bite (nonvenomous), right thigh, sequela
S70.362A	Insect bite (nonvenomous), left thigh, initial encounter
S70.362S	Insect bite (nonvenomous), left thigh, sequela
S70.369A	Insect bite (nonvenomous), unspecified thigh, initial encounter
S70.369S	Insect bite (nonvenomous), unspecified thigh, sequela
S70.371A	Other superficial bite of right thigh, initial encounter
S70.371S	Other superficial bite of right thigh, sequela
S70.372A	Other superficial bite of left thigh, initial encounter
S70.372S	Other superficial bite of left thigh, sequela
S70.379A	Other superficial bite of unspecified thigh, initial encounter
S70.379S	Other superficial bite of unspecified thigh, sequela
S70.911A	Unspecified superficial injury of right hip, initial encounter
S70.911S	Unspecified superficial injury of right hip, sequela



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Code	Description
S70.912A	Unspecified superficial injury of left hip, initial encounter
S70.912S	Unspecified superficial injury of left hip, sequela
S70.919A	Unspecified superficial injury of unspecified hip, initial encounter
S70.919S	Unspecified superficial injury of unspecified hip, sequela
S70.921A	Unspecified superficial injury of right thigh, initial encounter
S70.921S	Unspecified superficial injury of right thigh, sequela
S70.922A	Unspecified superficial injury of left thigh, initial encounter
S70.922S	Unspecified superficial injury of left thigh, sequela
S70.929A	Unspecified superficial injury of unspecified thigh, initial encounter
S70.929S	Unspecified superficial injury of unspecified thigh, sequela
S71.001S	Unspecified open wound, right hip, sequela
S71.002S	Unspecified open wound, left hip, sequela
S71.009A	Unspecified open wound, unspecified hip, initial encounter
S71.009S	Unspecified open wound, unspecified hip, sequela
S71.011S	Laceration without foreign body, right hip, sequela
S71.012S	Laceration without foreign body, left hip, sequela
S71.019S	Laceration without foreign body, unspecified hip, sequela
S71.021S	Laceration with foreign body, right hip, sequela
S71.022S	Laceration with foreign body, left hip, sequela
S71.029S	Laceration with foreign body, unspecified hip, sequela
S71.031S	Puncture wound without foreign body, right hip, sequela
S71.032S	Puncture wound without foreign body, left hip, sequela
S71.039S	Puncture wound without foreign body, unspecified hip, sequela
S71.041S	Puncture wound with foreign body, right hip, sequela
S71.042S	Puncture wound with foreign body, left hip, sequela
S71.049S	Puncture wound with foreign body, unspecified hip, sequela
S71.051S	Open bite, right hip, sequela
S71.052S	Open bite, left hip, sequela
S71.059S	Open bite, unspecified hip, sequela
S71.101S	Unspecified open wound, right thigh, sequela



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Code	Description
S71.102S	Unspecified open wound, left thigh, sequela
S71.109S	Unspecified open wound, unspecified thigh, sequela
S71.111S	Laceration without foreign body, right thigh, sequela
S71.112S	Laceration without foreign body, left thigh, sequela
S71.119S	Laceration without foreign body, unspecified thigh, sequela
S71.121S	Laceration with foreign body, right thigh, sequela
S71.122S	Laceration with foreign body, left thigh, sequela
S71.129S	Laceration with foreign body, unspecified thigh, sequela
S71.131S	Puncture wound without foreign body, right thigh, sequela
S71.132S	Puncture wound without foreign body, left thigh, sequela
S71.139S	Puncture wound without foreign body, unspecified thigh, sequela
S71.141S	Puncture wound with foreign body, right thigh, sequela
S71.142S	Puncture wound with foreign body, left thigh, sequela
S71.149S	Puncture wound with foreign body, unspecified thigh, sequela
S71.151S	Open bite, right thigh, sequela
S71.152S	Open bite, left thigh, sequela
S71.159S	Open bite, unspecified thigh, sequela
S72.001D	Fracture of unspecified part of neck of right femur, subsequent encounter for closed fracture with routine healing
S72.001E	Fracture of unspecified part of neck of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.001F	Fracture of unspecified part of neck of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.001G	Fracture of unspecified part of neck of right femur, subsequent encounter for closed fracture with delayed healing
S72.001H	Fracture of unspecified part of neck of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.001J	Fracture of unspecified part of neck of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.001S	Fracture of unspecified part of neck of right femur, sequela
S72.002D	Fracture of unspecified part of neck of left femur, subsequent encounter for closed fracture with routine healing



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Code	Description
S72.002E	Fracture of unspecified part of neck of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.002F	Fracture of unspecified part of neck of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.002G	Fracture of unspecified part of neck of left femur, subsequent encounter for closed fracture with delayed healing
S72.002H	Fracture of unspecified part of neck of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.002J	Fracture of unspecified part of neck of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.002S	Fracture of unspecified part of neck of left femur, sequela
S72.009D	Fracture of unspecified part of neck of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.009E	Fracture of unspecified part of neck of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.009F	Fracture of unspecified part of neck of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.009G	Fracture of unspecified part of neck of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.009H	Fracture of unspecified part of neck of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.009J	Fracture of unspecified part of neck of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.009S	Fracture of unspecified part of neck of unspecified femur, sequela
S72.011D	Unspecified intracapsular fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.011E	Unspecified intracapsular fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.011F	Unspecified intracapsular fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.011G	Unspecified intracapsular fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.011H	Unspecified intracapsular fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.011J	Unspecified intracapsular fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing

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Code	Description
S72.011S	Unspecified intracapsular fracture of right femur, sequela
S72.012D	Unspecified intracapsular fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.012E	Unspecified intracapsular fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.012F	Unspecified intracapsular fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.012G	Unspecified intracapsular fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.012H	Unspecified intracapsular fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.012J	Unspecified intracapsular fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.012S	Unspecified intracapsular fracture of left femur, sequela
S72.019D	Unspecified intracapsular fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.019E	Unspecified intracapsular fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.019F	Unspecified intracapsular fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.019G	Unspecified intracapsular fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.019H	Unspecified intracapsular fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.019J	Unspecified intracapsular fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.019S	Unspecified intracapsular fracture of unspecified femur, sequela
S72.021D	Displaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for closed fracture with routine healing
S72.021E	Displaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.021F	Displaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.021G	Displaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for closed fracture with delayed healing



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Code	Description
S72.021H	Displaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.021J	Displaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.021S	Displaced fracture of epiphysis (separation) (upper) of right femur, sequela
S72.022D	Displaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for closed fracture with routine healing
S72.022E	Displaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.022F	Displaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.022G	Displaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for closed fracture with delayed healing
S72.022H	Displaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.022J	Displaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.022S	Displaced fracture of epiphysis (separation) (upper) of left femur, sequela
S72.023D	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.023E	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.023F	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.023G	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.023H	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.023J	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.023S	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, sequela
S72.024D	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for closed fracture with routine healing
S72.024E	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S72.024F	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.024G	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for closed fracture with delayed healing
S72.024H	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.024J	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.024S	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, sequela
S72.025D	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for closed fracture with routine healing
S72.025E	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.025F	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.025G	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for closed fracture with delayed healing
S72.025H	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.025J	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.025S	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, sequela
S72.026D	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.026E	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.026F	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.026G	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.026H	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.026J	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.026S	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.031D	Displaced midcervical fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.031E	Displaced midcervical fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.031F	Displaced midcervical fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.031G	Displaced midcervical fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.031H	Displaced midcervical fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.031J	Displaced midcervical fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.031S	Displaced midcervical fracture of right femur, sequela
S72.032D	Displaced midcervical fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.032E	Displaced midcervical fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.032F	Displaced midcervical fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.032G	Displaced midcervical fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.032H	Displaced midcervical fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.032J	Displaced midcervical fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.032S	Displaced midcervical fracture of left femur, sequela
S72.033D	Displaced midcervical fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.033E	Displaced midcervical fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.033F	Displaced midcervical fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.033G	Displaced midcervical fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.033H	Displaced midcervical fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.033J	Displaced midcervical fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.033S	Displaced midcervical fracture of unspecified femur, sequela
S72.034D	Nondisplaced midcervical fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.034E	Nondisplaced midcervical fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.034F	Nondisplaced midcervical fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.034G	Nondisplaced midcervical fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.034H	Nondisplaced midcervical fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.034J	Nondisplaced midcervical fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.034S	Nondisplaced midcervical fracture of right femur, sequela
S72.035D	Nondisplaced midcervical fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.035E	Nondisplaced midcervical fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.035F	Nondisplaced midcervical fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.035G	Nondisplaced midcervical fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.035H	Nondisplaced midcervical fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.035J	Nondisplaced midcervical fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.035S	Nondisplaced midcervical fracture of left femur, sequela
S72.036D	Nondisplaced midcervical fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.036E	Nondisplaced midcervical fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.036F	Nondisplaced midcervical fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.036G	Nondisplaced midcervical fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.036H	Nondisplaced midcervical fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.036J	Nondisplaced midcervical fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.036S	Nondisplaced midcervical fracture of unspecified femur, sequela
S72.041D	Displaced fracture of base of neck of right femur, subsequent encounter for closed fracture with routine healing
S72.041E	Displaced fracture of base of neck of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.041F	Displaced fracture of base of neck of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.041G	Displaced fracture of base of neck of right femur, subsequent encounter for closed fracture with delayed healing
S72.041H	Displaced fracture of base of neck of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.041J	Displaced fracture of base of neck of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.041S	Displaced fracture of base of neck of right femur, sequela
S72.042D	Displaced fracture of base of neck of left femur, subsequent encounter for closed fracture with routine healing
S72.042E	Displaced fracture of base of neck of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.042F	Displaced fracture of base of neck of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.042G	Displaced fracture of base of neck of left femur, subsequent encounter for closed fracture with delayed healing
S72.042H	Displaced fracture of base of neck of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.042J	Displaced fracture of base of neck of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.042S	Displaced fracture of base of neck of left femur, sequela
S72.043D	Displaced fracture of base of neck of unspecified femur, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.043E	Displaced fracture of base of neck of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.043F	Displaced fracture of base of neck of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.043G	Displaced fracture of base of neck of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.043H	Displaced fracture of base of neck of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.043J	Displaced fracture of base of neck of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.043S	Displaced fracture of base of neck of unspecified femur, sequela
S72.044D	Nondisplaced fracture of base of neck of right femur, subsequent encounter for closed fracture with routine healing
S72.044E	Nondisplaced fracture of base of neck of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.044F	Nondisplaced fracture of base of neck of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.044G	Nondisplaced fracture of base of neck of right femur, subsequent encounter for closed fracture with delayed healing
S72.044H	Nondisplaced fracture of base of neck of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.044J	Nondisplaced fracture of base of neck of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.044S	Nondisplaced fracture of base of neck of right femur, sequela
S72.045D	Nondisplaced fracture of base of neck of left femur, subsequent encounter for closed fracture with routine healing
S72.045E	Nondisplaced fracture of base of neck of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.045F	Nondisplaced fracture of base of neck of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.045G	Nondisplaced fracture of base of neck of left femur, subsequent encounter for closed fracture with delayed healing
S72.045H	Nondisplaced fracture of base of neck of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.045J	Nondisplaced fracture of base of neck of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.045S	Nondisplaced fracture of base of neck of left femur, sequela
S72.046D	Nondisplaced fracture of base of neck of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.046E	Nondisplaced fracture of base of neck of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.046F	Nondisplaced fracture of base of neck of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.046G	Nondisplaced fracture of base of neck of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.046H	Nondisplaced fracture of base of neck of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.046J	Nondisplaced fracture of base of neck of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.046S	Nondisplaced fracture of base of neck of unspecified femur, sequela
S72.051D	Unspecified fracture of head of right femur, subsequent encounter for closed fracture with routine healing
S72.051E	Unspecified fracture of head of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.051F	Unspecified fracture of head of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.051G	Unspecified fracture of head of right femur, subsequent encounter for closed fracture with delayed healing
S72.051H	Unspecified fracture of head of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.051J	Unspecified fracture of head of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.051S	Unspecified fracture of head of right femur, sequela
S72.052D	Unspecified fracture of head of left femur, subsequent encounter for closed fracture with routine healing
S72.052E	Unspecified fracture of head of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.052F	Unspecified fracture of head of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.052G	Unspecified fracture of head of left femur, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.052H	Unspecified fracture of head of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.052J	Unspecified fracture of head of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.052S	Unspecified fracture of head of left femur, sequela
S72.059D	Unspecified fracture of head of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.059E	Unspecified fracture of head of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.059F	Unspecified fracture of head of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.059G	Unspecified fracture of head of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.059H	Unspecified fracture of head of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.059J	Unspecified fracture of head of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.059S	Unspecified fracture of head of unspecified femur, sequela
S72.061D	Displaced articular fracture of head of right femur, subsequent encounter for closed fracture with routine healing
S72.061E	Displaced articular fracture of head of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.061F	Displaced articular fracture of head of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.061G	Displaced articular fracture of head of right femur, subsequent encounter for closed fracture with delayed healing
S72.061H	Displaced articular fracture of head of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.061J	Displaced articular fracture of head of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.061S	Displaced articular fracture of head of right femur, sequela
S72.062D	Displaced articular fracture of head of left femur, subsequent encounter for closed fracture with routine healing
S72.062E	Displaced articular fracture of head of left femur, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.062F	Displaced articular fracture of head of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.062G	Displaced articular fracture of head of left femur, subsequent encounter for closed fracture with delayed healing
S72.062H	Displaced articular fracture of head of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.062J	Displaced articular fracture of head of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.062S	Displaced articular fracture of head of left femur, sequela
S72.063D	Displaced articular fracture of head of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.063E	Displaced articular fracture of head of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.063F	Displaced articular fracture of head of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.063G	Displaced articular fracture of head of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.063H	Displaced articular fracture of head of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.063J	Displaced articular fracture of head of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.063S	Displaced articular fracture of head of unspecified femur, sequela
S72.064D	Nondisplaced articular fracture of head of right femur, subsequent encounter for closed fracture with routine healing
S72.064E	Nondisplaced articular fracture of head of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.064F	Nondisplaced articular fracture of head of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.064G	Nondisplaced articular fracture of head of right femur, subsequent encounter for closed fracture with delayed healing
S72.064H	Nondisplaced articular fracture of head of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.064J	Nondisplaced articular fracture of head of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.064S	Nondisplaced articular fracture of head of right femur, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.065D	Nondisplaced articular fracture of head of left femur, subsequent encounter for closed fracture with routine healing
S72.065E	Nondisplaced articular fracture of head of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.065F	Nondisplaced articular fracture of head of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.065G	Nondisplaced articular fracture of head of left femur, subsequent encounter for closed fracture with delayed healing
S72.065H	Nondisplaced articular fracture of head of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.065J	Nondisplaced articular fracture of head of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.065S	Nondisplaced articular fracture of head of left femur, sequela
S72.066D	Nondisplaced articular fracture of head of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.066E	Nondisplaced articular fracture of head of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.066F	Nondisplaced articular fracture of head of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.066G	Nondisplaced articular fracture of head of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.066H	Nondisplaced articular fracture of head of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.066J	Nondisplaced articular fracture of head of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.066S	Nondisplaced articular fracture of head of unspecified femur, sequela
S72.091D	Other fracture of head and neck of right femur, subsequent encounter for closed fracture with routine healing
S72.091E	Other fracture of head and neck of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.091F	Other fracture of head and neck of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.091G	Other fracture of head and neck of right femur, subsequent encounter for closed fracture with delayed healing
S72.091H	Other fracture of head and neck of right femur, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.091J	Other fracture of head and neck of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.091S	Other fracture of head and neck of right femur, sequela
S72.092D	Other fracture of head and neck of left femur, subsequent encounter for closed fracture with routine healing
S72.092E	Other fracture of head and neck of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.092F	Other fracture of head and neck of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.092G	Other fracture of head and neck of left femur, subsequent encounter for closed fracture with delayed healing
S72.092H	Other fracture of head and neck of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.092J	Other fracture of head and neck of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.092S	Other fracture of head and neck of left femur, sequela
S72.099D	Other fracture of head and neck of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.099E	Other fracture of head and neck of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.099F	Other fracture of head and neck of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.099G	Other fracture of head and neck of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.099H	Other fracture of head and neck of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.099J	Other fracture of head and neck of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.099S	Other fracture of head and neck of unspecified femur, sequela
S72.101D	Unspecified trochanteric fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.101E	Unspecified trochanteric fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.101F	Unspecified trochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.101G	Unspecified trochanteric fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.101H	Unspecified trochanteric fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.101J	Unspecified trochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.101S	Unspecified trochanteric fracture of right femur, sequela
S72.102D	Unspecified trochanteric fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.102E	Unspecified trochanteric fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.102F	Unspecified trochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.102G	Unspecified trochanteric fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.102H	Unspecified trochanteric fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.102J	Unspecified trochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.102S	Unspecified trochanteric fracture of left femur, sequela
S72.109D	Unspecified trochanteric fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.109E	Unspecified trochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.109F	Unspecified trochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.109G	Unspecified trochanteric fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.109H	Unspecified trochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.109J	Unspecified trochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.109S	Unspecified trochanteric fracture of unspecified femur, sequela
S72.111D	Displaced fracture of greater trochanter of right femur, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.111E	Displaced fracture of greater trochanter of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.111F	Displaced fracture of greater trochanter of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.111G	Displaced fracture of greater trochanter of right femur, subsequent encounter for closed fracture with delayed healing
S72.111H	Displaced fracture of greater trochanter of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.111J	Displaced fracture of greater trochanter of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.111S	Displaced fracture of greater trochanter of right femur, sequela
S72.112D	Displaced fracture of greater trochanter of left femur, subsequent encounter for closed fracture with routine healing
S72.112E	Displaced fracture of greater trochanter of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.112F	Displaced fracture of greater trochanter of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.112G	Displaced fracture of greater trochanter of left femur, subsequent encounter for closed fracture with delayed healing
S72.112H	Displaced fracture of greater trochanter of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.112J	Displaced fracture of greater trochanter of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.112S	Displaced fracture of greater trochanter of left femur, sequela
S72.113D	Displaced fracture of greater trochanter of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.113E	Displaced fracture of greater trochanter of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.113F	Displaced fracture of greater trochanter of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.113G	Displaced fracture of greater trochanter of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.113H	Displaced fracture of greater trochanter of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.113J	Displaced fracture of greater trochanter of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.113S	Displaced fracture of greater trochanter of unspecified femur, sequela
S72.114D	Nondisplaced fracture of greater trochanter of right femur, subsequent encounter for closed fracture with routine healing
S72.114E	Nondisplaced fracture of greater trochanter of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.114F	Nondisplaced fracture of greater trochanter of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.114G	Nondisplaced fracture of greater trochanter of right femur, subsequent encounter for closed fracture with delayed healing
S72.114H	Nondisplaced fracture of greater trochanter of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.114J	Nondisplaced fracture of greater trochanter of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.114S	Nondisplaced fracture of greater trochanter of right femur, sequela
S72.115D	Nondisplaced fracture of greater trochanter of left femur, subsequent encounter for closed fracture with routine healing
S72.115E	Nondisplaced fracture of greater trochanter of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.115F	Nondisplaced fracture of greater trochanter of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.115G	Nondisplaced fracture of greater trochanter of left femur, subsequent encounter for closed fracture with delayed healing
S72.115H	Nondisplaced fracture of greater trochanter of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.115J	Nondisplaced fracture of greater trochanter of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.115S	Nondisplaced fracture of greater trochanter of left femur, sequela
S72.116D	Nondisplaced fracture of greater trochanter of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.116E	Nondisplaced fracture of greater trochanter of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.116F	Nondisplaced fracture of greater trochanter of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.116G	Nondisplaced fracture of greater trochanter of unspecified femur, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.116H	Nondisplaced fracture of greater trochanter of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.116J	Nondisplaced fracture of greater trochanter of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.116S	Nondisplaced fracture of greater trochanter of unspecified femur, sequela
S72.121D	Displaced fracture of lesser trochanter of right femur, subsequent encounter for closed fracture with routine healing
S72.121E	Displaced fracture of lesser trochanter of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.121F	Displaced fracture of lesser trochanter of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.121G	Displaced fracture of lesser trochanter of right femur, subsequent encounter for closed fracture with delayed healing
S72.121H	Displaced fracture of lesser trochanter of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.121J	Displaced fracture of lesser trochanter of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.121S	Displaced fracture of lesser trochanter of right femur, sequela
S72.122D	Displaced fracture of lesser trochanter of left femur, subsequent encounter for closed fracture with routine healing
S72.122E	Displaced fracture of lesser trochanter of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.122F	Displaced fracture of lesser trochanter of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.122G	Displaced fracture of lesser trochanter of left femur, subsequent encounter for closed fracture with delayed healing
S72.122H	Displaced fracture of lesser trochanter of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.122J	Displaced fracture of lesser trochanter of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.122S	Displaced fracture of lesser trochanter of left femur, sequela
S72.123D	Displaced fracture of lesser trochanter of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.123E	Displaced fracture of lesser trochanter of unspecified femur, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.123F	Displaced fracture of lesser trochanter of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.123G	Displaced fracture of lesser trochanter of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.123H	Displaced fracture of lesser trochanter of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.123J	Displaced fracture of lesser trochanter of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.123S	Displaced fracture of lesser trochanter of unspecified femur, sequela
S72.124D	Nondisplaced fracture of lesser trochanter of right femur, subsequent encounter for closed fracture with routine healing
S72.124E	Nondisplaced fracture of lesser trochanter of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.124F	Nondisplaced fracture of lesser trochanter of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.124G	Nondisplaced fracture of lesser trochanter of right femur, subsequent encounter for closed fracture with delayed healing
S72.124H	Nondisplaced fracture of lesser trochanter of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.124J	Nondisplaced fracture of lesser trochanter of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.124S	Nondisplaced fracture of lesser trochanter of right femur, sequela
S72.125D	Nondisplaced fracture of lesser trochanter of left femur, subsequent encounter for closed fracture with routine healing
S72.125E	Nondisplaced fracture of lesser trochanter of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.125F	Nondisplaced fracture of lesser trochanter of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.125G	Nondisplaced fracture of lesser trochanter of left femur, subsequent encounter for closed fracture with delayed healing
S72.125H	Nondisplaced fracture of lesser trochanter of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.125J	Nondisplaced fracture of lesser trochanter of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.125S	Nondisplaced fracture of lesser trochanter of left femur, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.126D	Nondisplaced fracture of lesser trochanter of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.126E	Nondisplaced fracture of lesser trochanter of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.126F	Nondisplaced fracture of lesser trochanter of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.126G	Nondisplaced fracture of lesser trochanter of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.126H	Nondisplaced fracture of lesser trochanter of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.126J	Nondisplaced fracture of lesser trochanter of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.126S	Nondisplaced fracture of lesser trochanter of unspecified femur, sequela
S72.131D	Displaced apophyseal fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.131E	Displaced apophyseal fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.131F	Displaced apophyseal fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.131G	Displaced apophyseal fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.131H	Displaced apophyseal fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.131J	Displaced apophyseal fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.131S	Displaced apophyseal fracture of right femur, sequela
S72.132D	Displaced apophyseal fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.132E	Displaced apophyseal fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.132F	Displaced apophyseal fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.132G	Displaced apophyseal fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.132H	Displaced apophyseal fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.132J	Displaced apophyseal fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.132S	Displaced apophyseal fracture of left femur, sequela
S72.133D	Displaced apophyseal fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.133E	Displaced apophyseal fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.133F	Displaced apophyseal fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.133G	Displaced apophyseal fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.133H	Displaced apophyseal fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.133J	Displaced apophyseal fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.133S	Displaced apophyseal fracture of unspecified femur, sequela
S72.134D	Nondisplaced apophyseal fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.134E	Nondisplaced apophyseal fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.134F	Nondisplaced apophyseal fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.134G	Nondisplaced apophyseal fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.134H	Nondisplaced apophyseal fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.134J	Nondisplaced apophyseal fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.134S	Nondisplaced apophyseal fracture of right femur, sequela
S72.135D	Nondisplaced apophyseal fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.135E	Nondisplaced apophyseal fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.135F	Nondisplaced apophyseal fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.135G	Nondisplaced apophyseal fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.135H	Nondisplaced apophyseal fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.135J	Nondisplaced apophyseal fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.135S	Nondisplaced apophyseal fracture of left femur, sequela
S72.136D	Nondisplaced apophyseal fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.136E	Nondisplaced apophyseal fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.136F	Nondisplaced apophyseal fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.136G	Nondisplaced apophyseal fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.136H	Nondisplaced apophyseal fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.136J	Nondisplaced apophyseal fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.136S	Nondisplaced apophyseal fracture of unspecified femur, sequela
S72.141D	Displaced intertrochanteric fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.141E	Displaced intertrochanteric fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.141F	Displaced intertrochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.141G	Displaced intertrochanteric fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.141H	Displaced intertrochanteric fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.141J	Displaced intertrochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.141S	Displaced intertrochanteric fracture of right femur, sequela
S72.142D	Displaced intertrochanteric fracture of left femur, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.142E	Displaced intertrochanteric fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.142F	Displaced intertrochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.142G	Displaced intertrochanteric fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.142H	Displaced intertrochanteric fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.142J	Displaced intertrochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.142S	Displaced intertrochanteric fracture of left femur, sequela
S72.143D	Displaced intertrochanteric fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.143E	Displaced intertrochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.143F	Displaced intertrochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.143G	Displaced intertrochanteric fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.143H	Displaced intertrochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.143J	Displaced intertrochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.143S	Displaced intertrochanteric fracture of unspecified femur, sequela
S72.144D	Nondisplaced intertrochanteric fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.144E	Nondisplaced intertrochanteric fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.144F	Nondisplaced intertrochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.144G	Nondisplaced intertrochanteric fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.144H	Nondisplaced intertrochanteric fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.144J	Nondisplaced intertrochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.144S	Nondisplaced intertrochanteric fracture of right femur, sequela
S72.145D	Nondisplaced intertrochanteric fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.145E	Nondisplaced intertrochanteric fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.145F	Nondisplaced intertrochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.145G	Nondisplaced intertrochanteric fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.145H	Nondisplaced intertrochanteric fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.145J	Nondisplaced intertrochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.145S	Nondisplaced intertrochanteric fracture of left femur, sequela
S72.146D	Nondisplaced intertrochanteric fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.146E	Nondisplaced intertrochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.146F	Nondisplaced intertrochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.146G	Nondisplaced intertrochanteric fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.146H	Nondisplaced intertrochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.146J	Nondisplaced intertrochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.146S	Nondisplaced intertrochanteric fracture of unspecified femur, sequela
S72.21XD	Displaced subtrochanteric fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.21XE	Displaced subtrochanteric fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.21XF	Displaced subtrochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.21XG	Displaced subtrochanteric fracture of right femur, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.21XH	Displaced subtrochanteric fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.21XJ	Displaced subtrochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.21XS	Displaced subtrochanteric fracture of right femur, sequela
S72.22XD	Displaced subtrochanteric fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.22XE	Displaced subtrochanteric fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.22XF	Displaced subtrochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.22XG	Displaced subtrochanteric fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.22XH	Displaced subtrochanteric fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.22XJ	Displaced subtrochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.22XS	Displaced subtrochanteric fracture of left femur, sequela
S72.23XD	Displaced subtrochanteric fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.23XE	Displaced subtrochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.23XF	Displaced subtrochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.23XG	Displaced subtrochanteric fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.23XH	Displaced subtrochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.23XJ	Displaced subtrochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.23XS	Displaced subtrochanteric fracture of unspecified femur, sequela
S72.24XD	Nondisplaced subtrochanteric fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.24XE	Nondisplaced subtrochanteric fracture of right femur, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.24XF	Nondisplaced subtrochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.24XG	Nondisplaced subtrochanteric fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.24XH	Nondisplaced subtrochanteric fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.24XJ	Nondisplaced subtrochanteric fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.24XS	Nondisplaced subtrochanteric fracture of right femur, sequela
S72.25XD	Nondisplaced subtrochanteric fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.25XE	Nondisplaced subtrochanteric fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.25XF	Nondisplaced subtrochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.25XG	Nondisplaced subtrochanteric fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.25XH	Nondisplaced subtrochanteric fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.25XJ	Nondisplaced subtrochanteric fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.25XS	Nondisplaced subtrochanteric fracture of left femur, sequela
S72.26XD	Nondisplaced subtrochanteric fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.26XE	Nondisplaced subtrochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.26XF	Nondisplaced subtrochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.26XG	Nondisplaced subtrochanteric fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.26XH	Nondisplaced subtrochanteric fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.26XJ	Nondisplaced subtrochanteric fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.26XS	Nondisplaced subtrochanteric fracture of unspecified femur, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.301D	Unspecified fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.301E	Unspecified fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.301F	Unspecified fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.301G	Unspecified fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.301H	Unspecified fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.301J	Unspecified fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.301S	Unspecified fracture of shaft of right femur, sequela
S72.302D	Unspecified fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.302E	Unspecified fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.302F	Unspecified fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.302G	Unspecified fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.302H	Unspecified fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.302J	Unspecified fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.302S	Unspecified fracture of shaft of left femur, sequela
S72.309D	Unspecified fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.309E	Unspecified fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.309F	Unspecified fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.309G	Unspecified fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.309H	Unspecified fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.309J	Unspecified fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.309S	Unspecified fracture of shaft of unspecified femur, sequela
S72.321D	Displaced transverse fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.321E	Displaced transverse fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.321F	Displaced transverse fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.321G	Displaced transverse fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.321H	Displaced transverse fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.321J	Displaced transverse fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.321S	Displaced transverse fracture of shaft of right femur, sequela
S72.322D	Displaced transverse fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.322E	Displaced transverse fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.322F	Displaced transverse fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.322G	Displaced transverse fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.322H	Displaced transverse fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.322J	Displaced transverse fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.322S	Displaced transverse fracture of shaft of left femur, sequela
S72.323D	Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.323E	Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.323F	Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S72.323G	Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.323H	Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.323J	Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.323S	Displaced transverse fracture of shaft of unspecified femur, sequela
S72.324D	Nondisplaced transverse fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.324E	Nondisplaced transverse fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.324F	Nondisplaced transverse fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.324G	Nondisplaced transverse fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.324H	Nondisplaced transverse fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.324J	Nondisplaced transverse fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.324S	Nondisplaced transverse fracture of shaft of right femur, sequela
S72.325D	Nondisplaced transverse fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.325E	Nondisplaced transverse fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.325F	Nondisplaced transverse fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.325G	Nondisplaced transverse fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.325H	Nondisplaced transverse fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.325J	Nondisplaced transverse fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.325S	Nondisplaced transverse fracture of shaft of left femur, sequela
S72.326D	Nondisplaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.326E	Nondisplaced transverse fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.326F	Nondisplaced transverse fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.326G	Nondisplaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.326H	Nondisplaced transverse fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.326J	Nondisplaced transverse fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.326S	Nondisplaced transverse fracture of shaft of unspecified femur, sequela
S72.331D	Displaced oblique fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.331E	Displaced oblique fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.331F	Displaced oblique fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.331G	Displaced oblique fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.331H	Displaced oblique fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.331J	Displaced oblique fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.331S	Displaced oblique fracture of shaft of right femur, sequela
S72.332D	Displaced oblique fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.332E	Displaced oblique fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.332F	Displaced oblique fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.332G	Displaced oblique fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.332H	Displaced oblique fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.332J	Displaced oblique fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.332S	Displaced oblique fracture of shaft of left femur, sequela
S72.333D	Displaced oblique fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.333E	Displaced oblique fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.333F	Displaced oblique fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.333G	Displaced oblique fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.333H	Displaced oblique fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.333J	Displaced oblique fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.333S	Displaced oblique fracture of shaft of unspecified femur, sequela
S72.334D	Nondisplaced oblique fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.334E	Nondisplaced oblique fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.334F	Nondisplaced oblique fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.334G	Nondisplaced oblique fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.334H	Nondisplaced oblique fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.334J	Nondisplaced oblique fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.334S	Nondisplaced oblique fracture of shaft of right femur, sequela
S72.335D	Nondisplaced oblique fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.335E	Nondisplaced oblique fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.335F	Nondisplaced oblique fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.335G	Nondisplaced oblique fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing



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Code	Description
S72.335H	Nondisplaced oblique fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.335J	Nondisplaced oblique fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.335S	Nondisplaced oblique fracture of shaft of left femur, sequela
S72.336D	Nondisplaced oblique fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.336E	Nondisplaced oblique fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.336F	Nondisplaced oblique fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.336G	Nondisplaced oblique fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.336H	Nondisplaced oblique fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.336J	Nondisplaced oblique fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.336S	Nondisplaced oblique fracture of shaft of unspecified femur, sequela
S72.341D	Displaced spiral fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.341E	Displaced spiral fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.341F	Displaced spiral fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.341G	Displaced spiral fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.341H	Displaced spiral fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.341J	Displaced spiral fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.341S	Displaced spiral fracture of shaft of right femur, sequela
S72.342D	Displaced spiral fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.342E	Displaced spiral fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S72.342F	Displaced spiral fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.342G	Displaced spiral fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.342H	Displaced spiral fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.342J	Displaced spiral fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.342S	Displaced spiral fracture of shaft of left femur, sequela
S72.343D	Displaced spiral fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.343E	Displaced spiral fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.343F	Displaced spiral fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.343G	Displaced spiral fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.343H	Displaced spiral fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.343J	Displaced spiral fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.343S	Displaced spiral fracture of shaft of unspecified femur, sequela
S72.344D	Nondisplaced spiral fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.344E	Nondisplaced spiral fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.344F	Nondisplaced spiral fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.344G	Nondisplaced spiral fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.344H	Nondisplaced spiral fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.344J	Nondisplaced spiral fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.344S	Nondisplaced spiral fracture of shaft of right femur, sequela



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Code	Description
S72.345D	Nondisplaced spiral fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.345E	Nondisplaced spiral fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.345F	Nondisplaced spiral fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.345G	Nondisplaced spiral fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.345H	Nondisplaced spiral fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.345J	Nondisplaced spiral fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.345S	Nondisplaced spiral fracture of shaft of left femur, sequela
S72.346D	Nondisplaced spiral fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.346E	Nondisplaced spiral fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.346F	Nondisplaced spiral fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.346G	Nondisplaced spiral fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.346H	Nondisplaced spiral fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.346J	Nondisplaced spiral fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.346S	Nondisplaced spiral fracture of shaft of unspecified femur, sequela
S72.351D	Displaced comminuted fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.351E	Displaced comminuted fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.351F	Displaced comminuted fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.351G	Displaced comminuted fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.351H	Displaced comminuted fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing

NCD 190.15

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S72.351J	Displaced comminuted fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.351S	Displaced comminuted fracture of shaft of right femur, sequela
S72.352D	Displaced comminuted fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.352E	Displaced comminuted fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.352F	Displaced comminuted fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.352G	Displaced comminuted fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.352H	Displaced comminuted fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.352J	Displaced comminuted fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.352S	Displaced comminuted fracture of shaft of left femur, sequela
S72.353D	Displaced comminuted fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.353E	Displaced comminuted fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.353F	Displaced comminuted fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.353G	Displaced comminuted fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.353H	Displaced comminuted fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.353J	Displaced comminuted fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.353S	Displaced comminuted fracture of shaft of unspecified femur, sequela
S72.354D	Nondisplaced comminuted fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.354E	Nondisplaced comminuted fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.354F	Nondisplaced comminuted fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



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Code	Description
S72.354G	Nondisplaced comminuted fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.354H	Nondisplaced comminuted fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.354J	Nondisplaced comminuted fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.354S	Nondisplaced comminuted fracture of shaft of right femur, sequela
S72.355D	Nondisplaced comminuted fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.355E	Nondisplaced comminuted fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.355F	Nondisplaced comminuted fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.355G	Nondisplaced comminuted fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.355H	Nondisplaced comminuted fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.355J	Nondisplaced comminuted fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.355S	Nondisplaced comminuted fracture of shaft of left femur, sequela
S72.356D	Nondisplaced comminuted fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.356E	Nondisplaced comminuted fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.356F	Nondisplaced comminuted fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.356G	Nondisplaced comminuted fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.356H	Nondisplaced comminuted fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.356J	Nondisplaced comminuted fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.356S	Nondisplaced comminuted fracture of shaft of unspecified femur, sequela
S72.361D	Displaced segmental fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing



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Code	Description
S72.361E	Displaced segmental fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.361F	Displaced segmental fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.361G	Displaced segmental fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.361H	Displaced segmental fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.361J	Displaced segmental fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.361S	Displaced segmental fracture of shaft of right femur, sequela
S72.362D	Displaced segmental fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.362E	Displaced segmental fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.362F	Displaced segmental fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.362G	Displaced segmental fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.362H	Displaced segmental fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.362J	Displaced segmental fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.362S	Displaced segmental fracture of shaft of left femur, sequela
S72.363D	Displaced segmental fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.363E	Displaced segmental fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.363F	Displaced segmental fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.363G	Displaced segmental fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.363H	Displaced segmental fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.363J	Displaced segmental fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



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Code	Description
S72.363S	Displaced segmental fracture of shaft of unspecified femur, sequela
S72.364D	Nondisplaced segmental fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.364E	Nondisplaced segmental fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.364F	Nondisplaced segmental fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.364G	Nondisplaced segmental fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.364H	Nondisplaced segmental fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.364J	Nondisplaced segmental fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.364S	Nondisplaced segmental fracture of shaft of right femur, sequela
S72.365D	Nondisplaced segmental fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.365E	Nondisplaced segmental fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.365F	Nondisplaced segmental fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.365G	Nondisplaced segmental fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.365H	Nondisplaced segmental fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.365J	Nondisplaced segmental fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.365S	Nondisplaced segmental fracture of shaft of left femur, sequela
S72.366D	Nondisplaced segmental fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.366E	Nondisplaced segmental fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.366F	Nondisplaced segmental fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.366G	Nondisplaced segmental fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing



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Code	Description
S72.366H	Nondisplaced segmental fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.366J	Nondisplaced segmental fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.366S	Nondisplaced segmental fracture of shaft of unspecified femur, sequela
S72.391D	Other fracture of shaft of right femur, subsequent encounter for closed fracture with routine healing
S72.391E	Other fracture of shaft of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.391F	Other fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.391G	Other fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing
S72.391H	Other fracture of shaft of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.391J	Other fracture of shaft of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.391S	Other fracture of shaft of right femur, sequela
S72.392D	Other fracture of shaft of left femur, subsequent encounter for closed fracture with routine healing
S72.392E	Other fracture of shaft of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.392F	Other fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.392G	Other fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing
S72.392H	Other fracture of shaft of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.392J	Other fracture of shaft of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.392S	Other fracture of shaft of left femur, sequela
S72.399D	Other fracture of shaft of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.399E	Other fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S72.399F	Other fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.399G	Other fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.399H	Other fracture of shaft of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.399J	Other fracture of shaft of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.399S	Other fracture of shaft of unspecified femur, sequela
S72.401D	Unspecified fracture of lower end of right femur, subsequent encounter for closed fracture with routine healing
S72.401E	Unspecified fracture of lower end of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.401F	Unspecified fracture of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.401G	Unspecified fracture of lower end of right femur, subsequent encounter for closed fracture with delayed healing
S72.401H	Unspecified fracture of lower end of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.401J	Unspecified fracture of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.401S	Unspecified fracture of lower end of right femur, sequela
S72.402D	Unspecified fracture of lower end of left femur, subsequent encounter for closed fracture with routine healing
S72.402E	Unspecified fracture of lower end of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.402F	Unspecified fracture of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.402G	Unspecified fracture of lower end of left femur, subsequent encounter for closed fracture with delayed healing
S72.402H	Unspecified fracture of lower end of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.402J	Unspecified fracture of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.402S	Unspecified fracture of lower end of left femur, sequela



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Code	Description
S72.409D	Unspecified fracture of lower end of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.409E	Unspecified fracture of lower end of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.409F	Unspecified fracture of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.409G	Unspecified fracture of lower end of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.409H	Unspecified fracture of lower end of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.409J	Unspecified fracture of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.409S	Unspecified fracture of lower end of unspecified femur, sequela
S72.411D	Displaced unspecified condyle fracture of lower end of right femur, subsequent encounter for closed fracture with routine healing
S72.411E	Displaced unspecified condyle fracture of lower end of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.411F	Displaced unspecified condyle fracture of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.411G	Displaced unspecified condyle fracture of lower end of right femur, subsequent encounter for closed fracture with delayed healing
S72.411H	Displaced unspecified condyle fracture of lower end of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.411J	Displaced unspecified condyle fracture of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.411S	Displaced unspecified condyle fracture of lower end of right femur, sequela
S72.412D	Displaced unspecified condyle fracture of lower end of left femur, subsequent encounter for closed fracture with routine healing
S72.412E	Displaced unspecified condyle fracture of lower end of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.412F	Displaced unspecified condyle fracture of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.412G	Displaced unspecified condyle fracture of lower end of left femur, subsequent encounter for closed fracture with delayed healing
S72.412H	Displaced unspecified condyle fracture of lower end of left femur, subsequent encounter for open fracture type I or II with delayed healing

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Code	Description
S72.412J	Displaced unspecified condyle fracture of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.412S	Displaced unspecified condyle fracture of lower end of left femur, sequela
S72.413D	Displaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.413E	Displaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.413F	Displaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.413G	Displaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.413H	Displaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.413J	Displaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.413S	Displaced unspecified condyle fracture of lower end of unspecified femur, sequela
S72.414D	Nondisplaced unspecified condyle fracture of lower end of right femur, subsequent encounter for closed fracture with routine healing
S72.414E	Nondisplaced unspecified condyle fracture of lower end of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.414F	Nondisplaced unspecified condyle fracture of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.414G	Nondisplaced unspecified condyle fracture of lower end of right femur, subsequent encounter for closed fracture with delayed healing
S72.414H	Nondisplaced unspecified condyle fracture of lower end of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.414J	Nondisplaced unspecified condyle fracture of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.414S	Nondisplaced unspecified condyle fracture of lower end of right femur, sequela
S72.415D	Nondisplaced unspecified condyle fracture of lower end of left femur, subsequent encounter for closed fracture with routine healing
S72.415E	Nondisplaced unspecified condyle fracture of lower end of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.415F	Nondisplaced unspecified condyle fracture of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



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Code	Description
S72.415G	Nondisplaced unspecified condyle fracture of lower end of left femur, subsequent encounter for closed fracture with delayed healing
S72.415H	Nondisplaced unspecified condyle fracture of lower end of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.415J	Nondisplaced unspecified condyle fracture of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.415S	Nondisplaced unspecified condyle fracture of lower end of left femur, sequela
S72.416D	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.416E	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.416F	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.416G	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.416H	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.416J	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.416S	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, sequela
S72.421D	Displaced fracture of lateral condyle of right femur, subsequent encounter for closed fracture with routine healing
S72.421E	Displaced fracture of lateral condyle of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.421F	Displaced fracture of lateral condyle of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.421G	Displaced fracture of lateral condyle of right femur, subsequent encounter for closed fracture with delayed healing
S72.421H	Displaced fracture of lateral condyle of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.421J	Displaced fracture of lateral condyle of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.421S	Displaced fracture of lateral condyle of right femur, sequela
S72.422D	Displaced fracture of lateral condyle of left femur, subsequent encounter for closed fracture with routine healing



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Code	Description
S72.422E	Displaced fracture of lateral condyle of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.422F	Displaced fracture of lateral condyle of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.422G	Displaced fracture of lateral condyle of left femur, subsequent encounter for closed fracture with delayed healing
S72.422H	Displaced fracture of lateral condyle of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.422J	Displaced fracture of lateral condyle of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.422S	Displaced fracture of lateral condyle of left femur, sequela
S72.423D	Displaced fracture of lateral condyle of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.423E	Displaced fracture of lateral condyle of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.423F	Displaced fracture of lateral condyle of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.423G	Displaced fracture of lateral condyle of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.423H	Displaced fracture of lateral condyle of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.423J	Displaced fracture of lateral condyle of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.423S	Displaced fracture of lateral condyle of unspecified femur, sequela
S72.424D	Nondisplaced fracture of lateral condyle of right femur, subsequent encounter for closed fracture with routine healing
S72.424E	Nondisplaced fracture of lateral condyle of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.424F	Nondisplaced fracture of lateral condyle of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.424G	Nondisplaced fracture of lateral condyle of right femur, subsequent encounter for closed fracture with delayed healing
S72.424H	Nondisplaced fracture of lateral condyle of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.424J	Nondisplaced fracture of lateral condyle of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing

NCD 190.15

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ICD-10-CM Version – Red**

Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S72.424S	Nondisplaced fracture of lateral condyle of right femur, sequela
S72.425D	Nondisplaced fracture of lateral condyle of left femur, subsequent encounter for closed fracture with routine healing
S72.425E	Nondisplaced fracture of lateral condyle of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.425F	Nondisplaced fracture of lateral condyle of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.425G	Nondisplaced fracture of lateral condyle of left femur, subsequent encounter for closed fracture with delayed healing
S72.425H	Nondisplaced fracture of lateral condyle of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.425J	Nondisplaced fracture of lateral condyle of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.425S	Nondisplaced fracture of lateral condyle of left femur, sequela
S72.426D	Nondisplaced fracture of lateral condyle of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.426E	Nondisplaced fracture of lateral condyle of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.426F	Nondisplaced fracture of lateral condyle of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.426G	Nondisplaced fracture of lateral condyle of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.426H	Nondisplaced fracture of lateral condyle of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.426J	Nondisplaced fracture of lateral condyle of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.426S	Nondisplaced fracture of lateral condyle of unspecified femur, sequela
S72.431D	Displaced fracture of medial condyle of right femur, subsequent encounter for closed fracture with routine healing
S72.431E	Displaced fracture of medial condyle of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.431F	Displaced fracture of medial condyle of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.431G	Displaced fracture of medial condyle of right femur, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S72.431H	Displaced fracture of medial condyle of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.431J	Displaced fracture of medial condyle of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.431S	Displaced fracture of medial condyle of right femur, sequela
S72.432D	Displaced fracture of medial condyle of left femur, subsequent encounter for closed fracture with routine healing
S72.432E	Displaced fracture of medial condyle of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.432F	Displaced fracture of medial condyle of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.432G	Displaced fracture of medial condyle of left femur, subsequent encounter for closed fracture with delayed healing
S72.432H	Displaced fracture of medial condyle of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.432J	Displaced fracture of medial condyle of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.432S	Displaced fracture of medial condyle of left femur, sequela
S72.433D	Displaced fracture of medial condyle of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.433E	Displaced fracture of medial condyle of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.433F	Displaced fracture of medial condyle of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.433G	Displaced fracture of medial condyle of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.433H	Displaced fracture of medial condyle of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.433J	Displaced fracture of medial condyle of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.433S	Displaced fracture of medial condyle of unspecified femur, sequela
S72.434D	Nondisplaced fracture of medial condyle of right femur, subsequent encounter for closed fracture with routine healing
S72.434E	Nondisplaced fracture of medial condyle of right femur, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S72.434F	Nondisplaced fracture of medial condyle of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.434G	Nondisplaced fracture of medial condyle of right femur, subsequent encounter for closed fracture with delayed healing
S72.434H	Nondisplaced fracture of medial condyle of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.434J	Nondisplaced fracture of medial condyle of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.434S	Nondisplaced fracture of medial condyle of right femur, sequela
S72.435D	Nondisplaced fracture of medial condyle of left femur, subsequent encounter for closed fracture with routine healing
S72.435E	Nondisplaced fracture of medial condyle of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.435F	Nondisplaced fracture of medial condyle of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.435G	Nondisplaced fracture of medial condyle of left femur, subsequent encounter for closed fracture with delayed healing
S72.435H	Nondisplaced fracture of medial condyle of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.435J	Nondisplaced fracture of medial condyle of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.435S	Nondisplaced fracture of medial condyle of left femur, sequela
S72.436D	Nondisplaced fracture of medial condyle of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.436E	Nondisplaced fracture of medial condyle of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.436F	Nondisplaced fracture of medial condyle of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.436G	Nondisplaced fracture of medial condyle of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.436H	Nondisplaced fracture of medial condyle of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.436J	Nondisplaced fracture of medial condyle of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.436S	Nondisplaced fracture of medial condyle of unspecified femur, sequela



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Code	Description
S72.441D	Displaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for closed fracture with routine healing
S72.441E	Displaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.441F	Displaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.441G	Displaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for closed fracture with delayed healing
S72.441H	Displaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.441J	Displaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.441S	Displaced fracture of lower epiphysis (separation) of right femur, sequela
S72.442D	Displaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for closed fracture with routine healing
S72.442E	Displaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.442F	Displaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.442G	Displaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for closed fracture with delayed healing
S72.442H	Displaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.442J	Displaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.442S	Displaced fracture of lower epiphysis (separation) of left femur, sequela
S72.443D	Displaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.443E	Displaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.443F	Displaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.443G	Displaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.443H	Displaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing



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Code	Description
S72.443J	Displaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.443S	Displaced fracture of lower epiphysis (separation) of unspecified femur, sequela
S72.444D	Nondisplaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for closed fracture with routine healing
S72.444E	Nondisplaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.444F	Nondisplaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.444G	Nondisplaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for closed fracture with delayed healing
S72.444H	Nondisplaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.444J	Nondisplaced fracture of lower epiphysis (separation) of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.444S	Nondisplaced fracture of lower epiphysis (separation) of right femur, sequela
S72.445D	Nondisplaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for closed fracture with routine healing
S72.445E	Nondisplaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.445F	Nondisplaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.445G	Nondisplaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for closed fracture with delayed healing
S72.445H	Nondisplaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.445J	Nondisplaced fracture of lower epiphysis (separation) of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.445S	Nondisplaced fracture of lower epiphysis (separation) of left femur, sequela
S72.446D	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.446E	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.446F	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



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Code	Description
S72.446G	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.446H	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.446J	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.446S	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, sequela
S72.451D	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for closed fracture with routine healing
S72.451E	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.451F	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.451G	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for closed fracture with delayed healing
S72.451H	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.451J	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.451S	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, sequela
S72.452D	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for closed fracture with routine healing
S72.452E	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.452F	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.452G	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for closed fracture with delayed healing
S72.452H	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.452J	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.452S	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, sequela



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Code	Description
S72.453D	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.453E	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.453F	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.453G	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.453H	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.453J	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.453S	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, sequela
S72.454D	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for closed fracture with routine healing
S72.454E	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.454F	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.454G	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for closed fracture with delayed healing
S72.454H	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.454J	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.454S	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, sequela
S72.455D	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for closed fracture with routine healing
S72.455E	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.455F	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



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Code	Description
S72.455G	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for closed fracture with delayed healing
S72.455H	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.455J	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.455S	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, sequela
S72.456D	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.456E	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.456F	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.456G	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.456H	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.456J	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.456S	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, sequela
S72.461D	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for closed fracture with routine healing
S72.461E	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.461F	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.461G	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for closed fracture with delayed healing
S72.461H	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.461J	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



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Code	Description
S72.461S	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, sequela
S72.462D	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for closed fracture with routine healing
S72.462E	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.462F	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.462G	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for closed fracture with delayed healing
S72.462H	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.462J	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.462S	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, sequela
S72.463D	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.463E	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.463F	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.463G	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.463H	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.463J	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.463S	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, sequela
S72.464D	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for closed fracture with routine healing
S72.464E	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.464F	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing

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Code	Description
S72.464G	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for closed fracture with delayed healing
S72.464H	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.464J	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.464S	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, sequela
S72.465D	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for closed fracture with routine healing
S72.465E	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.465F	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.465G	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for closed fracture with delayed healing
S72.465H	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.465J	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.465S	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, sequela
S72.466D	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.466E	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.466F	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.466G	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.466H	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.466J	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



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Code	Description
S72.466S	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, sequela
S72.471D	Torus fracture of lower end of right femur, subsequent encounter for fracture with routine healing
S72.471G	Torus fracture of lower end of right femur, subsequent encounter for fracture with delayed healing
S72.471S	Torus fracture of lower end of right femur, sequela
S72.472D	Torus fracture of lower end of left femur, subsequent encounter for fracture with routine healing
S72.472G	Torus fracture of lower end of left femur, subsequent encounter for fracture with delayed healing
S72.472S	Torus fracture of lower end of left femur, sequela
S72.479D	Torus fracture of lower end of unspecified femur, subsequent encounter for fracture with routine healing
S72.479G	Torus fracture of lower end of unspecified femur, subsequent encounter for fracture with delayed healing
S72.479S	Torus fracture of lower end of unspecified femur, sequela
S72.491D	Other fracture of lower end of right femur, subsequent encounter for closed fracture with routine healing
S72.491E	Other fracture of lower end of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.491F	Other fracture of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.491G	Other fracture of lower end of right femur, subsequent encounter for closed fracture with delayed healing
S72.491H	Other fracture of lower end of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.491J	Other fracture of lower end of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.491S	Other fracture of lower end of right femur, sequela
S72.492D	Other fracture of lower end of left femur, subsequent encounter for closed fracture with routine healing
S72.492E	Other fracture of lower end of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.492F	Other fracture of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing

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Code	Description
S72.492G	Other fracture of lower end of left femur, subsequent encounter for closed fracture with delayed healing
S72.492H	Other fracture of lower end of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.492J	Other fracture of lower end of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.492S	Other fracture of lower end of left femur, sequela
S72.499D	Other fracture of lower end of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.499E	Other fracture of lower end of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.499F	Other fracture of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.499G	Other fracture of lower end of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.499H	Other fracture of lower end of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.499J	Other fracture of lower end of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.499S	Other fracture of lower end of unspecified femur, sequela
S72.8X1D	Other fracture of right femur, subsequent encounter for closed fracture with routine healing
S72.8X1E	Other fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.8X1F	Other fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.8X1G	Other fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.8X1H	Other fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.8X1J	Other fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.8X1S	Other fracture of right femur, sequela
S72.8X2D	Other fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.8X2E	Other fracture of left femur, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S72.8X2F	Other fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.8X2G	Other fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.8X2H	Other fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.8X2J	Other fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.8X2S	Other fracture of left femur, sequela
S72.8X9D	Other fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.8X9E	Other fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.8X9F	Other fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.8X9G	Other fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.8X9H	Other fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.8X9J	Other fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.8X9S	Other fracture of unspecified femur, sequela
S72.90XD	Unspecified fracture of unspecified femur, subsequent encounter for closed fracture with routine healing
S72.90XE	Unspecified fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.90XF	Unspecified fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.90XG	Unspecified fracture of unspecified femur, subsequent encounter for closed fracture with delayed healing
S72.90XH	Unspecified fracture of unspecified femur, subsequent encounter for open fracture type I or II with delayed healing
S72.90XJ	Unspecified fracture of unspecified femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.90XS	Unspecified fracture of unspecified femur, sequela
S72.91XD	Unspecified fracture of right femur, subsequent encounter for closed fracture with routine healing

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Code	Description
S72.91XE	Unspecified fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.91XF	Unspecified fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.91XG	Unspecified fracture of right femur, subsequent encounter for closed fracture with delayed healing
S72.91XH	Unspecified fracture of right femur, subsequent encounter for open fracture type I or II with delayed healing
S72.91XJ	Unspecified fracture of right femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.91XS	Unspecified fracture of right femur, sequela
S72.92XD	Unspecified fracture of left femur, subsequent encounter for closed fracture with routine healing
S72.92XE	Unspecified fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S72.92XF	Unspecified fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S72.92XG	Unspecified fracture of left femur, subsequent encounter for closed fracture with delayed healing
S72.92XH	Unspecified fracture of left femur, subsequent encounter for open fracture type I or II with delayed healing
S72.92XJ	Unspecified fracture of left femur, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S72.92XS	Unspecified fracture of left femur, sequela
S73.001A	Unspecified subluxation of right hip, initial encounter
S73.001S	Unspecified subluxation of right hip, sequela
S73.002A	Unspecified subluxation of left hip, initial encounter
S73.002S	Unspecified subluxation of left hip, sequela
S73.003A	Unspecified subluxation of unspecified hip, initial encounter
S73.003S	Unspecified subluxation of unspecified hip, sequela
S73.004A	Unspecified dislocation of right hip, initial encounter
S73.004S	Unspecified dislocation of right hip, sequela
S73.005A	Unspecified dislocation of left hip, initial encounter
S73.005S	Unspecified dislocation of left hip, sequela

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Code	Description
S73.006A	Unspecified dislocation of unspecified hip, initial encounter
S73.006S	Unspecified dislocation of unspecified hip, sequela
S73.011A	Posterior subluxation of right hip, initial encounter
S73.011S	Posterior subluxation of right hip, sequela
S73.012A	Posterior subluxation of left hip, initial encounter
S73.012S	Posterior subluxation of left hip, sequela
S73.013A	Posterior subluxation of unspecified hip, initial encounter
S73.013S	Posterior subluxation of unspecified hip, sequela
S73.014A	Posterior dislocation of right hip, initial encounter
S73.014S	Posterior dislocation of right hip, sequela
S73.015A	Posterior dislocation of left hip, initial encounter
S73.015S	Posterior dislocation of left hip, sequela
S73.016A	Posterior dislocation of unspecified hip, initial encounter
S73.016S	Posterior dislocation of unspecified hip, sequela
S73.021A	Obturator subluxation of right hip, initial encounter
S73.021S	Obturator subluxation of right hip, sequela
S73.022A	Obturator subluxation of left hip, initial encounter
S73.022S	Obturator subluxation of left hip, sequela
S73.023A	Obturator subluxation of unspecified hip, initial encounter
S73.023S	Obturator subluxation of unspecified hip, sequela
S73.024A	Obturator dislocation of right hip, initial encounter
S73.024S	Obturator dislocation of right hip, sequela
S73.025A	Obturator dislocation of left hip, initial encounter
S73.025S	Obturator dislocation of left hip, sequela
S73.026A	Obturator dislocation of unspecified hip, initial encounter
S73.026S	Obturator dislocation of unspecified hip, sequela
S73.031A	Other anterior subluxation of right hip, initial encounter
S73.031S	Other anterior subluxation of right hip, sequela
S73.032A	Other anterior subluxation of left hip, initial encounter
S73.032S	Other anterior subluxation of left hip, sequela



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Code	Description
S73.033A	Other anterior subluxation of unspecified hip, initial encounter
S73.033S	Other anterior subluxation of unspecified hip, sequela
S73.034A	Other anterior dislocation of right hip, initial encounter
S73.034S	Other anterior dislocation of right hip, sequela
S73.035A	Other anterior dislocation of left hip, initial encounter
S73.035S	Other anterior dislocation of left hip, sequela
S73.036A	Other anterior dislocation of unspecified hip, initial encounter
S73.036S	Other anterior dislocation of unspecified hip, sequela
S73.041A	Central subluxation of right hip, initial encounter
S73.041S	Central subluxation of right hip, sequela
S73.042A	Central subluxation of left hip, initial encounter
S73.042S	Central subluxation of left hip, sequela
S73.043A	Central subluxation of unspecified hip, initial encounter
S73.043S	Central subluxation of unspecified hip, sequela
S73.044A	Central dislocation of right hip, initial encounter
S73.044S	Central dislocation of right hip, sequela
S73.045A	Central dislocation of left hip, initial encounter
S73.045S	Central dislocation of left hip, sequela
S73.046A	Central dislocation of unspecified hip, initial encounter
S73.046S	Central dislocation of unspecified hip, sequela
S73.101A	Unspecified sprain of right hip, initial encounter
S73.101S	Unspecified sprain of right hip, sequela
S73.102A	Unspecified sprain of left hip, initial encounter
S73.102S	Unspecified sprain of left hip, sequela
S73.109A	Unspecified sprain of unspecified hip, initial encounter
S73.109S	Unspecified sprain of unspecified hip, sequela
S73.111A	Iliofemoral ligament sprain of right hip, initial encounter
S73.111S	Iliofemoral ligament sprain of right hip, sequela
S73.112A	Iliofemoral ligament sprain of left hip, initial encounter
S73.112S	Iliofemoral ligament sprain of left hip, sequela



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Code	Description
S73.119A	Iliofemoral ligament sprain of unspecified hip, initial encounter
S73.119S	Iliofemoral ligament sprain of unspecified hip, sequela
S73.121A	Ischiocapsular ligament sprain of right hip, initial encounter
S73.121S	Ischiocapsular ligament sprain of right hip, sequela
S73.122A	Ischiocapsular ligament sprain of left hip, initial encounter
S73.122S	Ischiocapsular ligament sprain of left hip, sequela
S73.129A	Ischiocapsular ligament sprain of unspecified hip, initial encounter
S73.129S	Ischiocapsular ligament sprain of unspecified hip, sequela
S73.191A	Other sprain of right hip, initial encounter
S73.191S	Other sprain of right hip, sequela
S73.192A	Other sprain of left hip, initial encounter
S73.192S	Other sprain of left hip, sequela
S73.199A	Other sprain of unspecified hip, initial encounter
S73.199S	Other sprain of unspecified hip, sequela
S74.00XA	Injury of sciatic nerve at hip and thigh level, unspecified leg, initial encounter
S74.00XS	Injury of sciatic nerve at hip and thigh level, unspecified leg, sequela
S74.01XA	Injury of sciatic nerve at hip and thigh level, right leg, initial encounter
S74.01XS	Injury of sciatic nerve at hip and thigh level, right leg, sequela
S74.02XA	Injury of sciatic nerve at hip and thigh level, left leg, initial encounter
S74.02XS	Injury of sciatic nerve at hip and thigh level, left leg, sequela
S74.10XA	Injury of femoral nerve at hip and thigh level, unspecified leg, initial encounter
S74.10XS	Injury of femoral nerve at hip and thigh level, unspecified leg, sequela
S74.11XA	Injury of femoral nerve at hip and thigh level, right leg, initial encounter
S74.11XS	Injury of femoral nerve at hip and thigh level, right leg, sequela
S74.12XA	Injury of femoral nerve at hip and thigh level, left leg, initial encounter
S74.12XS	Injury of femoral nerve at hip and thigh level, left leg, sequela
S74.20XA	Injury of cutaneous sensory nerve at hip and thigh level, unspecified leg, initial encounter
S74.20XS	Injury of cutaneous sensory nerve at hip and thigh level, unspecified leg, sequela
S74.21XA	Injury of cutaneous sensory nerve at hip and high level, right leg, initial encounter
S74.21XS	Injury of cutaneous sensory nerve at hip and high level, right leg, sequela



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Code	Description
S74.22XA	Injury of cutaneous sensory nerve at hip and thigh level, left leg, initial encounter
S74.22XS	Injury of cutaneous sensory nerve at hip and thigh level, left leg, sequela
S74.8X1A	Injury of other nerves at hip and thigh level, right leg, initial encounter
S74.8X1S	Injury of other nerves at hip and thigh level, right leg, sequela
S74.8X2A	Injury of other nerves at hip and thigh level, left leg, initial encounter
S74.8X2S	Injury of other nerves at hip and thigh level, left leg, sequela
S74.8X9A	Injury of other nerves at hip and thigh level, unspecified leg, initial encounter
S74.8X9S	Injury of other nerves at hip and thigh level, unspecified leg, sequela
S74.90XA	Injury of unspecified nerve at hip and thigh level, unspecified leg, initial encounter
S74.90XS	Injury of unspecified nerve at hip and thigh level, unspecified leg, sequela
S74.91XA	Injury of unspecified nerve at hip and thigh level, right leg, initial encounter
S74.91XS	Injury of unspecified nerve at hip and thigh level, right leg, sequela
S74.92XA	Injury of unspecified nerve at hip and thigh level, left leg, initial encounter
S74.92XS	Injury of unspecified nerve at hip and thigh level, left leg, sequela
S75.001S	Unspecified injury of femoral artery, right leg, sequela
S75.002S	Unspecified injury of femoral artery, left leg, sequela
S75.009S	Unspecified injury of femoral artery, unspecified leg, sequela
S75.011S	Minor laceration of femoral artery, right leg, sequela
S75.012S	Minor laceration of femoral artery, left leg, sequela
S75.019S	Minor laceration of femoral artery, unspecified leg, sequela
S75.021S	Major laceration of femoral artery, right leg, sequela
S75.022S	Major laceration of femoral artery, left leg, sequela
S75.029S	Major laceration of femoral artery, unspecified leg, sequela
S75.091S	Other specified injury of femoral artery, right leg, sequela
S75.092S	Other specified injury of femoral artery, left leg, sequela
S75.099S	Other specified injury of femoral artery, unspecified leg, sequela
S75.101S	Unspecified injury of femoral vein at hip and thigh level, right leg, sequela
S75.102S	Unspecified injury of femoral vein at hip and thigh level, left leg, sequela
S75.109S	Unspecified injury of femoral vein at hip and thigh level, unspecified leg, sequela
S75.111S	Minor laceration of femoral vein at hip and thigh level, right leg, sequela



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Code	Description
S75.112S	Minor laceration of femoral vein at hip and thigh level, left leg, sequela
S75.119S	Minor laceration of femoral vein at hip and thigh level, unspecified leg, sequela
S75.121S	Major laceration of femoral vein at hip and thigh level, right leg, sequela
S75.122S	Major laceration of femoral vein at hip and thigh level, left leg, sequela
S75.129S	Major laceration of femoral vein at hip and thigh level, unspecified leg, sequela
S75.191S	Other specified injury of femoral vein at hip and thigh level, right leg, sequela
S75.192S	Other specified injury of femoral vein at hip and thigh level, left leg, sequela
S75.199S	Other specified injury of femoral vein at hip and thigh level, unspecified leg, sequela
S75.201S	Unspecified injury of greater saphenous vein at hip and thigh level, right leg, sequela
S75.202S	Unspecified injury of greater saphenous vein at hip and thigh level, left leg, sequela
S75.209S	Unspecified injury of greater saphenous vein at hip and thigh level, unspecified leg, sequela
S75.211S	Minor laceration of greater saphenous vein at hip and thigh level, right leg, sequela
S75.212S	Minor laceration of greater saphenous vein at hip and thigh level, left leg, sequela
S75.219S	Minor laceration of greater saphenous vein at hip and thigh level, unspecified leg, sequela
S75.221S	Major laceration of greater saphenous vein at hip and thigh level, right leg, sequela
S75.222S	Major laceration of greater saphenous vein at hip and thigh level, left leg, sequela
S75.229S	Major laceration of greater saphenous vein at hip and thigh level, unspecified leg, sequela
S75.291S	Other specified injury of greater saphenous vein at hip and thigh level, right leg, sequela
S75.292S	Other specified injury of greater saphenous vein at hip and thigh level, left leg, sequela
S75.299S	Other specified injury of greater saphenous vein at hip and thigh level, unspecified leg, sequela
S75.801S	Unspecified injury of other blood vessels at hip and thigh level, right leg, sequela
S75.802S	Unspecified injury of other blood vessels at hip and thigh level, left leg, sequela
S75.809S	Unspecified injury of other blood vessels at hip and thigh level, unspecified leg, sequela
S75.811S	Laceration of other blood vessels at hip and thigh level, right leg, sequela
S75.812S	Laceration of other blood vessels at hip and thigh level, left leg, sequela
S75.819S	Laceration of other blood vessels at hip and thigh level, unspecified leg, sequela
S75.891S	Other specified injury of other blood vessels at hip and thigh level, right leg, sequela
S75.892S	Other specified injury of other blood vessels at hip and thigh level, left leg, sequela
S75.899S	Other specified injury of other blood vessels at hip and thigh level, unspecified leg, sequela



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Code	Description
S75.901S	Unspecified injury of unspecified blood vessel at hip and thigh level, right leg, sequela
S75.902S	Unspecified injury of unspecified blood vessel at hip and thigh level, left leg, sequela
S75.909S	Unspecified injury of unspecified blood vessel at hip and thigh level, unspecified leg, sequela
S75.911S	Laceration of unspecified blood vessel at hip and thigh level, right leg, sequela
S75.912S	Laceration of unspecified blood vessel at hip and thigh level, left leg, sequela
S75.919S	Laceration of unspecified blood vessel at hip and thigh level, unspecified leg, sequela
S75.991S	Other specified injury of unspecified blood vessel at hip and thigh level, right leg, sequela
S75.992S	Other specified injury of unspecified blood vessel at hip and thigh level, left leg, sequela
S75.999S	Other specified injury of unspecified blood vessel at hip and thigh level, unspecified leg, sequela
S76.001S	Unspecified injury of muscle, fascia and tendon of right hip, sequela
S76.002S	Unspecified injury of muscle, fascia and tendon of left hip, sequela
S76.009S	Unspecified injury of muscle, fascia and tendon of unspecified hip, sequela
S76.011A	Strain of muscle, fascia and tendon of right hip, initial encounter
S76.011S	Strain of muscle, fascia and tendon of right hip, sequela
S76.012A	Strain of muscle, fascia and tendon of left hip, initial encounter
S76.012S	Strain of muscle, fascia and tendon of left hip, sequela
S76.019A	Strain of muscle, fascia and tendon of unspecified hip, initial encounter
S76.019S	Strain of muscle, fascia and tendon of unspecified hip, sequela
S76.021S	Laceration of muscle, fascia and tendon of right hip, sequela
S76.022S	Laceration of muscle, fascia and tendon of left hip, sequela
S76.029S	Laceration of muscle, fascia and tendon of unspecified hip, sequela
S76.091S	Other specified injury of muscle, fascia and tendon of right hip, sequela
S76.092S	Other specified injury of muscle, fascia and tendon of left hip, sequela
S76.099S	Other specified injury of muscle, fascia and tendon of unspecified hip, sequela
S76.101S	Unspecified injury of right quadriceps muscle, fascia and tendon, sequela
S76.102S	Unspecified injury of left quadriceps muscle, fascia and tendon, sequela
S76.109S	Unspecified injury of unspecified quadriceps muscle, fascia and tendon, sequela
S76.111A	Strain of right quadriceps muscle, fascia and tendon, initial encounter
S76.111S	Strain of right quadriceps muscle, fascia and tendon, sequela

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Code	Description
S76.112A	Strain of left quadriceps muscle, fascia and tendon, initial encounter
S76.112S	Strain of left quadriceps muscle, fascia and tendon, sequela
S76.119A	Strain of unspecified quadriceps muscle, fascia and tendon, initial encounter
S76.119S	Strain of unspecified quadriceps muscle, fascia and tendon, sequela
S76.121S	Laceration of right quadriceps muscle, fascia and tendon, sequela
S76.122S	Laceration of left quadriceps muscle, fascia and tendon, sequela
S76.129S	Laceration of unspecified quadriceps muscle, fascia and tendon, sequela
S76.191S	Other specified injury of right quadriceps muscle, fascia and tendon, sequela
S76.192S	Other specified injury of left quadriceps muscle, fascia and tendon, sequela
S76.199S	Other specified injury of unspecified quadriceps muscle, fascia and tendon, sequela
S76.201S	Unspecified injury of adductor muscle, fascia and tendon of right thigh, sequela
S76.202S	Unspecified injury of adductor muscle, fascia and tendon of left thigh, sequela
S76.209S	Unspecified injury of adductor muscle, fascia and tendon of unspecified thigh, sequela
S76.211A	Strain of adductor muscle, fascia and tendon of right thigh, initial encounter
S76.211S	Strain of adductor muscle, fascia and tendon of right thigh, sequela
S76.212A	Strain of adductor muscle, fascia and tendon of left thigh, initial encounter
S76.212S	Strain of adductor muscle, fascia and tendon of left thigh, sequela
S76.219A	Strain of adductor muscle, fascia and tendon of unspecified thigh, initial encounter
S76.219S	Strain of adductor muscle, fascia and tendon of unspecified thigh, sequela
S76.221S	Laceration of adductor muscle, fascia and tendon of right thigh, sequela
S76.222S	Laceration of adductor muscle, fascia and tendon of left thigh, sequela
S76.229S	Laceration of adductor muscle, fascia and tendon of unspecified thigh, sequela
S76.291S	Other injury of adductor muscle, fascia and tendon of right thigh, sequela
S76.292S	Other injury of adductor muscle, fascia and tendon of left thigh, sequela
S76.299S	Other injury of adductor muscle, fascia and tendon of unspecified thigh, sequela
S76.301S	Unspecified injury of muscle, fascia and tendon of the posterior muscle group at thigh level, right thigh, sequela
S76.302S	Unspecified injury of muscle, fascia and tendon of the posterior muscle group at thigh level, left thigh, sequela
S76.309S	Unspecified injury of muscle, fascia and tendon of the posterior muscle group at thigh level, unspecified thigh, sequela



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Code	Description
S76.311A	Strain of muscle, fascia and tendon of the posterior muscle group at thigh level, right thigh, initial encounter
S76.311S	Strain of muscle, fascia and tendon of the posterior muscle group at thigh level, right thigh, sequela
S76.312A	Strain of muscle, fascia and tendon of the posterior muscle group at thigh level, left thigh, initial encounter
S76.312S	Strain of muscle, fascia and tendon of the posterior muscle group at thigh level, left thigh, sequela
S76.319A	Strain of muscle, fascia and tendon of the posterior muscle group at thigh level, unspecified thigh, initial encounter
S76.319S	Strain of muscle, fascia and tendon of the posterior muscle group at thigh level, unspecified thigh, sequela
S76.321S	Laceration of muscle, fascia and tendon of the posterior muscle group at thigh level, right thigh, sequela
S76.322S	Laceration of muscle, fascia and tendon of the posterior muscle group at thigh level, left thigh, sequela
S76.329S	Laceration of muscle, fascia and tendon of the posterior muscle group at thigh level, unspecified thigh, sequela
S76.391S	Other specified injury of muscle, fascia and tendon of the posterior muscle group at thigh level, right thigh, sequela
S76.392S	Other specified injury of muscle, fascia and tendon of the posterior muscle group at thigh level, left thigh, sequela
S76.399S	Other specified injury of muscle, fascia and tendon of the posterior muscle group at thigh level, unspecified thigh, sequela
S76.801S	Unspecified injury of other specified muscles, fascia and tendons at thigh level, right thigh, sequela
S76.802S	Unspecified injury of other specified muscles, fascia and tendons at thigh level, left thigh, sequela
S76.809S	Unspecified injury of other specified muscles, fascia and tendons at thigh level, unspecified thigh, sequela
S76.811A	Strain of other specified muscles, fascia and tendons at thigh level, right thigh, initial encounter
S76.811S	Strain of other specified muscles, fascia and tendons at thigh level, right thigh, sequela
S76.812A	Strain of other specified muscles, fascia and tendons at thigh level, left thigh, initial encounter
S76.812S	Strain of other specified muscles, fascia and tendons at thigh level, left thigh, sequela



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Code	Description
S76.819A	Strain of other specified muscles, fascia and tendons at thigh level, unspecified thigh, initial encounter
S76.819S	Strain of other specified muscles, fascia and tendons at thigh level, unspecified thigh, sequela
S76.821S	Laceration of other specified muscles, fascia and tendons at thigh level, right thigh, sequela
S76.822S	Laceration of other specified muscles, fascia and tendons at thigh level, left thigh, sequela
S76.829S	Laceration of other specified muscles, fascia and tendons at thigh level, unspecified thigh, sequela
S76.891S	Other injury of other specified muscles, fascia and tendons at thigh level, right thigh, sequela
S76.892S	Other injury of other specified muscles, fascia and tendons at thigh level, left thigh, sequela
S76.899S	Other injury of other specified muscles, fascia and tendons at thigh level, unspecified thigh, sequela
S76.901S	Unspecified injury of unspecified muscles, fascia and tendons at thigh level, right thigh, sequela
S76.902S	Unspecified injury of unspecified muscles, fascia and tendons at thigh level, left thigh, sequela
S76.909S	Unspecified injury of unspecified muscles, fascia and tendons at thigh level, unspecified thigh, sequela
S76.911A	Strain of unspecified muscles, fascia and tendons at thigh level, right thigh, initial encounter
S76.911S	Strain of unspecified muscles, fascia and tendons at thigh level, right thigh, sequela
S76.912A	Strain of unspecified muscles, fascia and tendons at thigh level, left thigh, initial encounter
S76.912S	Strain of unspecified muscles, fascia and tendons at thigh level, left thigh, sequela
S76.919A	Strain of unspecified muscles, fascia and tendons at thigh level, unspecified thigh, initial encounter
S76.919S	Strain of unspecified muscles, fascia and tendons at thigh level, unspecified thigh, sequela
S76.921S	Laceration of unspecified muscles, fascia and tendons at thigh level, right thigh, sequela
S76.922S	Laceration of unspecified muscles, fascia and tendons at thigh level, left thigh, sequela
S76.929S	Laceration of unspecified muscles, fascia and tendons at thigh level, unspecified thigh, sequela
S76.991S	Other specified injury of unspecified muscles, fascia and tendons at thigh level, right thigh, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S76.992S	Other specified injury of unspecified muscles, fascia and tendons at thigh level, left thigh, sequela
S76.999S	Other specified injury of unspecified muscles, fascia and tendons at thigh level, unspecified thigh, sequela
S77.00XS	Crushing injury of unspecified hip, sequela
S77.01XS	Crushing injury of right hip, sequela
S77.02XS	Crushing injury of left hip, sequela
S77.10XS	Crushing injury of unspecified thigh, sequela
S77.11XS	Crushing injury of right thigh, sequela
S77.12XS	Crushing injury of left thigh, sequela
S77.20XS	Crushing injury of unspecified hip with thigh, sequela
S77.21XS	Crushing injury of right hip with thigh, sequela
S77.22XS	Crushing injury of left hip with thigh, sequela
S78.011S	Complete traumatic amputation at right hip joint, sequela
S78.012S	Complete traumatic amputation at left hip joint, sequela
S78.019S	Complete traumatic amputation at unspecified hip joint, sequela
S78.021S	Partial traumatic amputation at right hip joint, sequela
S78.022S	Partial traumatic amputation at left hip joint, sequela
S78.029S	Partial traumatic amputation at unspecified hip joint, sequela
S78.111S	Complete traumatic amputation at level between right hip and knee, sequela
S78.112S	Complete traumatic amputation at level between left hip and knee, sequela
S78.119S	Complete traumatic amputation at level between unspecified hip and knee, sequela
S78.121S	Partial traumatic amputation at level between right hip and knee, sequela
S78.122S	Partial traumatic amputation at level between left hip and knee, sequela
S78.129S	Partial traumatic amputation at level between unspecified hip and knee, sequela
S78.911S	Complete traumatic amputation of right hip and thigh, level unspecified, sequela
S78.912S	Complete traumatic amputation of left hip and thigh, level unspecified, sequela
S78.919S	Complete traumatic amputation of unspecified hip and thigh, level unspecified, sequela
S78.921S	Partial traumatic amputation of right hip and thigh, level unspecified, sequela
S78.922S	Partial traumatic amputation of left hip and thigh, level unspecified, sequela
S78.929S	Partial traumatic amputation of unspecified hip and thigh, level unspecified, sequela

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***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S79.001D	Unspecified physeal fracture of upper end of right femur, subsequent encounter for fracture with routine healing
S79.001G	Unspecified physeal fracture of upper end of right femur, subsequent encounter for fracture with delayed healing
S79.001S	Unspecified physeal fracture of upper end of right femur, sequela
S79.002D	Unspecified physeal fracture of upper end of left femur, subsequent encounter for fracture with routine healing
S79.002G	Unspecified physeal fracture of upper end of left femur, subsequent encounter for fracture with delayed healing
S79.002S	Unspecified physeal fracture of upper end of left femur, sequela
S79.009D	Unspecified physeal fracture of upper end of unspecified femur, subsequent encounter for fracture with routine healing
S79.009G	Unspecified physeal fracture of upper end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.009S	Unspecified physeal fracture of upper end of unspecified femur, sequela
S79.011D	Salter-Harris Type I physeal fracture of upper end of right femur, subsequent encounter for fracture with routine healing
S79.011G	Salter-Harris Type I physeal fracture of upper end of right femur, subsequent encounter for fracture with delayed healing
S79.011S	Salter-Harris Type I physeal fracture of upper end of right femur, sequela
S79.012D	Salter-Harris Type I physeal fracture of upper end of left femur, subsequent encounter for fracture with routine healing
S79.012G	Salter-Harris Type I physeal fracture of upper end of left femur, subsequent encounter for fracture with delayed healing
S79.012S	Salter-Harris Type I physeal fracture of upper end of left femur, sequela
S79.019D	Salter-Harris Type I physeal fracture of upper end of unspecified femur, subsequent encounter for fracture with routine healing
S79.019G	Salter-Harris Type I physeal fracture of upper end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.019S	Salter-Harris Type I physeal fracture of upper end of unspecified femur, sequela
S79.091D	Other physeal fracture of upper end of right femur, subsequent encounter for fracture with routine healing
S79.091G	Other physeal fracture of upper end of right femur, subsequent encounter for fracture with delayed healing
S79.091S	Other physeal fracture of upper end of right femur, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S79.092D	Other physeal fracture of upper end of left femur, subsequent encounter for fracture with routine healing
S79.092G	Other physeal fracture of upper end of left femur, subsequent encounter for fracture with delayed healing
S79.092S	Other physeal fracture of upper end of left femur, sequela
S79.099D	Other physeal fracture of upper end of unspecified femur, subsequent encounter for fracture with routine healing
S79.099G	Other physeal fracture of upper end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.099S	Other physeal fracture of upper end of unspecified femur, sequela
S79.101D	Unspecified physeal fracture of lower end of right femur, subsequent encounter for fracture with routine healing
S79.101G	Unspecified physeal fracture of lower end of right femur, subsequent encounter for fracture with delayed healing
S79.101S	Unspecified physeal fracture of lower end of right femur, sequela
S79.102D	Unspecified physeal fracture of lower end of left femur, subsequent encounter for fracture with routine healing
S79.102G	Unspecified physeal fracture of lower end of left femur, subsequent encounter for fracture with delayed healing
S79.102S	Unspecified physeal fracture of lower end of left femur, sequela
S79.109D	Unspecified physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with routine healing
S79.109G	Unspecified physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.109S	Unspecified physeal fracture of lower end of unspecified femur, sequela
S79.111D	Salter-Harris Type I physeal fracture of lower end of right femur, subsequent encounter for fracture with routine healing
S79.111G	Salter-Harris Type I physeal fracture of lower end of right femur, subsequent encounter for fracture with delayed healing
S79.111S	Salter-Harris Type I physeal fracture of lower end of right femur, sequela
S79.112D	Salter-Harris Type I physeal fracture of lower end of left femur, subsequent encounter for fracture with routine healing
S79.112G	Salter-Harris Type I physeal fracture of lower end of left femur, subsequent encounter for fracture with delayed healing
S79.112S	Salter-Harris Type I physeal fracture of lower end of left femur, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S79.119D	Salter-Harris Type I physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with routine healing
S79.119G	Salter-Harris Type I physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.119S	Salter-Harris Type I physeal fracture of lower end of unspecified femur, sequela
S79.121D	Salter-Harris Type II physeal fracture of lower end of right femur, subsequent encounter for fracture with routine healing
S79.121G	Salter-Harris Type II physeal fracture of lower end of right femur, subsequent encounter for fracture with delayed healing
S79.121S	Salter-Harris Type II physeal fracture of lower end of right femur, sequela
S79.122D	Salter-Harris Type II physeal fracture of lower end of left femur, subsequent encounter for fracture with routine healing
S79.122G	Salter-Harris Type II physeal fracture of lower end of left femur, subsequent encounter for fracture with delayed healing
S79.122S	Salter-Harris Type II physeal fracture of lower end of left femur, sequela
S79.129D	Salter-Harris Type II physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with routine healing
S79.129G	Salter-Harris Type II physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.129S	Salter-Harris Type II physeal fracture of lower end of unspecified femur, sequela
S79.131D	Salter-Harris Type III physeal fracture of lower end of right femur, subsequent encounter for fracture with routine healing
S79.131G	Salter-Harris Type III physeal fracture of lower end of right femur, subsequent encounter for fracture with delayed healing
S79.131S	Salter-Harris Type III physeal fracture of lower end of right femur, sequela
S79.132D	Salter-Harris Type III physeal fracture of lower end of left femur, subsequent encounter for fracture with routine healing
S79.132G	Salter-Harris Type III physeal fracture of lower end of left femur, subsequent encounter for fracture with delayed healing
S79.132S	Salter-Harris Type III physeal fracture of lower end of left femur, sequela
S79.139D	Salter-Harris Type III physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with routine healing
S79.139G	Salter-Harris Type III physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.139S	Salter-Harris Type III physeal fracture of lower end of unspecified femur, sequela

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***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S79.141D	Salter-Harris Type IV physeal fracture of lower end of right femur, subsequent encounter for fracture with routine healing
S79.141G	Salter-Harris Type IV physeal fracture of lower end of right femur, subsequent encounter for fracture with delayed healing
S79.141S	Salter-Harris Type IV physeal fracture of lower end of right femur, sequela
S79.142D	Salter-Harris Type IV physeal fracture of lower end of left femur, subsequent encounter for fracture with routine healing
S79.142G	Salter-Harris Type IV physeal fracture of lower end of left femur, subsequent encounter for fracture with delayed healing
S79.142S	Salter-Harris Type IV physeal fracture of lower end of left femur, sequela
S79.149D	Salter-Harris Type IV physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with routine healing
S79.149G	Salter-Harris Type IV physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.149S	Salter-Harris Type IV physeal fracture of lower end of unspecified femur, sequela
S79.191D	Other physeal fracture of lower end of right femur, subsequent encounter for fracture with routine healing
S79.191G	Other physeal fracture of lower end of right femur, subsequent encounter for fracture with delayed healing
S79.191S	Other physeal fracture of lower end of right femur, sequela
S79.192D	Other physeal fracture of lower end of left femur, subsequent encounter for fracture with routine healing
S79.192G	Other physeal fracture of lower end of left femur, subsequent encounter for fracture with delayed healing
S79.192S	Other physeal fracture of lower end of left femur, sequela
S79.199D	Other physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with routine healing
S79.199G	Other physeal fracture of lower end of unspecified femur, subsequent encounter for fracture with delayed healing
S79.199S	Other physeal fracture of lower end of unspecified femur, sequela
S79.811S	Other specified injuries of right hip, sequela
S79.812S	Other specified injuries of left hip, sequela
S79.819S	Other specified injuries of unspecified hip, sequela
S79.821S	Other specified injuries of right thigh, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S79.822S	Other specified injuries of left thigh, sequela
S79.829S	Other specified injuries of unspecified thigh, sequela
S79.911S	Unspecified injury of right hip, sequela
S79.912S	Unspecified injury of left hip, sequela
S79.919S	Unspecified injury of unspecified hip, sequela
S79.921S	Unspecified injury of right thigh, sequela
S79.922S	Unspecified injury of left thigh, sequela
S79.929S	Unspecified injury of unspecified thigh, sequela
S80.00XS	Contusion of unspecified knee, sequela
S80.01XS	Contusion of right knee, sequela
S80.02XS	Contusion of left knee, sequela
S80.10XS	Contusion of unspecified lower leg, sequela
S80.11XS	Contusion of right lower leg, sequela
S80.12XS	Contusion of left lower leg, sequela
S80.211A	Abrasion, right knee, initial encounter
S80.211S	Abrasion, right knee, sequela
S80.212A	Abrasion, left knee, initial encounter
S80.212S	Abrasion, left knee, sequela
S80.219A	Abrasion, unspecified knee, initial encounter
S80.219S	Abrasion, unspecified knee, sequela
S80.221A	Blister (nonthermal), right knee, initial encounter
S80.221S	Blister (nonthermal), right knee, sequela
S80.222A	Blister (nonthermal), left knee, initial encounter
S80.222S	Blister (nonthermal), left knee, sequela
S80.229A	Blister (nonthermal), unspecified knee, initial encounter
S80.229S	Blister (nonthermal), unspecified knee, sequela
S80.241A	External constriction, right knee, initial encounter
S80.241S	External constriction, right knee, sequela
S80.242A	External constriction, left knee, initial encounter
S80.242S	External constriction, left knee, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S80.249A	External constriction, unspecified knee, initial encounter
S80.249S	External constriction, unspecified knee, sequela
S80.251A	Superficial foreign body, right knee, initial encounter
S80.251S	Superficial foreign body, right knee, sequela
S80.252A	Superficial foreign body, left knee, initial encounter
S80.252S	Superficial foreign body, left knee, sequela
S80.259A	Superficial foreign body, unspecified knee, initial encounter
S80.259S	Superficial foreign body, unspecified knee, sequela
S80.261A	Insect bite (nonvenomous), right knee, initial encounter
S80.261S	Insect bite (nonvenomous), right knee, sequela
S80.262A	Insect bite (nonvenomous), left knee, initial encounter
S80.262S	Insect bite (nonvenomous), left knee, sequela
S80.269A	Insect bite (nonvenomous), unspecified knee, initial encounter
S80.269S	Insect bite (nonvenomous), unspecified knee, sequela
S80.271A	Other superficial bite of right knee, initial encounter
S80.271S	Other superficial bite of right knee, sequela
S80.272A	Other superficial bite of left knee, initial encounter
S80.272S	Other superficial bite of left knee, sequela
S80.279A	Other superficial bite of unspecified knee, initial encounter
S80.279S	Other superficial bite of unspecified knee, sequela
S80.811A	Abrasion, right lower leg, initial encounter
S80.811S	Abrasion, right lower leg, sequela
S80.812A	Abrasion, left lower leg, initial encounter
S80.812S	Abrasion, left lower leg, sequela
S80.819A	Abrasion, unspecified lower leg, initial encounter
S80.819S	Abrasion, unspecified lower leg, sequela
S80.821A	Blister (nonthermal), right lower leg, initial encounter
S80.821S	Blister (nonthermal), right lower leg, sequela
S80.822A	Blister (nonthermal), left lower leg, initial encounter
S80.822S	Blister (nonthermal), left lower leg, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S80.829A	Blister (nonthermal), unspecified lower leg, initial encounter
S80.829S	Blister (nonthermal), unspecified lower leg, sequela
S80.841A	External constriction, right lower leg, initial encounter
S80.841S	External constriction, right lower leg, sequela
S80.842A	External constriction, left lower leg, initial encounter
S80.842S	External constriction, left lower leg, sequela
S80.849A	External constriction, unspecified lower leg, initial encounter
S80.849S	External constriction, unspecified lower leg, sequela
S80.851A	Superficial foreign body, right lower leg, initial encounter
S80.851S	Superficial foreign body, right lower leg, sequela
S80.852A	Superficial foreign body, left lower leg, initial encounter
S80.852S	Superficial foreign body, left lower leg, sequela
S80.859A	Superficial foreign body, unspecified lower leg, initial encounter
S80.859S	Superficial foreign body, unspecified lower leg, sequela
S80.861A	Insect bite (nonvenomous), right lower leg, initial encounter
S80.861S	Insect bite (nonvenomous), right lower leg, sequela
S80.862A	Insect bite (nonvenomous), left lower leg, initial encounter
S80.862S	Insect bite (nonvenomous), left lower leg, sequela
S80.869A	Insect bite (nonvenomous), unspecified lower leg, initial encounter
S80.869S	Insect bite (nonvenomous), unspecified lower leg, sequela
S80.871A	Other superficial bite, right lower leg, initial encounter
S80.871S	Other superficial bite, right lower leg, sequela
S80.872A	Other superficial bite, left lower leg, initial encounter
S80.872S	Other superficial bite, left lower leg, sequela
S80.879A	Other superficial bite, unspecified lower leg, initial encounter
S80.879S	Other superficial bite, unspecified lower leg, sequela
S80.911A	Unspecified superficial injury of right knee, initial encounter
S80.911S	Unspecified superficial injury of right knee, sequela
S80.912A	Unspecified superficial injury of left knee, initial encounter
S80.912S	Unspecified superficial injury of left knee, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S80.919A	Unspecified superficial injury of unspecified knee, initial encounter
S80.919S	Unspecified superficial injury of unspecified knee, sequela
S80.921A	Unspecified superficial injury of right lower leg, initial encounter
S80.921S	Unspecified superficial injury of right lower leg, sequela
S80.922A	Unspecified superficial injury of left lower leg, initial encounter
S80.922S	Unspecified superficial injury of left lower leg, sequela
S80.929A	Unspecified superficial injury of unspecified lower leg, initial encounter
S80.929S	Unspecified superficial injury of unspecified lower leg, sequela
S81.001S	Unspecified open wound, right knee, sequela
S81.002S	Unspecified open wound, left knee, sequela
S81.009A	Unspecified open wound, unspecified knee, initial encounter
S81.009S	Unspecified open wound, unspecified knee, sequela
S81.011S	Laceration without foreign body, right knee, sequela
S81.012S	Laceration without foreign body, left knee, sequela
S81.019S	Laceration without foreign body, unspecified knee, sequela
S81.021S	Laceration with foreign body, right knee, sequela
S81.022S	Laceration with foreign body, left knee, sequela
S81.029S	Laceration with foreign body, unspecified knee, sequela
S81.031S	Puncture wound without foreign body, right knee, sequela
S81.032S	Puncture wound without foreign body, left knee, sequela
S81.039S	Puncture wound without foreign body, unspecified knee, sequela
S81.041S	Puncture wound with foreign body, right knee, sequela
S81.042S	Puncture wound with foreign body, left knee, sequela
S81.049S	Puncture wound with foreign body, unspecified knee, sequela
S81.051S	Open bite, right knee, sequela
S81.052S	Open bite, left knee, sequela
S81.059S	Open bite, unspecified knee, sequela
S81.801S	Unspecified open wound, right lower leg, sequela
S81.802S	Unspecified open wound, left lower leg, sequela
S81.809S	Unspecified open wound, unspecified lower leg, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S81.811S	Laceration without foreign body, right lower leg, sequela
S81.812S	Laceration without foreign body, left lower leg, sequela
S81.819S	Laceration without foreign body, unspecified lower leg, sequela
S81.821S	Laceration with foreign body, right lower leg, sequela
S81.822S	Laceration with foreign body, left lower leg, sequela
S81.829S	Laceration with foreign body, unspecified lower leg, sequela
S81.831S	Puncture wound without foreign body, right lower leg, sequela
S81.832S	Puncture wound without foreign body, left lower leg, sequela
S81.839S	Puncture wound without foreign body, unspecified lower leg, sequela
S81.841S	Puncture wound with foreign body, right lower leg, sequela
S81.842S	Puncture wound with foreign body, left lower leg, sequela
S81.849S	Puncture wound with foreign body, unspecified lower leg, sequela
S81.851S	Open bite, right lower leg, sequela
S81.852S	Open bite, left lower leg, sequela
S81.859S	Open bite, unspecified lower leg, sequela
S82.001D	Unspecified fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.001E	Unspecified fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.001F	Unspecified fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.001G	Unspecified fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.001H	Unspecified fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.001J	Unspecified fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.001S	Unspecified fracture of right patella, sequela
S82.002D	Unspecified fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.002E	Unspecified fracture of left patella, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.002F	Unspecified fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.002G	Unspecified fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.002H	Unspecified fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.002J	Unspecified fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.002S	Unspecified fracture of left patella, sequela
S82.009D	Unspecified fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.009E	Unspecified fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.009F	Unspecified fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.009G	Unspecified fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.009H	Unspecified fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.009J	Unspecified fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.009S	Unspecified fracture of unspecified patella, sequela
S82.011D	Displaced osteochondral fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.011E	Displaced osteochondral fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.011F	Displaced osteochondral fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.011G	Displaced osteochondral fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.011H	Displaced osteochondral fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.011J	Displaced osteochondral fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.011S	Displaced osteochondral fracture of right patella, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.012D	Displaced osteochondral fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.012E	Displaced osteochondral fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.012F	Displaced osteochondral fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.012G	Displaced osteochondral fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.012H	Displaced osteochondral fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.012J	Displaced osteochondral fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.012S	Displaced osteochondral fracture of left patella, sequela
S82.013D	Displaced osteochondral fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.013E	Displaced osteochondral fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.013F	Displaced osteochondral fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.013G	Displaced osteochondral fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.013H	Displaced osteochondral fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.013J	Displaced osteochondral fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.013S	Displaced osteochondral fracture of unspecified patella, sequela
S82.014D	Nondisplaced osteochondral fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.014E	Nondisplaced osteochondral fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.014F	Nondisplaced osteochondral fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.014G	Nondisplaced osteochondral fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.014H	Nondisplaced osteochondral fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.014J	Nondisplaced osteochondral fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.014S	Nondisplaced osteochondral fracture of right patella, sequela
S82.015D	Nondisplaced osteochondral fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.015E	Nondisplaced osteochondral fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.015F	Nondisplaced osteochondral fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.015G	Nondisplaced osteochondral fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.015H	Nondisplaced osteochondral fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.015J	Nondisplaced osteochondral fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.015S	Nondisplaced osteochondral fracture of left patella, sequela
S82.016D	Nondisplaced osteochondral fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.016E	Nondisplaced osteochondral fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.016F	Nondisplaced osteochondral fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.016G	Nondisplaced osteochondral fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.016H	Nondisplaced osteochondral fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.016J	Nondisplaced osteochondral fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.016S	Nondisplaced osteochondral fracture of unspecified patella, sequela
S82.021D	Displaced longitudinal fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.021E	Displaced longitudinal fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.021F	Displaced longitudinal fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.021G	Displaced longitudinal fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.021H	Displaced longitudinal fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.021J	Displaced longitudinal fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.021S	Displaced longitudinal fracture of right patella, sequela
S82.022D	Displaced longitudinal fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.022E	Displaced longitudinal fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.022F	Displaced longitudinal fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.022G	Displaced longitudinal fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.022H	Displaced longitudinal fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.022J	Displaced longitudinal fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.022S	Displaced longitudinal fracture of left patella, sequela
S82.023D	Displaced longitudinal fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.023E	Displaced longitudinal fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.023F	Displaced longitudinal fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.023G	Displaced longitudinal fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.023H	Displaced longitudinal fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.023J	Displaced longitudinal fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.023S	Displaced longitudinal fracture of unspecified patella, sequela
S82.024D	Nondisplaced longitudinal fracture of right patella, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.024E	Nondisplaced longitudinal fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.024F	Nondisplaced longitudinal fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.024G	Nondisplaced longitudinal fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.024H	Nondisplaced longitudinal fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.024J	Nondisplaced longitudinal fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.024S	Nondisplaced longitudinal fracture of right patella, sequela
S82.025D	Nondisplaced longitudinal fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.025E	Nondisplaced longitudinal fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.025F	Nondisplaced longitudinal fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.025G	Nondisplaced longitudinal fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.025H	Nondisplaced longitudinal fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.025J	Nondisplaced longitudinal fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.025S	Nondisplaced longitudinal fracture of left patella, sequela
S82.026D	Nondisplaced longitudinal fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.026E	Nondisplaced longitudinal fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.026F	Nondisplaced longitudinal fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.026G	Nondisplaced longitudinal fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.026H	Nondisplaced longitudinal fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.026J	Nondisplaced longitudinal fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing

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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.026S	Nondisplaced longitudinal fracture of unspecified patella, sequela
S82.031D	Displaced transverse fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.031E	Displaced transverse fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.031F	Displaced transverse fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.031G	Displaced transverse fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.031H	Displaced transverse fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.031J	Displaced transverse fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.031S	Displaced transverse fracture of right patella, sequela
S82.032D	Displaced transverse fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.032E	Displaced transverse fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.032F	Displaced transverse fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.032G	Displaced transverse fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.032H	Displaced transverse fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.032J	Displaced transverse fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.032S	Displaced transverse fracture of left patella, sequela
S82.033D	Displaced transverse fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.033E	Displaced transverse fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.033F	Displaced transverse fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.033G	Displaced transverse fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.033H	Displaced transverse fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.033J	Displaced transverse fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.033S	Displaced transverse fracture of unspecified patella, sequela
S82.034D	Nondisplaced transverse fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.034E	Nondisplaced transverse fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.034F	Nondisplaced transverse fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.034G	Nondisplaced transverse fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.034H	Nondisplaced transverse fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.034J	Nondisplaced transverse fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.034S	Nondisplaced transverse fracture of right patella, sequela
S82.035D	Nondisplaced transverse fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.035E	Nondisplaced transverse fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.035F	Nondisplaced transverse fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.035G	Nondisplaced transverse fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.035H	Nondisplaced transverse fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.035J	Nondisplaced transverse fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.035S	Nondisplaced transverse fracture of left patella, sequela
S82.036D	Nondisplaced transverse fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.036E	Nondisplaced transverse fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.036F	Nondisplaced transverse fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.036G	Nondisplaced transverse fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.036H	Nondisplaced transverse fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.036J	Nondisplaced transverse fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.036S	Nondisplaced transverse fracture of unspecified patella, sequela
S82.041D	Displaced comminuted fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.041E	Displaced comminuted fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.041F	Displaced comminuted fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.041G	Displaced comminuted fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.041H	Displaced comminuted fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.041J	Displaced comminuted fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.041S	Displaced comminuted fracture of right patella, sequela
S82.042D	Displaced comminuted fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.042E	Displaced comminuted fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.042F	Displaced comminuted fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.042G	Displaced comminuted fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.042H	Displaced comminuted fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.042J	Displaced comminuted fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.042S	Displaced comminuted fracture of left patella, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.043D	Displaced comminuted fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.043E	Displaced comminuted fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.043F	Displaced comminuted fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.043G	Displaced comminuted fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.043H	Displaced comminuted fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.043J	Displaced comminuted fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.043S	Displaced comminuted fracture of unspecified patella, sequela
S82.044D	Nondisplaced comminuted fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.044E	Nondisplaced comminuted fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.044F	Nondisplaced comminuted fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.044G	Nondisplaced comminuted fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.044H	Nondisplaced comminuted fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.044J	Nondisplaced comminuted fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.044S	Nondisplaced comminuted fracture of right patella, sequela
S82.045D	Nondisplaced comminuted fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.045E	Nondisplaced comminuted fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.045F	Nondisplaced comminuted fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.045G	Nondisplaced comminuted fracture of left patella, subsequent encounter for closed fracture with delayed healing
S82.045H	Nondisplaced comminuted fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.045J	Nondisplaced comminuted fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.045S	Nondisplaced comminuted fracture of left patella, sequela
S82.046D	Nondisplaced comminuted fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.046E	Nondisplaced comminuted fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.046F	Nondisplaced comminuted fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.046G	Nondisplaced comminuted fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.046H	Nondisplaced comminuted fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.046J	Nondisplaced comminuted fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.046S	Nondisplaced comminuted fracture of unspecified patella, sequela
S82.091D	Other fracture of right patella, subsequent encounter for closed fracture with routine healing
S82.091E	Other fracture of right patella, subsequent encounter for open fracture type I or II with routine healing
S82.091F	Other fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.091G	Other fracture of right patella, subsequent encounter for closed fracture with delayed healing
S82.091H	Other fracture of right patella, subsequent encounter for open fracture type I or II with delayed healing
S82.091J	Other fracture of right patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.091S	Other fracture of right patella, sequela
S82.092D	Other fracture of left patella, subsequent encounter for closed fracture with routine healing
S82.092E	Other fracture of left patella, subsequent encounter for open fracture type I or II with routine healing
S82.092F	Other fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.092G	Other fracture of left patella, subsequent encounter for closed fracture with delayed healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.092H	Other fracture of left patella, subsequent encounter for open fracture type I or II with delayed healing
S82.092J	Other fracture of left patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.092S	Other fracture of left patella, sequela
S82.099D	Other fracture of unspecified patella, subsequent encounter for closed fracture with routine healing
S82.099E	Other fracture of unspecified patella, subsequent encounter for open fracture type I or II with routine healing
S82.099F	Other fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.099G	Other fracture of unspecified patella, subsequent encounter for closed fracture with delayed healing
S82.099H	Other fracture of unspecified patella, subsequent encounter for open fracture type I or II with delayed healing
S82.099J	Other fracture of unspecified patella, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.099S	Other fracture of unspecified patella, sequela
S82.101D	Unspecified fracture of upper end of right tibia, subsequent encounter for closed fracture with routine healing
S82.101E	Unspecified fracture of upper end of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.101F	Unspecified fracture of upper end of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.101G	Unspecified fracture of upper end of right tibia, subsequent encounter for closed fracture with delayed healing
S82.101H	Unspecified fracture of upper end of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.101J	Unspecified fracture of upper end of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.101S	Unspecified fracture of upper end of right tibia, sequela
S82.102D	Unspecified fracture of upper end of left tibia, subsequent encounter for closed fracture with routine healing
S82.102E	Unspecified fracture of upper end of left tibia, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.102F	Unspecified fracture of upper end of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.102G	Unspecified fracture of upper end of left tibia, subsequent encounter for closed fracture with delayed healing
S82.102H	Unspecified fracture of upper end of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.102J	Unspecified fracture of upper end of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.102S	Unspecified fracture of upper end of left tibia, sequela
S82.109D	Unspecified fracture of upper end of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.109E	Unspecified fracture of upper end of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.109F	Unspecified fracture of upper end of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.109G	Unspecified fracture of upper end of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.109H	Unspecified fracture of upper end of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.109J	Unspecified fracture of upper end of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.109S	Unspecified fracture of upper end of unspecified tibia, sequela
S82.111D	Displaced fracture of right tibial spine, subsequent encounter for closed fracture with routine healing
S82.111E	Displaced fracture of right tibial spine, subsequent encounter for open fracture type I or II with routine healing
S82.111F	Displaced fracture of right tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.111G	Displaced fracture of right tibial spine, subsequent encounter for closed fracture with delayed healing
S82.111H	Displaced fracture of right tibial spine, subsequent encounter for open fracture type I or II with delayed healing
S82.111J	Displaced fracture of right tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.111S	Displaced fracture of right tibial spine, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.112D	Displaced fracture of left tibial spine, subsequent encounter for closed fracture with routine healing
S82.112E	Displaced fracture of left tibial spine, subsequent encounter for open fracture type I or II with routine healing
S82.112F	Displaced fracture of left tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.112G	Displaced fracture of left tibial spine, subsequent encounter for closed fracture with delayed healing
S82.112H	Displaced fracture of left tibial spine, subsequent encounter for open fracture type I or II with delayed healing
S82.112J	Displaced fracture of left tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.112S	Displaced fracture of left tibial spine, sequela
S82.113D	Displaced fracture of unspecified tibial spine, subsequent encounter for closed fracture with routine healing
S82.113E	Displaced fracture of unspecified tibial spine, subsequent encounter for open fracture type I or II with routine healing
S82.113F	Displaced fracture of unspecified tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.113G	Displaced fracture of unspecified tibial spine, subsequent encounter for closed fracture with delayed healing
S82.113H	Displaced fracture of unspecified tibial spine, subsequent encounter for open fracture type I or II with delayed healing
S82.113J	Displaced fracture of unspecified tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.113S	Displaced fracture of unspecified tibial spine, sequela
S82.114D	Nondisplaced fracture of right tibial spine, subsequent encounter for closed fracture with routine healing
S82.114E	Nondisplaced fracture of right tibial spine, subsequent encounter for open fracture type I or II with routine healing
S82.114F	Nondisplaced fracture of right tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.114G	Nondisplaced fracture of right tibial spine, subsequent encounter for closed fracture with delayed healing
S82.114H	Nondisplaced fracture of right tibial spine, subsequent encounter for open fracture type I or II with delayed healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.114J	Nondisplaced fracture of right tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.114S	Nondisplaced fracture of right tibial spine, sequela
S82.115D	Nondisplaced fracture of left tibial spine, subsequent encounter for closed fracture with routine healing
S82.115E	Nondisplaced fracture of left tibial spine, subsequent encounter for open fracture type I or II with routine healing
S82.115F	Nondisplaced fracture of left tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.115G	Nondisplaced fracture of left tibial spine, subsequent encounter for closed fracture with delayed healing
S82.115H	Nondisplaced fracture of left tibial spine, subsequent encounter for open fracture type I or II with delayed healing
S82.115J	Nondisplaced fracture of left tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.115S	Nondisplaced fracture of left tibial spine, sequela
S82.116D	Nondisplaced fracture of unspecified tibial spine, subsequent encounter for closed fracture with routine healing
S82.116E	Nondisplaced fracture of unspecified tibial spine, subsequent encounter for open fracture type I or II with routine healing
S82.116F	Nondisplaced fracture of unspecified tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.116G	Nondisplaced fracture of unspecified tibial spine, subsequent encounter for closed fracture with delayed healing
S82.116H	Nondisplaced fracture of unspecified tibial spine, subsequent encounter for open fracture type I or II with delayed healing
S82.116J	Nondisplaced fracture of unspecified tibial spine, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.116S	Nondisplaced fracture of unspecified tibial spine, sequela
S82.121D	Displaced fracture of lateral condyle of right tibia, subsequent encounter for closed fracture with routine healing
S82.121E	Displaced fracture of lateral condyle of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.121F	Displaced fracture of lateral condyle of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.121G	Displaced fracture of lateral condyle of right tibia, subsequent encounter for closed fracture with delayed healing
S82.121H	Displaced fracture of lateral condyle of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.121J	Displaced fracture of lateral condyle of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.121S	Displaced fracture of lateral condyle of right tibia, sequela
S82.122D	Displaced fracture of lateral condyle of left tibia, subsequent encounter for closed fracture with routine healing
S82.122E	Displaced fracture of lateral condyle of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.122F	Displaced fracture of lateral condyle of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.122G	Displaced fracture of lateral condyle of left tibia, subsequent encounter for closed fracture with delayed healing
S82.122H	Displaced fracture of lateral condyle of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.122J	Displaced fracture of lateral condyle of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.122S	Displaced fracture of lateral condyle of left tibia, sequela
S82.123D	Displaced fracture of lateral condyle of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.123E	Displaced fracture of lateral condyle of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.123F	Displaced fracture of lateral condyle of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.123G	Displaced fracture of lateral condyle of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.123H	Displaced fracture of lateral condyle of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.123J	Displaced fracture of lateral condyle of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.123S	Displaced fracture of lateral condyle of unspecified tibia, sequela
S82.124D	Nondisplaced fracture of lateral condyle of right tibia, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.124E	Nondisplaced fracture of lateral condyle of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.124F	Nondisplaced fracture of lateral condyle of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.124G	Nondisplaced fracture of lateral condyle of right tibia, subsequent encounter for closed fracture with delayed healing
S82.124H	Nondisplaced fracture of lateral condyle of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.124J	Nondisplaced fracture of lateral condyle of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.124S	Nondisplaced fracture of lateral condyle of right tibia, sequela
S82.125D	Nondisplaced fracture of lateral condyle of left tibia, subsequent encounter for closed fracture with routine healing
S82.125E	Nondisplaced fracture of lateral condyle of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.125F	Nondisplaced fracture of lateral condyle of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.125G	Nondisplaced fracture of lateral condyle of left tibia, subsequent encounter for closed fracture with delayed healing
S82.125H	Nondisplaced fracture of lateral condyle of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.125J	Nondisplaced fracture of lateral condyle of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.125S	Nondisplaced fracture of lateral condyle of left tibia, sequela
S82.126D	Nondisplaced fracture of lateral condyle of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.126E	Nondisplaced fracture of lateral condyle of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.126F	Nondisplaced fracture of lateral condyle of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.126G	Nondisplaced fracture of lateral condyle of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.126H	Nondisplaced fracture of lateral condyle of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.126J	Nondisplaced fracture of lateral condyle of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing

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***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.126S	Nondisplaced fracture of lateral condyle of unspecified tibia, sequela
S82.131D	Displaced fracture of medial condyle of right tibia, subsequent encounter for closed fracture with routine healing
S82.131E	Displaced fracture of medial condyle of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.131F	Displaced fracture of medial condyle of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.131G	Displaced fracture of medial condyle of right tibia, subsequent encounter for closed fracture with delayed healing
S82.131H	Displaced fracture of medial condyle of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.131J	Displaced fracture of medial condyle of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.131S	Displaced fracture of medial condyle of right tibia, sequela
S82.132D	Displaced fracture of medial condyle of left tibia, subsequent encounter for closed fracture with routine healing
S82.132E	Displaced fracture of medial condyle of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.132F	Displaced fracture of medial condyle of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.132G	Displaced fracture of medial condyle of left tibia, subsequent encounter for closed fracture with delayed healing
S82.132H	Displaced fracture of medial condyle of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.132J	Displaced fracture of medial condyle of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.132S	Displaced fracture of medial condyle of left tibia, sequela
S82.133D	Displaced fracture of medial condyle of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.133E	Displaced fracture of medial condyle of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.133F	Displaced fracture of medial condyle of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.133G	Displaced fracture of medial condyle of unspecified tibia, subsequent encounter for closed fracture with delayed healing



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Code	Description
S82.133H	Displaced fracture of medial condyle of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.133J	Displaced fracture of medial condyle of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.133S	Displaced fracture of medial condyle of unspecified tibia, sequela
S82.134D	Nondisplaced fracture of medial condyle of right tibia, subsequent encounter for closed fracture with routine healing
S82.134E	Nondisplaced fracture of medial condyle of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.134F	Nondisplaced fracture of medial condyle of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.134G	Nondisplaced fracture of medial condyle of right tibia, subsequent encounter for closed fracture with delayed healing
S82.134H	Nondisplaced fracture of medial condyle of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.134J	Nondisplaced fracture of medial condyle of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.134S	Nondisplaced fracture of medial condyle of right tibia, sequela
S82.135D	Nondisplaced fracture of medial condyle of left tibia, subsequent encounter for closed fracture with routine healing
S82.135E	Nondisplaced fracture of medial condyle of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.135F	Nondisplaced fracture of medial condyle of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.135G	Nondisplaced fracture of medial condyle of left tibia, subsequent encounter for closed fracture with delayed healing
S82.135H	Nondisplaced fracture of medial condyle of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.135J	Nondisplaced fracture of medial condyle of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.135S	Nondisplaced fracture of medial condyle of left tibia, sequela
S82.136D	Nondisplaced fracture of medial condyle of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.136E	Nondisplaced fracture of medial condyle of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S82.136F	Nondisplaced fracture of medial condyle of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.136G	Nondisplaced fracture of medial condyle of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.136H	Nondisplaced fracture of medial condyle of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.136J	Nondisplaced fracture of medial condyle of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.136S	Nondisplaced fracture of medial condyle of unspecified tibia, sequela
S82.141D	Displaced bicondylar fracture of right tibia, subsequent encounter for closed fracture with routine healing
S82.141E	Displaced bicondylar fracture of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.141F	Displaced bicondylar fracture of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.141G	Displaced bicondylar fracture of right tibia, subsequent encounter for closed fracture with delayed healing
S82.141H	Displaced bicondylar fracture of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.141J	Displaced bicondylar fracture of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.141S	Displaced bicondylar fracture of right tibia, sequela
S82.142D	Displaced bicondylar fracture of left tibia, subsequent encounter for closed fracture with routine healing
S82.142E	Displaced bicondylar fracture of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.142F	Displaced bicondylar fracture of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.142G	Displaced bicondylar fracture of left tibia, subsequent encounter for closed fracture with delayed healing
S82.142H	Displaced bicondylar fracture of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.142J	Displaced bicondylar fracture of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.142S	Displaced bicondylar fracture of left tibia, sequela



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Code	Description
S82.143D	Displaced bicondylar fracture of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.143E	Displaced bicondylar fracture of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.143F	Displaced bicondylar fracture of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.143G	Displaced bicondylar fracture of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.143H	Displaced bicondylar fracture of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.143J	Displaced bicondylar fracture of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.143S	Displaced bicondylar fracture of unspecified tibia, sequela
S82.144D	Nondisplaced bicondylar fracture of right tibia, subsequent encounter for closed fracture with routine healing
S82.144E	Nondisplaced bicondylar fracture of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.144F	Nondisplaced bicondylar fracture of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.144G	Nondisplaced bicondylar fracture of right tibia, subsequent encounter for closed fracture with delayed healing
S82.144H	Nondisplaced bicondylar fracture of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.144J	Nondisplaced bicondylar fracture of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.144S	Nondisplaced bicondylar fracture of right tibia, sequela
S82.145D	Nondisplaced bicondylar fracture of left tibia, subsequent encounter for closed fracture with routine healing
S82.145E	Nondisplaced bicondylar fracture of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.145F	Nondisplaced bicondylar fracture of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.145G	Nondisplaced bicondylar fracture of left tibia, subsequent encounter for closed fracture with delayed healing
S82.145H	Nondisplaced bicondylar fracture of left tibia, subsequent encounter for open fracture type I or II with delayed healing

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Code	Description
S82.145J	Nondisplaced bicondylar fracture of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.145S	Nondisplaced bicondylar fracture of left tibia, sequela
S82.146D	Nondisplaced bicondylar fracture of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.146E	Nondisplaced bicondylar fracture of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.146F	Nondisplaced bicondylar fracture of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.146G	Nondisplaced bicondylar fracture of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.146H	Nondisplaced bicondylar fracture of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.146J	Nondisplaced bicondylar fracture of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.146S	Nondisplaced bicondylar fracture of unspecified tibia, sequela
S82.151D	Displaced fracture of right tibial tuberosity, subsequent encounter for closed fracture with routine healing
S82.151E	Displaced fracture of right tibial tuberosity, subsequent encounter for open fracture type I or II with routine healing
S82.151F	Displaced fracture of right tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.151G	Displaced fracture of right tibial tuberosity, subsequent encounter for closed fracture with delayed healing
S82.151H	Displaced fracture of right tibial tuberosity, subsequent encounter for open fracture type I or II with delayed healing
S82.151J	Displaced fracture of right tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.151S	Displaced fracture of right tibial tuberosity, sequela
S82.152D	Displaced fracture of left tibial tuberosity, subsequent encounter for closed fracture with routine healing
S82.152E	Displaced fracture of left tibial tuberosity, subsequent encounter for open fracture type I or II with routine healing
S82.152F	Displaced fracture of left tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



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Code	Description
S82.152G	Displaced fracture of left tibial tuberosity, subsequent encounter for closed fracture with delayed healing
S82.152H	Displaced fracture of left tibial tuberosity, subsequent encounter for open fracture type I or II with delayed healing
S82.152J	Displaced fracture of left tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.152S	Displaced fracture of left tibial tuberosity, sequela
S82.153D	Displaced fracture of unspecified tibial tuberosity, subsequent encounter for closed fracture with routine healing
S82.153E	Displaced fracture of unspecified tibial tuberosity, subsequent encounter for open fracture type I or II with routine healing
S82.153F	Displaced fracture of unspecified tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.153G	Displaced fracture of unspecified tibial tuberosity, subsequent encounter for closed fracture with delayed healing
S82.153H	Displaced fracture of unspecified tibial tuberosity, subsequent encounter for open fracture type I or II with delayed healing
S82.153J	Displaced fracture of unspecified tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.153S	Displaced fracture of unspecified tibial tuberosity, sequela
S82.154D	Nondisplaced fracture of right tibial tuberosity, subsequent encounter for closed fracture with routine healing
S82.154E	Nondisplaced fracture of right tibial tuberosity, subsequent encounter for open fracture type I or II with routine healing
S82.154F	Nondisplaced fracture of right tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.154G	Nondisplaced fracture of right tibial tuberosity, subsequent encounter for closed fracture with delayed healing
S82.154H	Nondisplaced fracture of right tibial tuberosity, subsequent encounter for open fracture type I or II with delayed healing
S82.154J	Nondisplaced fracture of right tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.154S	Nondisplaced fracture of right tibial tuberosity, sequela
S82.155D	Nondisplaced fracture of left tibial tuberosity, subsequent encounter for closed fracture with routine healing



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Code	Description
S82.155E	Nondisplaced fracture of left tibial tuberosity, subsequent encounter for open fracture type I or II with routine healing
S82.155F	Nondisplaced fracture of left tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.155G	Nondisplaced fracture of left tibial tuberosity, subsequent encounter for closed fracture with delayed healing
S82.155H	Nondisplaced fracture of left tibial tuberosity, subsequent encounter for open fracture type I or II with delayed healing
S82.155J	Nondisplaced fracture of left tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.155S	Nondisplaced fracture of left tibial tuberosity, sequela
S82.156D	Nondisplaced fracture of unspecified tibial tuberosity, subsequent encounter for closed fracture with routine healing
S82.156E	Nondisplaced fracture of unspecified tibial tuberosity, subsequent encounter for open fracture type I or II with routine healing
S82.156F	Nondisplaced fracture of unspecified tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.156G	Nondisplaced fracture of unspecified tibial tuberosity, subsequent encounter for closed fracture with delayed healing
S82.156H	Nondisplaced fracture of unspecified tibial tuberosity, subsequent encounter for open fracture type I or II with delayed healing
S82.156J	Nondisplaced fracture of unspecified tibial tuberosity, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.156S	Nondisplaced fracture of unspecified tibial tuberosity, sequela
S82.161D	Torus fracture of upper end of right tibia, subsequent encounter for fracture with routine healing
S82.161G	Torus fracture of upper end of right tibia, subsequent encounter for fracture with delayed healing
S82.161S	Torus fracture of upper end of right tibia, sequela
S82.162D	Torus fracture of upper end of left tibia, subsequent encounter for fracture with routine healing
S82.162G	Torus fracture of upper end of left tibia, subsequent encounter for fracture with delayed healing
S82.162S	Torus fracture of upper end of left tibia, sequela
S82.169D	Torus fracture of upper end of unspecified tibia, subsequent encounter for fracture with routine healing

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Code	Description
S82.169G	Torus fracture of upper end of unspecified tibia, subsequent encounter for fracture with delayed healing
S82.169S	Torus fracture of upper end of unspecified tibia, sequela
S82.191D	Other fracture of upper end of right tibia, subsequent encounter for closed fracture with routine healing
S82.191E	Other fracture of upper end of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.191F	Other fracture of upper end of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.191G	Other fracture of upper end of right tibia, subsequent encounter for closed fracture with delayed healing
S82.191H	Other fracture of upper end of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.191J	Other fracture of upper end of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.191S	Other fracture of upper end of right tibia, sequela
S82.192D	Other fracture of upper end of left tibia, subsequent encounter for closed fracture with routine healing
S82.192E	Other fracture of upper end of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.192F	Other fracture of upper end of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.192G	Other fracture of upper end of left tibia, subsequent encounter for closed fracture with delayed healing
S82.192H	Other fracture of upper end of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.192J	Other fracture of upper end of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.192S	Other fracture of upper end of left tibia, sequela
S82.199D	Other fracture of upper end of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.199E	Other fracture of upper end of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.199F	Other fracture of upper end of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



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Code	Description
S82.199G	Other fracture of upper end of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.199H	Other fracture of upper end of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.199J	Other fracture of upper end of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.199S	Other fracture of upper end of unspecified tibia, sequela
S82.201D	Unspecified fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.201E	Unspecified fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.201F	Unspecified fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.201G	Unspecified fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.201H	Unspecified fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.201J	Unspecified fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.201S	Unspecified fracture of shaft of right tibia, sequela
S82.202D	Unspecified fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.202E	Unspecified fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.202F	Unspecified fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.202G	Unspecified fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.202H	Unspecified fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.202J	Unspecified fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.202S	Unspecified fracture of shaft of left tibia, sequela
S82.209D	Unspecified fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing



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Code	Description
S82.209E	Unspecified fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.209F	Unspecified fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.209G	Unspecified fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.209H	Unspecified fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.209J	Unspecified fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.209S	Unspecified fracture of shaft of unspecified tibia, sequela
S82.221D	Displaced transverse fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.221E	Displaced transverse fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.221F	Displaced transverse fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.221G	Displaced transverse fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.221H	Displaced transverse fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.221J	Displaced transverse fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.221S	Displaced transverse fracture of shaft of right tibia, sequela
S82.222D	Displaced transverse fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.222E	Displaced transverse fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.222F	Displaced transverse fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.222G	Displaced transverse fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.222H	Displaced transverse fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.222J	Displaced transverse fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



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Code	Description
S82.222S	Displaced transverse fracture of shaft of left tibia, sequela
S82.223D	Displaced transverse fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.223E	Displaced transverse fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.223F	Displaced transverse fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.223G	Displaced transverse fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.223H	Displaced transverse fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.223J	Displaced transverse fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.223S	Displaced transverse fracture of shaft of unspecified tibia, sequela
S82.224D	Nondisplaced transverse fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.224E	Nondisplaced transverse fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.224F	Nondisplaced transverse fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.224G	Nondisplaced transverse fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.224H	Nondisplaced transverse fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.224J	Nondisplaced transverse fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.224S	Nondisplaced transverse fracture of shaft of right tibia, sequela
S82.225D	Nondisplaced transverse fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.225E	Nondisplaced transverse fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.225F	Nondisplaced transverse fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.225G	Nondisplaced transverse fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing



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Code	Description
S82.225H	Nondisplaced transverse fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.225J	Nondisplaced transverse fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.225S	Nondisplaced transverse fracture of shaft of left tibia, sequela
S82.226D	Nondisplaced transverse fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.226E	Nondisplaced transverse fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.226F	Nondisplaced transverse fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.226G	Nondisplaced transverse fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.226H	Nondisplaced transverse fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.226J	Nondisplaced transverse fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.226S	Nondisplaced transverse fracture of shaft of unspecified tibia, sequela
S82.231D	Displaced oblique fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.231E	Displaced oblique fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.231F	Displaced oblique fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.231G	Displaced oblique fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.231H	Displaced oblique fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.231J	Displaced oblique fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.231S	Displaced oblique fracture of shaft of right tibia, sequela
S82.232D	Displaced oblique fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.232E	Displaced oblique fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing



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Code	Description
S82.232F	Displaced oblique fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.232G	Displaced oblique fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.232H	Displaced oblique fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.232J	Displaced oblique fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.232S	Displaced oblique fracture of shaft of left tibia, sequela
S82.233D	Displaced oblique fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.233E	Displaced oblique fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.233F	Displaced oblique fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.233G	Displaced oblique fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.233H	Displaced oblique fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.233J	Displaced oblique fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.233S	Displaced oblique fracture of shaft of unspecified tibia, sequela
S82.234D	Nondisplaced oblique fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.234E	Nondisplaced oblique fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.234F	Nondisplaced oblique fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.234G	Nondisplaced oblique fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.234H	Nondisplaced oblique fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.234J	Nondisplaced oblique fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.234S	Nondisplaced oblique fracture of shaft of right tibia, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.235D	Nondisplaced oblique fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.235E	Nondisplaced oblique fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.235F	Nondisplaced oblique fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.235G	Nondisplaced oblique fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.235H	Nondisplaced oblique fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.235J	Nondisplaced oblique fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.235S	Nondisplaced oblique fracture of shaft of left tibia, sequela
S82.236D	Nondisplaced oblique fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.236E	Nondisplaced oblique fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.236F	Nondisplaced oblique fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.236G	Nondisplaced oblique fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.236H	Nondisplaced oblique fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.236J	Nondisplaced oblique fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.236S	Nondisplaced oblique fracture of shaft of unspecified tibia, sequela
S82.241D	Displaced spiral fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.241E	Displaced spiral fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.241F	Displaced spiral fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.241G	Displaced spiral fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.241H	Displaced spiral fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.241J	Displaced spiral fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.241S	Displaced spiral fracture of shaft of right tibia, sequela
S82.242D	Displaced spiral fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.242E	Displaced spiral fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.242F	Displaced spiral fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.242G	Displaced spiral fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.242H	Displaced spiral fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.242J	Displaced spiral fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.242S	Displaced spiral fracture of shaft of left tibia, sequela
S82.243D	Displaced spiral fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.243E	Displaced spiral fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.243F	Displaced spiral fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.243G	Displaced spiral fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.243H	Displaced spiral fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.243J	Displaced spiral fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.243S	Displaced spiral fracture of shaft of unspecified tibia, sequela
S82.244D	Nondisplaced spiral fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.244E	Nondisplaced spiral fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.244F	Nondisplaced spiral fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.244G	Nondisplaced spiral fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.244H	Nondisplaced spiral fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.244J	Nondisplaced spiral fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.244S	Nondisplaced spiral fracture of shaft of right tibia, sequela
S82.245D	Nondisplaced spiral fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.245E	Nondisplaced spiral fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.245F	Nondisplaced spiral fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.245G	Nondisplaced spiral fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.245H	Nondisplaced spiral fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.245J	Nondisplaced spiral fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.245S	Nondisplaced spiral fracture of shaft of left tibia, sequela
S82.246D	Nondisplaced spiral fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.246E	Nondisplaced spiral fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.246F	Nondisplaced spiral fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.246G	Nondisplaced spiral fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.246H	Nondisplaced spiral fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.246J	Nondisplaced spiral fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.246S	Nondisplaced spiral fracture of shaft of unspecified tibia, sequela
S82.251D	Displaced comminuted fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.251E	Displaced comminuted fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.251F	Displaced comminuted fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.251G	Displaced comminuted fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.251H	Displaced comminuted fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.251J	Displaced comminuted fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.251S	Displaced comminuted fracture of shaft of right tibia, sequela
S82.252D	Displaced comminuted fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.252E	Displaced comminuted fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.252F	Displaced comminuted fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.252G	Displaced comminuted fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.252H	Displaced comminuted fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.252J	Displaced comminuted fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.252S	Displaced comminuted fracture of shaft of left tibia, sequela
S82.253D	Displaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.253E	Displaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.253F	Displaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.253G	Displaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.253H	Displaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.253J	Displaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.253S	Displaced comminuted fracture of shaft of unspecified tibia, sequela
S82.254D	Nondisplaced comminuted fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.254E	Nondisplaced comminuted fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.254F	Nondisplaced comminuted fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.254G	Nondisplaced comminuted fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.254H	Nondisplaced comminuted fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.254J	Nondisplaced comminuted fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.254S	Nondisplaced comminuted fracture of shaft of right tibia, sequela
S82.255D	Nondisplaced comminuted fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.255E	Nondisplaced comminuted fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.255F	Nondisplaced comminuted fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.255G	Nondisplaced comminuted fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.255H	Nondisplaced comminuted fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.255J	Nondisplaced comminuted fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.255S	Nondisplaced comminuted fracture of shaft of left tibia, sequela
S82.256D	Nondisplaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.256E	Nondisplaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.256F	Nondisplaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.256G	Nondisplaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.256H	Nondisplaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.256J	Nondisplaced comminuted fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.256S	Nondisplaced comminuted fracture of shaft of unspecified tibia, sequela
S82.261D	Displaced segmental fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.261E	Displaced segmental fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.261F	Displaced segmental fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.261G	Displaced segmental fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.261H	Displaced segmental fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.261J	Displaced segmental fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.261S	Displaced segmental fracture of shaft of right tibia, sequela
S82.262D	Displaced segmental fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.262E	Displaced segmental fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.262F	Displaced segmental fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.262G	Displaced segmental fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.262H	Displaced segmental fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.262J	Displaced segmental fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.262S	Displaced segmental fracture of shaft of left tibia, sequela
S82.263D	Displaced segmental fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.263E	Displaced segmental fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.263F	Displaced segmental fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.263G	Displaced segmental fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.263H	Displaced segmental fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.263J	Displaced segmental fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.263S	Displaced segmental fracture of shaft of unspecified tibia, sequela
S82.264D	Nondisplaced segmental fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.264E	Nondisplaced segmental fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.264F	Nondisplaced segmental fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.264G	Nondisplaced segmental fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.264H	Nondisplaced segmental fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.264J	Nondisplaced segmental fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.264S	Nondisplaced segmental fracture of shaft of right tibia, sequela
S82.265D	Nondisplaced segmental fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.265E	Nondisplaced segmental fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.265F	Nondisplaced segmental fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.265G	Nondisplaced segmental fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.265H	Nondisplaced segmental fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.265J	Nondisplaced segmental fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.265S	Nondisplaced segmental fracture of shaft of left tibia, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.266D	Nondisplaced segmental fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.266E	Nondisplaced segmental fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.266F	Nondisplaced segmental fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.266G	Nondisplaced segmental fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.266H	Nondisplaced segmental fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.266J	Nondisplaced segmental fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.266S	Nondisplaced segmental fracture of shaft of unspecified tibia, sequela
S82.291D	Other fracture of shaft of right tibia, subsequent encounter for closed fracture with routine healing
S82.291E	Other fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.291F	Other fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.291G	Other fracture of shaft of right tibia, subsequent encounter for closed fracture with delayed healing
S82.291H	Other fracture of shaft of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.291J	Other fracture of shaft of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.291S	Other fracture of shaft of right tibia, sequela
S82.292D	Other fracture of shaft of left tibia, subsequent encounter for closed fracture with routine healing
S82.292E	Other fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.292F	Other fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.292G	Other fracture of shaft of left tibia, subsequent encounter for closed fracture with delayed healing
S82.292H	Other fracture of shaft of left tibia, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.292J	Other fracture of shaft of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.292S	Other fracture of shaft of left tibia, sequela
S82.299D	Other fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.299E	Other fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.299F	Other fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.299G	Other fracture of shaft of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.299H	Other fracture of shaft of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.299J	Other fracture of shaft of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.299S	Other fracture of shaft of unspecified tibia, sequela
S82.301D	Unspecified fracture of lower end of right tibia, subsequent encounter for closed fracture with routine healing
S82.301E	Unspecified fracture of lower end of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.301F	Unspecified fracture of lower end of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.301G	Unspecified fracture of lower end of right tibia, subsequent encounter for closed fracture with delayed healing
S82.301H	Unspecified fracture of lower end of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.301J	Unspecified fracture of lower end of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.301S	Unspecified fracture of lower end of right tibia, sequela
S82.302D	Unspecified fracture of lower end of left tibia, subsequent encounter for closed fracture with routine healing
S82.302E	Unspecified fracture of lower end of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.302F	Unspecified fracture of lower end of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.302G	Unspecified fracture of lower end of left tibia, subsequent encounter for closed fracture with delayed healing
S82.302H	Unspecified fracture of lower end of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.302J	Unspecified fracture of lower end of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.302S	Unspecified fracture of lower end of left tibia, sequela
S82.309D	Unspecified fracture of lower end of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.309E	Unspecified fracture of lower end of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.309F	Unspecified fracture of lower end of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.309G	Unspecified fracture of lower end of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.309H	Unspecified fracture of lower end of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.309J	Unspecified fracture of lower end of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.309S	Unspecified fracture of lower end of unspecified tibia, sequela
S82.311D	Torus fracture of lower end of right tibia, subsequent encounter for fracture with routine healing
S82.311G	Torus fracture of lower end of right tibia, subsequent encounter for fracture with delayed healing
S82.311S	Torus fracture of lower end of right tibia, sequela
S82.312D	Torus fracture of lower end of left tibia, subsequent encounter for fracture with routine healing
S82.312G	Torus fracture of lower end of left tibia, subsequent encounter for fracture with delayed healing
S82.312S	Torus fracture of lower end of left tibia, sequela
S82.319D	Torus fracture of lower end of unspecified tibia, subsequent encounter for fracture with routine healing
S82.319G	Torus fracture of lower end of unspecified tibia, subsequent encounter for fracture with delayed healing
S82.319S	Torus fracture of lower end of unspecified tibia, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.391D	Other fracture of lower end of right tibia, subsequent encounter for closed fracture with routine healing
S82.391E	Other fracture of lower end of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.391F	Other fracture of lower end of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.391G	Other fracture of lower end of right tibia, subsequent encounter for closed fracture with delayed healing
S82.391H	Other fracture of lower end of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.391J	Other fracture of lower end of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.391S	Other fracture of lower end of right tibia, sequela
S82.392D	Other fracture of lower end of left tibia, subsequent encounter for closed fracture with routine healing
S82.392E	Other fracture of lower end of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.392F	Other fracture of lower end of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.392G	Other fracture of lower end of left tibia, subsequent encounter for closed fracture with delayed healing
S82.392H	Other fracture of lower end of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.392J	Other fracture of lower end of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.392S	Other fracture of lower end of left tibia, sequela
S82.399D	Other fracture of lower end of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.399E	Other fracture of lower end of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.399F	Other fracture of lower end of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.399G	Other fracture of lower end of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.399H	Other fracture of lower end of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.399J	Other fracture of lower end of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.399S	Other fracture of lower end of unspecified tibia, sequela
S82.401D	Unspecified fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.401E	Unspecified fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.401F	Unspecified fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.401G	Unspecified fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.401H	Unspecified fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.401J	Unspecified fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.401S	Unspecified fracture of shaft of right fibula, sequela
S82.402D	Unspecified fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.402E	Unspecified fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.402F	Unspecified fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.402G	Unspecified fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.402H	Unspecified fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.402J	Unspecified fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.402S	Unspecified fracture of shaft of left fibula, sequela
S82.409D	Unspecified fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.409E	Unspecified fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.409F	Unspecified fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.409G	Unspecified fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.409H	Unspecified fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.409J	Unspecified fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.409S	Unspecified fracture of shaft of unspecified fibula, sequela
S82.421D	Displaced transverse fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.421E	Displaced transverse fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.421F	Displaced transverse fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.421G	Displaced transverse fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.421H	Displaced transverse fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.421J	Displaced transverse fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.421S	Displaced transverse fracture of shaft of right fibula, sequela
S82.422D	Displaced transverse fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.422E	Displaced transverse fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.422F	Displaced transverse fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.422G	Displaced transverse fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.422H	Displaced transverse fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.422J	Displaced transverse fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.422S	Displaced transverse fracture of shaft of left fibula, sequela
S82.423D	Displaced transverse fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.423E	Displaced transverse fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.423F	Displaced transverse fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.423G	Displaced transverse fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.423H	Displaced transverse fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.423J	Displaced transverse fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.423S	Displaced transverse fracture of shaft of unspecified fibula, sequela
S82.424D	Nondisplaced transverse fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.424E	Nondisplaced transverse fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.424F	Nondisplaced transverse fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.424G	Nondisplaced transverse fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.424H	Nondisplaced transverse fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.424J	Nondisplaced transverse fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.424S	Nondisplaced transverse fracture of shaft of right fibula, sequela
S82.425D	Nondisplaced transverse fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.425E	Nondisplaced transverse fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.425F	Nondisplaced transverse fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.425G	Nondisplaced transverse fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.425H	Nondisplaced transverse fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.425J	Nondisplaced transverse fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.425S	Nondisplaced transverse fracture of shaft of left fibula, sequela
S82.426D	Nondisplaced transverse fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.426E	Nondisplaced transverse fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.426F	Nondisplaced transverse fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.426G	Nondisplaced transverse fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.426H	Nondisplaced transverse fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.426J	Nondisplaced transverse fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.426S	Nondisplaced transverse fracture of shaft of unspecified fibula, sequela
S82.431D	Displaced oblique fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.431E	Displaced oblique fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.431F	Displaced oblique fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.431G	Displaced oblique fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.431H	Displaced oblique fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.431J	Displaced oblique fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.431S	Displaced oblique fracture of shaft of right fibula, sequela
S82.432D	Displaced oblique fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.432E	Displaced oblique fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.432F	Displaced oblique fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.432G	Displaced oblique fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.432H	Displaced oblique fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.432J	Displaced oblique fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.432S	Displaced oblique fracture of shaft of left fibula, sequela
S82.433D	Displaced oblique fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.433E	Displaced oblique fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.433F	Displaced oblique fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.433G	Displaced oblique fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.433H	Displaced oblique fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.433J	Displaced oblique fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.433S	Displaced oblique fracture of shaft of unspecified fibula, sequela
S82.434D	Nondisplaced oblique fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.434E	Nondisplaced oblique fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.434F	Nondisplaced oblique fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.434G	Nondisplaced oblique fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.434H	Nondisplaced oblique fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.434J	Nondisplaced oblique fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.434S	Nondisplaced oblique fracture of shaft of right fibula, sequela
S82.435D	Nondisplaced oblique fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.435E	Nondisplaced oblique fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.435F	Nondisplaced oblique fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.435G	Nondisplaced oblique fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.435H	Nondisplaced oblique fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.435J	Nondisplaced oblique fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.435S	Nondisplaced oblique fracture of shaft of left fibula, sequela
S82.436D	Nondisplaced oblique fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.436E	Nondisplaced oblique fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.436F	Nondisplaced oblique fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.436G	Nondisplaced oblique fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.436H	Nondisplaced oblique fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.436J	Nondisplaced oblique fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.436S	Nondisplaced oblique fracture of shaft of unspecified fibula, sequela
S82.441D	Displaced spiral fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.441E	Displaced spiral fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.441F	Displaced spiral fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.441G	Displaced spiral fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.441H	Displaced spiral fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.441J	Displaced spiral fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.441S	Displaced spiral fracture of shaft of right fibula, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.442D	Displaced spiral fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.442E	Displaced spiral fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.442F	Displaced spiral fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.442G	Displaced spiral fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.442H	Displaced spiral fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.442J	Displaced spiral fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.442S	Displaced spiral fracture of shaft of left fibula, sequela
S82.443D	Displaced spiral fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.443E	Displaced spiral fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.443F	Displaced spiral fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.443G	Displaced spiral fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.443H	Displaced spiral fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.443J	Displaced spiral fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.443S	Displaced spiral fracture of shaft of unspecified fibula, sequela
S82.444D	Nondisplaced spiral fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.444E	Nondisplaced spiral fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.444F	Nondisplaced spiral fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.444G	Nondisplaced spiral fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.444H	Nondisplaced spiral fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.444J	Nondisplaced spiral fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.444S	Nondisplaced spiral fracture of shaft of right fibula, sequela
S82.445D	Nondisplaced spiral fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.445E	Nondisplaced spiral fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.445F	Nondisplaced spiral fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.445G	Nondisplaced spiral fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.445H	Nondisplaced spiral fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.445J	Nondisplaced spiral fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.445S	Nondisplaced spiral fracture of shaft of left fibula, sequela
S82.446D	Nondisplaced spiral fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.446E	Nondisplaced spiral fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.446F	Nondisplaced spiral fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.446G	Nondisplaced spiral fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.446H	Nondisplaced spiral fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.446J	Nondisplaced spiral fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.446S	Nondisplaced spiral fracture of shaft of unspecified fibula, sequela
S82.451D	Displaced comminuted fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.451E	Displaced comminuted fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.451F	Displaced comminuted fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.451G	Displaced comminuted fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.451H	Displaced comminuted fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.451J	Displaced comminuted fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.451S	Displaced comminuted fracture of shaft of right fibula, sequela
S82.452D	Displaced comminuted fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.452E	Displaced comminuted fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.452F	Displaced comminuted fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.452G	Displaced comminuted fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.452H	Displaced comminuted fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.452J	Displaced comminuted fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.452S	Displaced comminuted fracture of shaft of left fibula, sequela
S82.453D	Displaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.453E	Displaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.453F	Displaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.453G	Displaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.453H	Displaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.453J	Displaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.453S	Displaced comminuted fracture of shaft of unspecified fibula, sequela
S82.454D	Nondisplaced comminuted fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.454E	Nondisplaced comminuted fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.454F	Nondisplaced comminuted fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.454G	Nondisplaced comminuted fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.454H	Nondisplaced comminuted fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.454J	Nondisplaced comminuted fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.454S	Nondisplaced comminuted fracture of shaft of right fibula, sequela
S82.455D	Nondisplaced comminuted fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.455E	Nondisplaced comminuted fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.455F	Nondisplaced comminuted fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.455G	Nondisplaced comminuted fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.455H	Nondisplaced comminuted fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.455J	Nondisplaced comminuted fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.455S	Nondisplaced comminuted fracture of shaft of left fibula, sequela
S82.456D	Nondisplaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.456E	Nondisplaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.456F	Nondisplaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.456G	Nondisplaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.456H	Nondisplaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.456J	Nondisplaced comminuted fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.456S	Nondisplaced comminuted fracture of shaft of unspecified fibula, sequela
S82.461D	Displaced segmental fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.461E	Displaced segmental fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.461F	Displaced segmental fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.461G	Displaced segmental fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.461H	Displaced segmental fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.461J	Displaced segmental fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.461S	Displaced segmental fracture of shaft of right fibula, sequela
S82.462D	Displaced segmental fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.462E	Displaced segmental fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.462F	Displaced segmental fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.462G	Displaced segmental fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.462H	Displaced segmental fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.462J	Displaced segmental fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.462S	Displaced segmental fracture of shaft of left fibula, sequela
S82.463D	Displaced segmental fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.463E	Displaced segmental fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.463F	Displaced segmental fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.463G	Displaced segmental fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.463H	Displaced segmental fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.463J	Displaced segmental fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.463S	Displaced segmental fracture of shaft of unspecified fibula, sequela
S82.464D	Nondisplaced segmental fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.464E	Nondisplaced segmental fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.464F	Nondisplaced segmental fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.464G	Nondisplaced segmental fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.464H	Nondisplaced segmental fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.464J	Nondisplaced segmental fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.464S	Nondisplaced segmental fracture of shaft of right fibula, sequela
S82.465D	Nondisplaced segmental fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.465E	Nondisplaced segmental fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.465F	Nondisplaced segmental fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.465G	Nondisplaced segmental fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.465H	Nondisplaced segmental fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.465J	Nondisplaced segmental fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.465S	Nondisplaced segmental fracture of shaft of left fibula, sequela
S82.466D	Nondisplaced segmental fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.466E	Nondisplaced segmental fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.466F	Nondisplaced segmental fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.466G	Nondisplaced segmental fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.466H	Nondisplaced segmental fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.466J	Nondisplaced segmental fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.466S	Nondisplaced segmental fracture of shaft of unspecified fibula, sequela
S82.491D	Other fracture of shaft of right fibula, subsequent encounter for closed fracture with routine healing
S82.491E	Other fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.491F	Other fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.491G	Other fracture of shaft of right fibula, subsequent encounter for closed fracture with delayed healing
S82.491H	Other fracture of shaft of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.491J	Other fracture of shaft of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.491S	Other fracture of shaft of right fibula, sequela
S82.492D	Other fracture of shaft of left fibula, subsequent encounter for closed fracture with routine healing
S82.492E	Other fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.492F	Other fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.492G	Other fracture of shaft of left fibula, subsequent encounter for closed fracture with delayed healing
S82.492H	Other fracture of shaft of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.492J	Other fracture of shaft of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.492S	Other fracture of shaft of left fibula, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.499D	Other fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.499E	Other fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.499F	Other fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.499G	Other fracture of shaft of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.499H	Other fracture of shaft of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.499J	Other fracture of shaft of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.499S	Other fracture of shaft of unspecified fibula, sequela
S82.51XD	Displaced fracture of medial malleolus of right tibia, subsequent encounter for closed fracture with routine healing
S82.51XE	Displaced fracture of medial malleolus of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.51XF	Displaced fracture of medial malleolus of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.51XG	Displaced fracture of medial malleolus of right tibia, subsequent encounter for closed fracture with delayed healing
S82.51XH	Displaced fracture of medial malleolus of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.51XJ	Displaced fracture of medial malleolus of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.51XS	Displaced fracture of medial malleolus of right tibia, sequela
S82.52XD	Displaced fracture of medial malleolus of left tibia, subsequent encounter for closed fracture with routine healing
S82.52XE	Displaced fracture of medial malleolus of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.52XF	Displaced fracture of medial malleolus of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.52XG	Displaced fracture of medial malleolus of left tibia, subsequent encounter for closed fracture with delayed healing
S82.52XH	Displaced fracture of medial malleolus of left tibia, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.52XJ	Displaced fracture of medial malleolus of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.52XS	Displaced fracture of medial malleolus of left tibia, sequela
S82.53XD	Displaced fracture of medial malleolus of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.53XE	Displaced fracture of medial malleolus of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.53XF	Displaced fracture of medial malleolus of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.53XG	Displaced fracture of medial malleolus of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.53XH	Displaced fracture of medial malleolus of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.53XJ	Displaced fracture of medial malleolus of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.53XS	Displaced fracture of medial malleolus of unspecified tibia, sequela
S82.54XD	Nondisplaced fracture of medial malleolus of right tibia, subsequent encounter for closed fracture with routine healing
S82.54XE	Nondisplaced fracture of medial malleolus of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.54XF	Nondisplaced fracture of medial malleolus of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.54XG	Nondisplaced fracture of medial malleolus of right tibia, subsequent encounter for closed fracture with delayed healing
S82.54XH	Nondisplaced fracture of medial malleolus of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.54XJ	Nondisplaced fracture of medial malleolus of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.54XS	Nondisplaced fracture of medial malleolus of right tibia, sequela
S82.55XD	Nondisplaced fracture of medial malleolus of left tibia, subsequent encounter for closed fracture with routine healing
S82.55XE	Nondisplaced fracture of medial malleolus of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.55XF	Nondisplaced fracture of medial malleolus of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.55XG	Nondisplaced fracture of medial malleolus of left tibia, subsequent encounter for closed fracture with delayed healing
S82.55XH	Nondisplaced fracture of medial malleolus of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.55XJ	Nondisplaced fracture of medial malleolus of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.55XS	Nondisplaced fracture of medial malleolus of left tibia, sequela
S82.56XD	Nondisplaced fracture of medial malleolus of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.56XE	Nondisplaced fracture of medial malleolus of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.56XF	Nondisplaced fracture of medial malleolus of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.56XG	Nondisplaced fracture of medial malleolus of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.56XH	Nondisplaced fracture of medial malleolus of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.56XJ	Nondisplaced fracture of medial malleolus of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.56XS	Nondisplaced fracture of medial malleolus of unspecified tibia, sequela
S82.61XD	Displaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with routine healing
S82.61XE	Displaced fracture of lateral malleolus of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.61XF	Displaced fracture of lateral malleolus of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.61XG	Displaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with delayed healing
S82.61XH	Displaced fracture of lateral malleolus of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.61XJ	Displaced fracture of lateral malleolus of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.61XS	Displaced fracture of lateral malleolus of right fibula, sequela
S82.62XD	Displaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.62XE	Displaced fracture of lateral malleolus of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.62XF	Displaced fracture of lateral malleolus of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.62XG	Displaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with delayed healing
S82.62XH	Displaced fracture of lateral malleolus of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.62XJ	Displaced fracture of lateral malleolus of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.62XS	Displaced fracture of lateral malleolus of left fibula, sequela
S82.63XD	Displaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.63XE	Displaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.63XF	Displaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.63XG	Displaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.63XH	Displaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.63XJ	Displaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.63XS	Displaced fracture of lateral malleolus of unspecified fibula, sequela
S82.64XD	Nondisplaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with routine healing
S82.64XE	Nondisplaced fracture of lateral malleolus of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.64XF	Nondisplaced fracture of lateral malleolus of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.64XG	Nondisplaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with delayed healing
S82.64XH	Nondisplaced fracture of lateral malleolus of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.64XJ	Nondisplaced fracture of lateral malleolus of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.64XS	Nondisplaced fracture of lateral malleolus of right fibula, sequela
S82.65XD	Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with routine healing
S82.65XE	Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.65XF	Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.65XG	Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with delayed healing
S82.65XH	Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.65XJ	Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.65XS	Nondisplaced fracture of lateral malleolus of left fibula, sequela
S82.66XD	Nondisplaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.66XE	Nondisplaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.66XF	Nondisplaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.66XG	Nondisplaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.66XH	Nondisplaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.66XJ	Nondisplaced fracture of lateral malleolus of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.66XS	Nondisplaced fracture of lateral malleolus of unspecified fibula, sequela
S82.811D	Torus fracture of upper end of right fibula, subsequent encounter for fracture with routine healing
S82.811G	Torus fracture of upper end of right fibula, subsequent encounter for fracture with delayed healing
S82.811S	Torus fracture of upper end of right fibula, sequela
S82.812D	Torus fracture of upper end of left fibula, subsequent encounter for fracture with routine healing
S82.812G	Torus fracture of upper end of left fibula, subsequent encounter for fracture with delayed healing

NCD 190.15

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.812S	Torus fracture of upper end of left fibula, sequela
S82.819D	Torus fracture of upper end of unspecified fibula, subsequent encounter for fracture with routine healing
S82.819G	Torus fracture of upper end of unspecified fibula, subsequent encounter for fracture with delayed healing
S82.819S	Torus fracture of upper end of unspecified fibula, sequela
S82.821D	Torus fracture of lower end of right fibula, subsequent encounter for fracture with routine healing
S82.821G	Torus fracture of lower end of right fibula, subsequent encounter for fracture with delayed healing
S82.821S	Torus fracture of lower end of right fibula, sequela
S82.822D	Torus fracture of lower end of left fibula, subsequent encounter for fracture with routine healing
S82.822G	Torus fracture of lower end of left fibula, subsequent encounter for fracture with delayed healing
S82.822S	Torus fracture of lower end of left fibula, sequela
S82.829D	Torus fracture of lower end of unspecified fibula, subsequent encounter for fracture with routine healing
S82.829G	Torus fracture of lower end of unspecified fibula, subsequent encounter for fracture with delayed healing
S82.829S	Torus fracture of lower end of unspecified fibula, sequela
S82.831D	Other fracture of upper and lower end of right fibula, subsequent encounter for closed fracture with routine healing
S82.831E	Other fracture of upper and lower end of right fibula, subsequent encounter for open fracture type I or II with routine healing
S82.831F	Other fracture of upper and lower end of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.831G	Other fracture of upper and lower end of right fibula, subsequent encounter for closed fracture with delayed healing
S82.831H	Other fracture of upper and lower end of right fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.831J	Other fracture of upper and lower end of right fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.831S	Other fracture of upper and lower end of right fibula, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.832D	Other fracture of upper and lower end of left fibula, subsequent encounter for closed fracture with routine healing
S82.832E	Other fracture of upper and lower end of left fibula, subsequent encounter for open fracture type I or II with routine healing
S82.832F	Other fracture of upper and lower end of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.832G	Other fracture of upper and lower end of left fibula, subsequent encounter for closed fracture with delayed healing
S82.832H	Other fracture of upper and lower end of left fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.832J	Other fracture of upper and lower end of left fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.832S	Other fracture of upper and lower end of left fibula, sequela
S82.839D	Other fracture of upper and lower end of unspecified fibula, subsequent encounter for closed fracture with routine healing
S82.839E	Other fracture of upper and lower end of unspecified fibula, subsequent encounter for open fracture type I or II with routine healing
S82.839F	Other fracture of upper and lower end of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.839G	Other fracture of upper and lower end of unspecified fibula, subsequent encounter for closed fracture with delayed healing
S82.839H	Other fracture of upper and lower end of unspecified fibula, subsequent encounter for open fracture type I or II with delayed healing
S82.839J	Other fracture of upper and lower end of unspecified fibula, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.839S	Other fracture of upper and lower end of unspecified fibula, sequela
S82.841D	Displaced bimalleolar fracture of right lower leg, subsequent encounter for closed fracture with routine healing
S82.841E	Displaced bimalleolar fracture of right lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.841F	Displaced bimalleolar fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.841G	Displaced bimalleolar fracture of right lower leg, subsequent encounter for closed fracture with delayed healing
S82.841H	Displaced bimalleolar fracture of right lower leg, subsequent encounter for open fracture type I or II with delayed healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.841J	Displaced bimalleolar fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.841S	Displaced bimalleolar fracture of right lower leg, sequela
S82.842D	Displaced bimalleolar fracture of left lower leg, subsequent encounter for closed fracture with routine healing
S82.842E	Displaced bimalleolar fracture of left lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.842F	Displaced bimalleolar fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.842G	Displaced bimalleolar fracture of left lower leg, subsequent encounter for closed fracture with delayed healing
S82.842H	Displaced bimalleolar fracture of left lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.842J	Displaced bimalleolar fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.842S	Displaced bimalleolar fracture of left lower leg, sequela
S82.843D	Displaced bimalleolar fracture of unspecified lower leg, subsequent encounter for closed fracture with routine healing
S82.843E	Displaced bimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.843F	Displaced bimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.843G	Displaced bimalleolar fracture of unspecified lower leg, subsequent encounter for closed fracture with delayed healing
S82.843H	Displaced bimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.843J	Displaced bimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.843S	Displaced bimalleolar fracture of unspecified lower leg, sequela
S82.844D	Nondisplaced bimalleolar fracture of right lower leg, subsequent encounter for closed fracture with routine healing
S82.844E	Nondisplaced bimalleolar fracture of right lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.844F	Nondisplaced bimalleolar fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.844G	Nondisplaced bimalleolar fracture of right lower leg, subsequent encounter for closed fracture with delayed healing
S82.844H	Nondisplaced bimalleolar fracture of right lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.844J	Nondisplaced bimalleolar fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.844S	Nondisplaced bimalleolar fracture of right lower leg, sequela
S82.845D	Nondisplaced bimalleolar fracture of left lower leg, subsequent encounter for closed fracture with routine healing
S82.845E	Nondisplaced bimalleolar fracture of left lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.845F	Nondisplaced bimalleolar fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.845G	Nondisplaced bimalleolar fracture of left lower leg, subsequent encounter for closed fracture with delayed healing
S82.845H	Nondisplaced bimalleolar fracture of left lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.845J	Nondisplaced bimalleolar fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.845S	Nondisplaced bimalleolar fracture of left lower leg, sequela
S82.846D	Nondisplaced bimalleolar fracture of unspecified lower leg, subsequent encounter for closed fracture with routine healing
S82.846E	Nondisplaced bimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.846F	Nondisplaced bimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.846G	Nondisplaced bimalleolar fracture of unspecified lower leg, subsequent encounter for closed fracture with delayed healing
S82.846H	Nondisplaced bimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.846J	Nondisplaced bimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.846S	Nondisplaced bimalleolar fracture of unspecified lower leg, sequela
S82.851D	Displaced trimalleolar fracture of right lower leg, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.851E	Displaced trimalleolar fracture of right lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.851F	Displaced trimalleolar fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.851G	Displaced trimalleolar fracture of right lower leg, subsequent encounter for closed fracture with delayed healing
S82.851H	Displaced trimalleolar fracture of right lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.851J	Displaced trimalleolar fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.851S	Displaced trimalleolar fracture of right lower leg, sequela
S82.852D	Displaced trimalleolar fracture of left lower leg, subsequent encounter for closed fracture with routine healing
S82.852E	Displaced trimalleolar fracture of left lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.852F	Displaced trimalleolar fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.852G	Displaced trimalleolar fracture of left lower leg, subsequent encounter for closed fracture with delayed healing
S82.852H	Displaced trimalleolar fracture of left lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.852J	Displaced trimalleolar fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.852S	Displaced trimalleolar fracture of left lower leg, sequela
S82.853D	Displaced trimalleolar fracture of unspecified lower leg, subsequent encounter for closed fracture with routine healing
S82.853E	Displaced trimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.853F	Displaced trimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.853G	Displaced trimalleolar fracture of unspecified lower leg, subsequent encounter for closed fracture with delayed healing
S82.853H	Displaced trimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.853J	Displaced trimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.853S	Displaced trimalleolar fracture of unspecified lower leg, sequela
S82.854D	Nondisplaced trimalleolar fracture of right lower leg, subsequent encounter for closed fracture with routine healing
S82.854E	Nondisplaced trimalleolar fracture of right lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.854F	Nondisplaced trimalleolar fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.854G	Nondisplaced trimalleolar fracture of right lower leg, subsequent encounter for closed fracture with delayed healing
S82.854H	Nondisplaced trimalleolar fracture of right lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.854J	Nondisplaced trimalleolar fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.854S	Nondisplaced trimalleolar fracture of right lower leg, sequela
S82.855D	Nondisplaced trimalleolar fracture of left lower leg, subsequent encounter for closed fracture with routine healing
S82.855E	Nondisplaced trimalleolar fracture of left lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.855F	Nondisplaced trimalleolar fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.855G	Nondisplaced trimalleolar fracture of left lower leg, subsequent encounter for closed fracture with delayed healing
S82.855H	Nondisplaced trimalleolar fracture of left lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.855J	Nondisplaced trimalleolar fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.855S	Nondisplaced trimalleolar fracture of left lower leg, sequela
S82.856D	Nondisplaced trimalleolar fracture of unspecified lower leg, subsequent encounter for closed fracture with routine healing
S82.856E	Nondisplaced trimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.856F	Nondisplaced trimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.856G	Nondisplaced trimalleolar fracture of unspecified lower leg, subsequent encounter for closed fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.856H	Nondisplaced trimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.856J	Nondisplaced trimalleolar fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.856S	Nondisplaced trimalleolar fracture of unspecified lower leg, sequela
S82.861D	Displaced Maisonneuve's fracture of right leg, subsequent encounter for closed fracture with routine healing
S82.861E	Displaced Maisonneuve's fracture of right leg, subsequent encounter for open fracture type I or II with routine healing
S82.861F	Displaced Maisonneuve's fracture of right leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.861G	Displaced Maisonneuve's fracture of right leg, subsequent encounter for closed fracture with delayed healing
S82.861H	Displaced Maisonneuve's fracture of right leg, subsequent encounter for open fracture type I or II with delayed healing
S82.861J	Displaced Maisonneuve's fracture of right leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.861S	Displaced Maisonneuve's fracture of right leg, sequela
S82.862D	Displaced Maisonneuve's fracture of left leg, subsequent encounter for closed fracture with routine healing
S82.862E	Displaced Maisonneuve's fracture of left leg, subsequent encounter for open fracture type I or II with routine healing
S82.862F	Displaced Maisonneuve's fracture of left leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.862G	Displaced Maisonneuve's fracture of left leg, subsequent encounter for closed fracture with delayed healing
S82.862H	Displaced Maisonneuve's fracture of left leg, subsequent encounter for open fracture type I or II with delayed healing
S82.862J	Displaced Maisonneuve's fracture of left leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.862S	Displaced Maisonneuve's fracture of left leg, sequela
S82.863D	Displaced Maisonneuve's fracture of unspecified leg, subsequent encounter for closed fracture with routine healing
S82.863E	Displaced Maisonneuve's fracture of unspecified leg, subsequent encounter for open fracture type I or II with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.863F	Displaced Maisonneuve's fracture of unspecified leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.863G	Displaced Maisonneuve's fracture of unspecified leg, subsequent encounter for closed fracture with delayed healing
S82.863H	Displaced Maisonneuve's fracture of unspecified leg, subsequent encounter for open fracture type I or II with delayed healing
S82.863J	Displaced Maisonneuve's fracture of unspecified leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.863S	Displaced Maisonneuve's fracture of unspecified leg, sequela
S82.864D	Nondisplaced Maisonneuve's fracture of right leg, subsequent encounter for closed fracture with routine healing
S82.864E	Nondisplaced Maisonneuve's fracture of right leg, subsequent encounter for open fracture type I or II with routine healing
S82.864F	Nondisplaced Maisonneuve's fracture of right leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.864G	Nondisplaced Maisonneuve's fracture of right leg, subsequent encounter for closed fracture with delayed healing
S82.864H	Nondisplaced Maisonneuve's fracture of right leg, subsequent encounter for open fracture type I or II with delayed healing
S82.864J	Nondisplaced Maisonneuve's fracture of right leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.864S	Nondisplaced Maisonneuve's fracture of right leg, sequela
S82.865D	Nondisplaced Maisonneuve's fracture of left leg, subsequent encounter for closed fracture with routine healing
S82.865E	Nondisplaced Maisonneuve's fracture of left leg, subsequent encounter for open fracture type I or II with routine healing
S82.865F	Nondisplaced Maisonneuve's fracture of left leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.865G	Nondisplaced Maisonneuve's fracture of left leg, subsequent encounter for closed fracture with delayed healing
S82.865H	Nondisplaced Maisonneuve's fracture of left leg, subsequent encounter for open fracture type I or II with delayed healing
S82.865J	Nondisplaced Maisonneuve's fracture of left leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.865S	Nondisplaced Maisonneuve's fracture of left leg, sequela



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Code	Description
S82.866D	Nondisplaced Maisonneuve's fracture of unspecified leg, subsequent encounter for closed fracture with routine healing
S82.866E	Nondisplaced Maisonneuve's fracture of unspecified leg, subsequent encounter for open fracture type I or II with routine healing
S82.866F	Nondisplaced Maisonneuve's fracture of unspecified leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.866G	Nondisplaced Maisonneuve's fracture of unspecified leg, subsequent encounter for closed fracture with delayed healing
S82.866H	Nondisplaced Maisonneuve's fracture of unspecified leg, subsequent encounter for open fracture type I or II with delayed healing
S82.866J	Nondisplaced Maisonneuve's fracture of unspecified leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.866S	Nondisplaced Maisonneuve's fracture of unspecified leg, sequela
S82.871D	Displaced pilon fracture of right tibia, subsequent encounter for closed fracture with routine healing
S82.871E	Displaced pilon fracture of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.871F	Displaced pilon fracture of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.871G	Displaced pilon fracture of right tibia, subsequent encounter for closed fracture with delayed healing
S82.871H	Displaced pilon fracture of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.871J	Displaced pilon fracture of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.871S	Displaced pilon fracture of right tibia, sequela
S82.872D	Displaced pilon fracture of left tibia, subsequent encounter for closed fracture with routine healing
S82.872E	Displaced pilon fracture of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.872F	Displaced pilon fracture of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.872G	Displaced pilon fracture of left tibia, subsequent encounter for closed fracture with delayed healing
S82.872H	Displaced pilon fracture of left tibia, subsequent encounter for open fracture type I or II with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.872J	Displaced pilon fracture of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.872S	Displaced pilon fracture of left tibia, sequela
S82.873D	Displaced pilon fracture of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.873E	Displaced pilon fracture of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.873F	Displaced pilon fracture of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.873G	Displaced pilon fracture of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.873H	Displaced pilon fracture of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.873J	Displaced pilon fracture of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.873S	Displaced pilon fracture of unspecified tibia, sequela
S82.874D	Nondisplaced pilon fracture of right tibia, subsequent encounter for closed fracture with routine healing
S82.874E	Nondisplaced pilon fracture of right tibia, subsequent encounter for open fracture type I or II with routine healing
S82.874F	Nondisplaced pilon fracture of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.874G	Nondisplaced pilon fracture of right tibia, subsequent encounter for closed fracture with delayed healing
S82.874H	Nondisplaced pilon fracture of right tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.874J	Nondisplaced pilon fracture of right tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.874S	Nondisplaced pilon fracture of right tibia, sequela
S82.875D	Nondisplaced pilon fracture of left tibia, subsequent encounter for closed fracture with routine healing
S82.875E	Nondisplaced pilon fracture of left tibia, subsequent encounter for open fracture type I or II with routine healing
S82.875F	Nondisplaced pilon fracture of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing



**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.875G	Nondisplaced pilon fracture of left tibia, subsequent encounter for closed fracture with delayed healing
S82.875H	Nondisplaced pilon fracture of left tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.875J	Nondisplaced pilon fracture of left tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.875S	Nondisplaced pilon fracture of left tibia, sequela
S82.876D	Nondisplaced pilon fracture of unspecified tibia, subsequent encounter for closed fracture with routine healing
S82.876E	Nondisplaced pilon fracture of unspecified tibia, subsequent encounter for open fracture type I or II with routine healing
S82.876F	Nondisplaced pilon fracture of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.876G	Nondisplaced pilon fracture of unspecified tibia, subsequent encounter for closed fracture with delayed healing
S82.876H	Nondisplaced pilon fracture of unspecified tibia, subsequent encounter for open fracture type I or II with delayed healing
S82.876J	Nondisplaced pilon fracture of unspecified tibia, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.876S	Nondisplaced pilon fracture of unspecified tibia, sequela
S82.891D	Other fracture of right lower leg, subsequent encounter for closed fracture with routine healing
S82.891E	Other fracture of right lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.891F	Other fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.891G	Other fracture of right lower leg, subsequent encounter for closed fracture with delayed healing
S82.891H	Other fracture of right lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.891J	Other fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.891S	Other fracture of right lower leg, sequela
S82.892D	Other fracture of left lower leg, subsequent encounter for closed fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.892E	Other fracture of left lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.892F	Other fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.892G	Other fracture of left lower leg, subsequent encounter for closed fracture with delayed healing
S82.892H	Other fracture of left lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.892J	Other fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.892S	Other fracture of left lower leg, sequela
S82.899D	Other fracture of unspecified lower leg, subsequent encounter for closed fracture with routine healing
S82.899E	Other fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.899F	Other fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.899G	Other fracture of unspecified lower leg, subsequent encounter for closed fracture with delayed healing
S82.899H	Other fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.899J	Other fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.899S	Other fracture of unspecified lower leg, sequela
S82.90XD	Unspecified fracture of unspecified lower leg, subsequent encounter for closed fracture with routine healing
S82.90XE	Unspecified fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.90XF	Unspecified fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.90XG	Unspecified fracture of unspecified lower leg, subsequent encounter for closed fracture with delayed healing
S82.90XH	Unspecified fracture of unspecified lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.90XJ	Unspecified fracture of unspecified lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.90XS	Unspecified fracture of unspecified lower leg, sequela
S82.91XD	Unspecified fracture of right lower leg, subsequent encounter for closed fracture with routine healing
S82.91XE	Unspecified fracture of right lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.91XF	Unspecified fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.91XG	Unspecified fracture of right lower leg, subsequent encounter for closed fracture with delayed healing
S82.91XH	Unspecified fracture of right lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.91XJ	Unspecified fracture of right lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.91XS	Unspecified fracture of right lower leg, sequela
S82.92XD	Unspecified fracture of left lower leg, subsequent encounter for closed fracture with routine healing
S82.92XE	Unspecified fracture of left lower leg, subsequent encounter for open fracture type I or II with routine healing
S82.92XF	Unspecified fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
S82.92XG	Unspecified fracture of left lower leg, subsequent encounter for closed fracture with delayed healing
S82.92XH	Unspecified fracture of left lower leg, subsequent encounter for open fracture type I or II with delayed healing
S82.92XJ	Unspecified fracture of left lower leg, subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
S82.92XS	Unspecified fracture of left lower leg, sequela
S83.001A	Unspecified subluxation of right patella, initial encounter
S83.001S	Unspecified subluxation of right patella, sequela
S83.002A	Unspecified subluxation of left patella, initial encounter
S83.002S	Unspecified subluxation of left patella, sequela
S83.003A	Unspecified subluxation of unspecified patella, initial encounter
S83.003S	Unspecified subluxation of unspecified patella, sequela
S83.004A	Unspecified dislocation of right patella, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S83.004S	Unspecified dislocation of right patella, sequela
S83.005A	Unspecified dislocation of left patella, initial encounter
S83.005S	Unspecified dislocation of left patella, sequela
S83.006A	Unspecified dislocation of unspecified patella, initial encounter
S83.006S	Unspecified dislocation of unspecified patella, sequela
S83.011A	Lateral subluxation of right patella, initial encounter
S83.011S	Lateral subluxation of right patella, sequela
S83.012A	Lateral subluxation of left patella, initial encounter
S83.012S	Lateral subluxation of left patella, sequela
S83.013A	Lateral subluxation of unspecified patella, initial encounter
S83.013S	Lateral subluxation of unspecified patella, sequela
S83.014A	Lateral dislocation of right patella, initial encounter
S83.014S	Lateral dislocation of right patella, sequela
S83.015A	Lateral dislocation of left patella, initial encounter
S83.015S	Lateral dislocation of left patella, sequela
S83.016A	Lateral dislocation of unspecified patella, initial encounter
S83.016S	Lateral dislocation of unspecified patella, sequela
S83.091A	Other subluxation of right patella, initial encounter
S83.091S	Other subluxation of right patella, sequela
S83.092A	Other subluxation of left patella, initial encounter
S83.092S	Other subluxation of left patella, sequela
S83.093A	Other subluxation of unspecified patella, initial encounter
S83.093S	Other subluxation of unspecified patella, sequela
S83.094A	Other dislocation of right patella, initial encounter
S83.094S	Other dislocation of right patella, sequela
S83.095A	Other dislocation of left patella, initial encounter
S83.095S	Other dislocation of left patella, sequela
S83.096A	Other dislocation of unspecified patella, initial encounter
S83.096S	Other dislocation of unspecified patella, sequela
S83.101A	Unspecified subluxation of right knee, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S83.101S	Unspecified subluxation of right knee, sequela
S83.102A	Unspecified subluxation of left knee, initial encounter
S83.102S	Unspecified subluxation of left knee, sequela
S83.103A	Unspecified subluxation of unspecified knee, initial encounter
S83.103S	Unspecified subluxation of unspecified knee, sequela
S83.104A	Unspecified dislocation of right knee, initial encounter
S83.104S	Unspecified dislocation of right knee, sequela
S83.105A	Unspecified dislocation of left knee, initial encounter
S83.105S	Unspecified dislocation of left knee, sequela
S83.106A	Unspecified dislocation of unspecified knee, initial encounter
S83.106S	Unspecified dislocation of unspecified knee, sequela
S83.111A	Anterior subluxation of proximal end of tibia, right knee, initial encounter
S83.111S	Anterior subluxation of proximal end of tibia, right knee, sequela
S83.112A	Anterior subluxation of proximal end of tibia, left knee, initial encounter
S83.112S	Anterior subluxation of proximal end of tibia, left knee, sequela
S83.113A	Anterior subluxation of proximal end of tibia, unspecified knee, initial encounter
S83.113S	Anterior subluxation of proximal end of tibia, unspecified knee, sequela
S83.114A	Anterior dislocation of proximal end of tibia, right knee, initial encounter
S83.114S	Anterior dislocation of proximal end of tibia, right knee, sequela
S83.115A	Anterior dislocation of proximal end of tibia, left knee, initial encounter
S83.115S	Anterior dislocation of proximal end of tibia, left knee, sequela
S83.116A	Anterior dislocation of proximal end of tibia, unspecified knee, initial encounter
S83.116S	Anterior dislocation of proximal end of tibia, unspecified knee, sequela
S83.121A	Posterior subluxation of proximal end of tibia, right knee, initial encounter
S83.121S	Posterior subluxation of proximal end of tibia, right knee, sequela
S83.122A	Posterior subluxation of proximal end of tibia, left knee, initial encounter
S83.122S	Posterior subluxation of proximal end of tibia, left knee, sequela
S83.123A	Posterior subluxation of proximal end of tibia, unspecified knee, initial encounter
S83.123S	Posterior subluxation of proximal end of tibia, unspecified knee, sequela
S83.124A	Posterior dislocation of proximal end of tibia, right knee, initial encounter

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Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S83.124S	Posterior dislocation of proximal end of tibia, right knee, sequela
S83.125A	Posterior dislocation of proximal end of tibia, left knee, initial encounter
S83.125S	Posterior dislocation of proximal end of tibia, left knee, sequela
S83.126A	Posterior dislocation of proximal end of tibia, unspecified knee, initial encounter
S83.126S	Posterior dislocation of proximal end of tibia, unspecified knee, sequela
S83.131A	Medial subluxation of proximal end of tibia, right knee, initial encounter
S83.131S	Medial subluxation of proximal end of tibia, right knee, sequela
S83.132A	Medial subluxation of proximal end of tibia, left knee, initial encounter
S83.132S	Medial subluxation of proximal end of tibia, left knee, sequela
S83.133A	Medial subluxation of proximal end of tibia, unspecified knee, initial encounter
S83.133S	Medial subluxation of proximal end of tibia, unspecified knee, sequela
S83.134A	Medial dislocation of proximal end of tibia, right knee, initial encounter
S83.134S	Medial dislocation of proximal end of tibia, right knee, sequela
S83.135A	Medial dislocation of proximal end of tibia, left knee, initial encounter
S83.135S	Medial dislocation of proximal end of tibia, left knee, sequela
S83.136A	Medial dislocation of proximal end of tibia, unspecified knee, initial encounter
S83.136S	Medial dislocation of proximal end of tibia, unspecified knee, sequela
S83.141A	Lateral subluxation of proximal end of tibia, right knee, initial encounter
S83.141S	Lateral subluxation of proximal end of tibia, right knee, sequela
S83.142A	Lateral subluxation of proximal end of tibia, left knee, initial encounter
S83.142S	Lateral subluxation of proximal end of tibia, left knee, sequela
S83.143A	Lateral subluxation of proximal end of tibia, unspecified knee, initial encounter
S83.143S	Lateral subluxation of proximal end of tibia, unspecified knee, sequela
S83.144A	Lateral dislocation of proximal end of tibia, right knee, initial encounter
S83.144S	Lateral dislocation of proximal end of tibia, right knee, sequela
S83.145A	Lateral dislocation of proximal end of tibia, left knee, initial encounter
S83.145S	Lateral dislocation of proximal end of tibia, left knee, sequela
S83.146A	Lateral dislocation of proximal end of tibia, unspecified knee, initial encounter
S83.146S	Lateral dislocation of proximal end of tibia, unspecified knee, sequela
S83.191A	Other subluxation of right knee, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S83.191S	Other subluxation of right knee, sequela
S83.192A	Other subluxation of left knee, initial encounter
S83.192S	Other subluxation of left knee, sequela
S83.193A	Other subluxation of unspecified knee, initial encounter
S83.193S	Other subluxation of unspecified knee, sequela
S83.194A	Other dislocation of right knee, initial encounter
S83.194S	Other dislocation of right knee, sequela
S83.195A	Other dislocation of left knee, initial encounter
S83.195S	Other dislocation of left knee, sequela
S83.196A	Other dislocation of unspecified knee, initial encounter
S83.196S	Other dislocation of unspecified knee, sequela
S83.200A	Bucket-handle tear of unspecified meniscus, current injury, right knee, initial encounter
S83.200S	Bucket-handle tear of unspecified meniscus, current injury, right knee, sequela
S83.201A	Bucket-handle tear of unspecified meniscus, current injury, left knee, initial encounter
S83.201S	Bucket-handle tear of unspecified meniscus, current injury, left knee, sequela
S83.202A	Bucket-handle tear of unspecified meniscus, current injury, unspecified knee, initial encounter
S83.202S	Bucket-handle tear of unspecified meniscus, current injury, unspecified knee, sequela
S83.203A	Other tear of unspecified meniscus, current injury, right knee, initial encounter
S83.203S	Other tear of unspecified meniscus, current injury, right knee, sequela
S83.204A	Other tear of unspecified meniscus, current injury, left knee, initial encounter
S83.204S	Other tear of unspecified meniscus, current injury, left knee, sequela
S83.205A	Other tear of unspecified meniscus, current injury, unspecified knee, initial encounter
S83.205S	Other tear of unspecified meniscus, current injury, unspecified knee, sequela
S83.206A	Unspecified tear of unspecified meniscus, current injury, right knee, initial encounter
S83.206S	Unspecified tear of unspecified meniscus, current injury, right knee, sequela
S83.207A	Unspecified tear of unspecified meniscus, current injury, left knee, initial encounter
S83.207S	Unspecified tear of unspecified meniscus, current injury, left knee, sequela
S83.209A	Unspecified tear of unspecified meniscus, current injury, unspecified knee, initial encounter
S83.209S	Unspecified tear of unspecified meniscus, current injury, unspecified knee, sequela
S83.211A	Bucket-handle tear of medial meniscus, current injury, right knee, initial encounter

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Code	Description
S83.211S	Bucket-handle tear of medial meniscus, current injury, right knee, sequela
S83.212A	Bucket-handle tear of medial meniscus, current injury, left knee, initial encounter
S83.212S	Bucket-handle tear of medial meniscus, current injury, left knee, sequela
S83.219A	Bucket-handle tear of medial meniscus, current injury, unspecified knee, initial encounter
S83.219S	Bucket-handle tear of medial meniscus, current injury, unspecified knee, sequela
S83.221A	Peripheral tear of medial meniscus, current injury, right knee, initial encounter
S83.221S	Peripheral tear of medial meniscus, current injury, right knee, sequela
S83.222A	Peripheral tear of medial meniscus, current injury, left knee, initial encounter
S83.222S	Peripheral tear of medial meniscus, current injury, left knee, sequela
S83.229A	Peripheral tear of medial meniscus, current injury, unspecified knee, initial encounter
S83.229S	Peripheral tear of medial meniscus, current injury, unspecified knee, sequela
S83.231A	Complex tear of medial meniscus, current injury, right knee, initial encounter
S83.231S	Complex tear of medial meniscus, current injury, right knee, sequela
S83.232A	Complex tear of medial meniscus, current injury, left knee, initial encounter
S83.232S	Complex tear of medial meniscus, current injury, left knee, sequela
S83.239A	Complex tear of medial meniscus, current injury, unspecified knee, initial encounter
S83.239S	Complex tear of medial meniscus, current injury, unspecified knee, sequela
S83.241A	Other tear of medial meniscus, current injury, right knee, initial encounter
S83.241S	Other tear of medial meniscus, current injury, right knee, sequela
S83.242A	Other tear of medial meniscus, current injury, left knee, initial encounter
S83.242S	Other tear of medial meniscus, current injury, left knee, sequela
S83.249A	Other tear of medial meniscus, current injury, unspecified knee, initial encounter
S83.249S	Other tear of medial meniscus, current injury, unspecified knee, sequela
S83.251A	Bucket-handle tear of lateral meniscus, current injury, right knee, initial encounter
S83.251S	Bucket-handle tear of lateral meniscus, current injury, right knee, sequela
S83.252A	Bucket-handle tear of lateral meniscus, current injury, left knee, initial encounter
S83.252S	Bucket-handle tear of lateral meniscus, current injury, left knee, sequela
S83.259A	Bucket-handle tear of lateral meniscus, current injury, unspecified knee, initial encounter
S83.259S	Bucket-handle tear of lateral meniscus, current injury, unspecified knee, sequela
S83.261A	Peripheral tear of lateral meniscus, current injury, right knee, initial encounter



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Code	Description
S83.261S	Peripheral tear of lateral meniscus, current injury, right knee, sequela
S83.262A	Peripheral tear of lateral meniscus, current injury, left knee, initial encounter
S83.262S	Peripheral tear of lateral meniscus, current injury, left knee, sequela
S83.269A	Peripheral tear of lateral meniscus, current injury, unspecified knee, initial encounter
S83.269S	Peripheral tear of lateral meniscus, current injury, unspecified knee, sequela
S83.271A	Complex tear of lateral meniscus, current injury, right knee, initial encounter
S83.271S	Complex tear of lateral meniscus, current injury, right knee, sequela
S83.272A	Complex tear of lateral meniscus, current injury, left knee, initial encounter
S83.272S	Complex tear of lateral meniscus, current injury, left knee, sequela
S83.279A	Complex tear of lateral meniscus, current injury, unspecified knee, initial encounter
S83.279S	Complex tear of lateral meniscus, current injury, unspecified knee, sequela
S83.281A	Other tear of lateral meniscus, current injury, right knee, initial encounter
S83.281S	Other tear of lateral meniscus, current injury, right knee, sequela
S83.282A	Other tear of lateral meniscus, current injury, left knee, initial encounter
S83.282S	Other tear of lateral meniscus, current injury, left knee, sequela
S83.289A	Other tear of lateral meniscus, current injury, unspecified knee, initial encounter
S83.289S	Other tear of lateral meniscus, current injury, unspecified knee, sequela
S83.30XA	Tear of articular cartilage of unspecified knee, current, initial encounter
S83.30XS	Tear of articular cartilage of unspecified knee, current, sequela
S83.31XA	Tear of articular cartilage of right knee, current, initial encounter
S83.31XS	Tear of articular cartilage of right knee, current, sequela
S83.32XA	Tear of articular cartilage of left knee, current, initial encounter
S83.32XS	Tear of articular cartilage of left knee, current, sequela
S83.401A	Sprain of unspecified collateral ligament of right knee, initial encounter
S83.401S	Sprain of unspecified collateral ligament of right knee, sequela
S83.402A	Sprain of unspecified collateral ligament of left knee, initial encounter
S83.402S	Sprain of unspecified collateral ligament of left knee, sequela
S83.409A	Sprain of unspecified collateral ligament of unspecified knee, initial encounter
S83.409S	Sprain of unspecified collateral ligament of unspecified knee, sequela
S83.411A	Sprain of medial collateral ligament of right knee, initial encounter



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Code	Description
S83.411S	Sprain of medial collateral ligament of right knee, sequela
S83.412A	Sprain of medial collateral ligament of left knee, initial encounter
S83.412S	Sprain of medial collateral ligament of left knee, sequela
S83.419A	Sprain of medial collateral ligament of unspecified knee, initial encounter
S83.419S	Sprain of medial collateral ligament of unspecified knee, sequela
S83.421A	Sprain of lateral collateral ligament of right knee, initial encounter
S83.421S	Sprain of lateral collateral ligament of right knee, sequela
S83.422A	Sprain of lateral collateral ligament of left knee, initial encounter
S83.422S	Sprain of lateral collateral ligament of left knee, sequela
S83.429A	Sprain of lateral collateral ligament of unspecified knee, initial encounter
S83.429S	Sprain of lateral collateral ligament of unspecified knee, sequela
S83.501A	Sprain of unspecified cruciate ligament of right knee, initial encounter
S83.501S	Sprain of unspecified cruciate ligament of right knee, sequela
S83.502A	Sprain of unspecified cruciate ligament of left knee, initial encounter
S83.502S	Sprain of unspecified cruciate ligament of left knee, sequela
S83.509A	Sprain of unspecified cruciate ligament of unspecified knee, initial encounter
S83.509S	Sprain of unspecified cruciate ligament of unspecified knee, sequela
S83.511A	Sprain of anterior cruciate ligament of right knee, initial encounter
S83.511S	Sprain of anterior cruciate ligament of right knee, sequela
S83.512A	Sprain of anterior cruciate ligament of left knee, initial encounter
S83.512S	Sprain of anterior cruciate ligament of left knee, sequela
S83.519A	Sprain of anterior cruciate ligament of unspecified knee, initial encounter
S83.519S	Sprain of anterior cruciate ligament of unspecified knee, sequela
S83.521A	Sprain of posterior cruciate ligament of right knee, initial encounter
S83.521S	Sprain of posterior cruciate ligament of right knee, sequela
S83.522A	Sprain of posterior cruciate ligament of left knee, initial encounter
S83.522S	Sprain of posterior cruciate ligament of left knee, sequela
S83.529A	Sprain of posterior cruciate ligament of unspecified knee, initial encounter
S83.529S	Sprain of posterior cruciate ligament of unspecified knee, sequela
S83.60XA	Sprain of the superior tibiofibular joint and ligament, unspecified knee, initial encounter



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Code	Description
S83.60XS	Sprain of the superior tibiofibular joint and ligament, unspecified knee, sequela
S83.61XA	Sprain of the superior tibiofibular joint and ligament, right knee, initial encounter
S83.61XS	Sprain of the superior tibiofibular joint and ligament, right knee, sequela
S83.62XA	Sprain of the superior tibiofibular joint and ligament, left knee, initial encounter
S83.62XS	Sprain of the superior tibiofibular joint and ligament, left knee, sequela
S83.8X1A	Sprain of other specified parts of right knee, initial encounter
S83.8X1S	Sprain of other specified parts of right knee, sequela
S83.8X2A	Sprain of other specified parts of left knee, initial encounter
S83.8X2S	Sprain of other specified parts of left knee, sequela
S83.8X9A	Sprain of other specified parts of unspecified knee, initial encounter
S83.8X9S	Sprain of other specified parts of unspecified knee, sequela
S83.90XA	Sprain of unspecified site of unspecified knee, initial encounter
S83.90XS	Sprain of unspecified site of unspecified knee, sequela
S83.91XA	Sprain of unspecified site of right knee, initial encounter
S83.91XS	Sprain of unspecified site of right knee, sequela
S83.92XA	Sprain of unspecified site of left knee, initial encounter
S83.92XS	Sprain of unspecified site of left knee, sequela
S84.00XA	Injury of tibial nerve at lower leg level, unspecified leg, initial encounter
S84.00XS	Injury of tibial nerve at lower leg level, unspecified leg, sequela
S84.01XA	Injury of tibial nerve at lower leg level, right leg, initial encounter
S84.01XS	Injury of tibial nerve at lower leg level, right leg, sequela
S84.02XA	Injury of tibial nerve at lower leg level, left leg, initial encounter
S84.02XS	Injury of tibial nerve at lower leg level, left leg, sequela
S84.10XA	Injury of peroneal nerve at lower leg level, unspecified leg, initial encounter
S84.10XS	Injury of peroneal nerve at lower leg level, unspecified leg, sequela
S84.11XA	Injury of peroneal nerve at lower leg level, right leg, initial encounter
S84.11XS	Injury of peroneal nerve at lower leg level, right leg, sequela
S84.12XA	Injury of peroneal nerve at lower leg level, left leg, initial encounter
S84.12XS	Injury of peroneal nerve at lower leg level, left leg, sequela
S84.20XA	Injury of cutaneous sensory nerve at lower leg level, unspecified leg, initial encounter

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Code	Description
S84.20XS	Injury of cutaneous sensory nerve at lower leg level, unspecified leg, sequela
S84.21XA	Injury of cutaneous sensory nerve at lower leg level, right leg, initial encounter
S84.21XS	Injury of cutaneous sensory nerve at lower leg level, right leg, sequela
S84.22XA	Injury of cutaneous sensory nerve at lower leg level, left leg, initial encounter
S84.22XS	Injury of cutaneous sensory nerve at lower leg level, left leg, sequela
S84.801A	Injury of other nerves at lower leg level, right leg, initial encounter
S84.801S	Injury of other nerves at lower leg level, right leg, sequela
S84.802A	Injury of other nerves at lower leg level, left leg, initial encounter
S84.802S	Injury of other nerves at lower leg level, left leg, sequela
S84.809A	Injury of other nerves at lower leg level, unspecified leg, initial encounter
S84.809S	Injury of other nerves at lower leg level, unspecified leg, sequela
S84.90XA	Injury of unspecified nerve at lower leg level, unspecified leg, initial encounter
S84.90XS	Injury of unspecified nerve at lower leg level, unspecified leg, sequela
S84.91XA	Injury of unspecified nerve at lower leg level, right leg, initial encounter
S84.91XS	Injury of unspecified nerve at lower leg level, right leg, sequela
S84.92XA	Injury of unspecified nerve at lower leg level, left leg, initial encounter
S84.92XS	Injury of unspecified nerve at lower leg level, left leg, sequela
S85.001S	Unspecified injury of popliteal artery, right leg, sequela
S85.002S	Unspecified injury of popliteal artery, left leg, sequela
S85.009S	Unspecified injury of popliteal artery, unspecified leg, sequela
S85.011S	Laceration of popliteal artery, right leg, sequela
S85.012S	Laceration of popliteal artery, left leg, sequela
S85.019S	Laceration of popliteal artery, unspecified leg, sequela
S85.091S	Other specified injury of popliteal artery, right leg, sequela
S85.092S	Other specified injury of popliteal artery, left leg, sequela
S85.099S	Other specified injury of popliteal artery, unspecified leg, sequela
S85.101S	Unspecified injury of unspecified tibial artery, right leg, sequela
S85.102S	Unspecified injury of unspecified tibial artery, left leg, sequela
S85.109S	Unspecified injury of unspecified tibial artery, unspecified leg, sequela
S85.111S	Laceration of unspecified tibial artery, right leg, sequela



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Code	Description
S85.112S	Laceration of unspecified tibial artery, left leg, sequela
S85.119S	Laceration of unspecified tibial artery, unspecified leg, sequela
S85.121S	Other specified injury of unspecified tibial artery, right leg, sequela
S85.122S	Other specified injury of unspecified tibial artery, left leg, sequela
S85.129S	Other specified injury of unspecified tibial artery, unspecified leg, sequela
S85.131S	Unspecified injury of anterior tibial artery, right leg, sequela
S85.132S	Unspecified injury of anterior tibial artery, left leg, sequela
S85.139S	Unspecified injury of anterior tibial artery, unspecified leg, sequela
S85.141S	Laceration of anterior tibial artery, right leg, sequela
S85.142S	Laceration of anterior tibial artery, left leg, sequela
S85.149S	Laceration of anterior tibial artery, unspecified leg, sequela
S85.151S	Other specified injury of anterior tibial artery, right leg, sequela
S85.152S	Other specified injury of anterior tibial artery, left leg, sequela
S85.159S	Other specified injury of anterior tibial artery, unspecified leg, sequela
S85.161S	Unspecified injury of posterior tibial artery, right leg, sequela
S85.162S	Unspecified injury of posterior tibial artery, left leg, sequela
S85.169S	Unspecified injury of posterior tibial artery, unspecified leg, sequela
S85.171S	Laceration of posterior tibial artery, right leg, sequela
S85.172S	Laceration of posterior tibial artery, left leg, sequela
S85.179S	Laceration of posterior tibial artery, unspecified leg, sequela
S85.181S	Other specified injury of posterior tibial artery, right leg, sequela
S85.182S	Other specified injury of posterior tibial artery, left leg, sequela
S85.189S	Other specified injury of posterior tibial artery, unspecified leg, sequela
S85.201S	Unspecified injury of peroneal artery, right leg, sequela
S85.202S	Unspecified injury of peroneal artery, left leg, sequela
S85.209S	Unspecified injury of peroneal artery, unspecified leg, sequela
S85.211S	Laceration of peroneal artery, right leg, sequela
S85.212S	Laceration of peroneal artery, left leg, sequela
S85.219S	Laceration of peroneal artery, unspecified leg, sequela
S85.291S	Other specified injury of peroneal artery, right leg, sequela



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Code	Description
S85.292S	Other specified injury of peroneal artery, left leg, sequela
S85.299S	Other specified injury of peroneal artery, unspecified leg, sequela
S85.301S	Unspecified injury of greater saphenous vein at lower leg level, right leg, sequela
S85.302S	Unspecified injury of greater saphenous vein at lower leg level, left leg, sequela
S85.309S	Unspecified injury of greater saphenous vein at lower leg level, unspecified leg, sequela
S85.311S	Laceration of greater saphenous vein at lower leg level, right leg, sequela
S85.312S	Laceration of greater saphenous vein at lower leg level, left leg, sequela
S85.319S	Laceration of greater saphenous vein at lower leg level, unspecified leg, sequela
S85.391S	Other specified injury of greater saphenous vein at lower leg level, right leg, sequela
S85.392S	Other specified injury of greater saphenous vein at lower leg level, left leg, sequela
S85.399S	Other specified injury of greater saphenous vein at lower leg level, unspecified leg, sequela
S85.401S	Unspecified injury of lesser saphenous vein at lower leg level, right leg, sequela
S85.402S	Unspecified injury of lesser saphenous vein at lower leg level, left leg, sequela
S85.409S	Unspecified injury of lesser saphenous vein at lower leg level, unspecified leg, sequela
S85.411S	Laceration of lesser saphenous vein at lower leg level, right leg, sequela
S85.412S	Laceration of lesser saphenous vein at lower leg level, left leg, sequela
S85.419S	Laceration of lesser saphenous vein at lower leg level, unspecified leg, sequela
S85.491S	Other specified injury of lesser saphenous vein at lower leg level, right leg, sequela
S85.492S	Other specified injury of lesser saphenous vein at lower leg level, left leg, sequela
S85.499S	Other specified injury of lesser saphenous vein at lower leg level, unspecified leg, sequela
S85.501S	Unspecified injury of popliteal vein, right leg, sequela
S85.502S	Unspecified injury of popliteal vein, left leg, sequela
S85.509S	Unspecified injury of popliteal vein, unspecified leg, sequela
S85.511S	Laceration of popliteal vein, right leg, sequela
S85.512S	Laceration of popliteal vein, left leg, sequela
S85.519S	Laceration of popliteal vein, unspecified leg, sequela
S85.591S	Other specified injury of popliteal vein, right leg, sequela
S85.592S	Other specified injury of popliteal vein, left leg, sequela
S85.599S	Other specified injury of popliteal vein, unspecified leg, sequela
S85.801S	Unspecified injury of other blood vessels at lower leg level, right leg, sequela

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Code	Description
S85.802S	Unspecified injury of other blood vessels at lower leg level, left leg, sequela
S85.809S	Unspecified injury of other blood vessels at lower leg level, unspecified leg, sequela
S85.811S	Laceration of other blood vessels at lower leg level, right leg, sequela
S85.812S	Laceration of other blood vessels at lower leg level, left leg, sequela
S85.819S	Laceration of other blood vessels at lower leg level, unspecified leg, sequela
S85.891S	Other specified injury of other blood vessels at lower leg level, right leg, sequela
S85.892S	Other specified injury of other blood vessels at lower leg level, left leg, sequela
S85.899S	Other specified injury of other blood vessels at lower leg level, unspecified leg, sequela
S85.901S	Unspecified injury of unspecified blood vessel at lower leg level, right leg, sequela
S85.902S	Unspecified injury of unspecified blood vessel at lower leg level, left leg, sequela
S85.909S	Unspecified injury of unspecified blood vessel at lower leg level, unspecified leg, sequela
S85.911S	Laceration of unspecified blood vessel at lower leg level, right leg, sequela
S85.912S	Laceration of unspecified blood vessel at lower leg level, left leg, sequela
S85.919S	Laceration of unspecified blood vessel at lower leg level, unspecified leg, sequela
S85.991S	Other specified injury of unspecified blood vessel at lower leg level, right leg, sequela
S85.992S	Other specified injury of unspecified blood vessel at lower leg level, left leg, sequela
S85.999S	Other specified injury of unspecified blood vessel at lower leg level, unspecified leg, sequela
S86.001S	Unspecified injury of right Achilles tendon, sequela
S86.002S	Unspecified injury of left Achilles tendon, sequela
S86.009S	Unspecified injury of unspecified Achilles tendon, sequela
S86.011A	Strain of right Achilles tendon, initial encounter
S86.011S	Strain of right Achilles tendon, sequela
S86.012A	Strain of left Achilles tendon, initial encounter
S86.012S	Strain of left Achilles tendon, sequela
S86.019A	Strain of unspecified Achilles tendon, initial encounter
S86.019S	Strain of unspecified Achilles tendon, sequela
S86.021S	Laceration of right Achilles tendon, sequela
S86.022S	Laceration of left Achilles tendon, sequela
S86.029S	Laceration of unspecified Achilles tendon, sequela
S86.091S	Other specified injury of right Achilles tendon, sequela

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Code	Description
S86.092S	Other specified injury of left Achilles tendon, sequela
S86.099S	Other specified injury of unspecified Achilles tendon, sequela
S86.101S	Unspecified injury of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, right leg, sequela
S86.102S	Unspecified injury of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, left leg, sequela
S86.109S	Unspecified injury of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, unspecified leg, sequela
S86.111A	Strain of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, right leg, initial encounter
S86.111S	Strain of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, right leg, sequela
S86.112A	Strain of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, left leg, initial encounter
S86.112S	Strain of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, left leg, sequela
S86.119A	Strain of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, unspecified leg, initial encounter
S86.119S	Strain of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, unspecified leg, sequela
S86.121S	Laceration of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, right leg, sequela
S86.122S	Laceration of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, left leg, sequela
S86.129S	Laceration of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, unspecified leg, sequela
S86.191S	Other injury of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, right leg, sequela
S86.192S	Other injury of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, left leg, sequela
S86.199S	Other injury of other muscle(s) and tendon(s) of posterior muscle group at lower leg level, unspecified leg, sequela
S86.201S	Unspecified injury of muscle(s) and tendon(s) of anterior muscle group at lower leg level, right leg, sequela
S86.202S	Unspecified injury of muscle(s) and tendon(s) of anterior muscle group at lower leg level, left leg, sequela



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Code	Description
S86.209S	Unspecified injury of muscle(s) and tendon(s) of anterior muscle group at lower leg level, unspecified leg, sequela
S86.211A	Strain of muscle(s) and tendon(s) of anterior muscle group at lower leg level, right leg, initial encounter
S86.211S	Strain of muscle(s) and tendon(s) of anterior muscle group at lower leg level, right leg, sequela
S86.212A	Strain of muscle(s) and tendon(s) of anterior muscle group at lower leg level, left leg, initial encounter
S86.212S	Strain of muscle(s) and tendon(s) of anterior muscle group at lower leg level, left leg, sequela
S86.219A	Strain of muscle(s) and tendon(s) of anterior muscle group at lower leg level, unspecified leg, initial encounter
S86.219S	Strain of muscle(s) and tendon(s) of anterior muscle group at lower leg level, unspecified leg, sequela
S86.221S	Laceration of muscle(s) and tendon(s) of anterior muscle group at lower leg level, right leg, sequela
S86.222S	Laceration of muscle(s) and tendon(s) of anterior muscle group at lower leg level, left leg, sequela
S86.229S	Laceration of muscle(s) and tendon(s) of anterior muscle group at lower leg level, unspecified leg, sequela
S86.291S	Other injury of muscle(s) and tendon(s) of anterior muscle group at lower leg level, right leg, sequela
S86.292S	Other injury of muscle(s) and tendon(s) of anterior muscle group at lower leg level, left leg, sequela
S86.299S	Other injury of muscle(s) and tendon(s) of anterior muscle group at lower leg level, unspecified leg, sequela
S86.301S	Unspecified injury of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, right leg, sequela
S86.302S	Unspecified injury of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, left leg, sequela
S86.309S	Unspecified injury of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, unspecified leg, sequela
S86.311A	Strain of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, right leg, initial encounter
S86.311S	Strain of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, right leg, sequela



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Code	Description
S86.312A	Strain of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, left leg, initial encounter
S86.312S	Strain of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, left leg, sequela
S86.319A	Strain of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, unspecified leg, initial encounter
S86.319S	Strain of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, unspecified leg, sequela
S86.321S	Laceration of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, right leg, sequela
S86.322S	Laceration of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, left leg, sequela
S86.329S	Laceration of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, unspecified leg, sequela
S86.391S	Other injury of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, right leg, sequela
S86.392S	Other injury of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, left leg, sequela
S86.399S	Other injury of muscle(s) and tendon(s) of peroneal muscle group at lower leg level, unspecified leg, sequela
S86.801S	Unspecified injury of other muscle(s) and tendon(s) at lower leg level, right leg, sequela
S86.802S	Unspecified injury of other muscle(s) and tendon(s) at lower leg level, left leg, sequela
S86.809S	Unspecified injury of other muscle(s) and tendon(s) at lower leg level, unspecified leg, sequela
S86.811A	Strain of other muscle(s) and tendon(s) at lower leg level, right leg, initial encounter
S86.811S	Strain of other muscle(s) and tendon(s) at lower leg level, right leg, sequela
S86.812A	Strain of other muscle(s) and tendon(s) at lower leg level, left leg, initial encounter
S86.812S	Strain of other muscle(s) and tendon(s) at lower leg level, left leg, sequela
S86.819A	Strain of other muscle(s) and tendon(s) at lower leg level, unspecified leg, initial encounter
S86.819S	Strain of other muscle(s) and tendon(s) at lower leg level, unspecified leg, sequela
S86.821S	Laceration of other muscle(s) and tendon(s) at lower leg level, right leg, sequela
S86.822S	Laceration of other muscle(s) and tendon(s) at lower leg level, left leg, sequela
S86.829S	Laceration of other muscle(s) and tendon(s) at lower leg level, unspecified leg, sequela
S86.891S	Other injury of other muscle(s) and tendon(s) at lower leg level, right leg, sequela



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Code	Description
S86.892S	Other injury of other muscle(s) and tendon(s) at lower leg level, left leg, sequela
S86.899S	Other injury of other muscle(s) and tendon(s) at lower leg level, unspecified leg, sequela
S86.901S	Unspecified injury of unspecified muscle(s) and tendon(s) at lower leg level, right leg, sequela
S86.902S	Unspecified injury of unspecified muscle(s) and tendon(s) at lower leg level, left leg, sequela
S86.909S	Unspecified injury of unspecified muscle(s) and tendon(s) at lower leg level, unspecified leg, sequela
S86.911A	Strain of unspecified muscle(s) and tendon(s) at lower leg level, right leg, initial encounter
S86.911S	Strain of unspecified muscle(s) and tendon(s) at lower leg level, right leg, sequela
S86.912A	Strain of unspecified muscle(s) and tendon(s) at lower leg level, left leg, initial encounter
S86.912S	Strain of unspecified muscle(s) and tendon(s) at lower leg level, left leg, sequela
S86.919A	Strain of unspecified muscle(s) and tendon(s) at lower leg level, unspecified leg, initial encounter
S86.919S	Strain of unspecified muscle(s) and tendon(s) at lower leg level, unspecified leg, sequela
S86.921S	Laceration of unspecified muscle(s) and tendon(s) at lower leg level, right leg, sequela
S86.922S	Laceration of unspecified muscle(s) and tendon(s) at lower leg level, left leg, sequela
S86.929S	Laceration of unspecified muscle(s) and tendon(s) at lower leg level, unspecified leg, sequela
S86.991S	Other injury of unspecified muscle(s) and tendon(s) at lower leg level, right leg, sequela
S86.992S	Other injury of unspecified muscle(s) and tendon(s) at lower leg level, left leg, sequela
S86.999S	Other injury of unspecified muscle(s) and tendon(s) at lower leg level, unspecified leg, sequela
S87.00XS	Crushing injury of unspecified knee, sequela
S87.01XS	Crushing injury of right knee, sequela
S87.02XS	Crushing injury of left knee, sequela
S87.80XS	Crushing injury of unspecified lower leg, sequela
S87.81XS	Crushing injury of right lower leg, sequela
S87.82XS	Crushing injury of left lower leg, sequela
S88.011S	Complete traumatic amputation at knee level, right lower leg, sequela
S88.012S	Complete traumatic amputation at knee level, left lower leg, sequela
S88.019S	Complete traumatic amputation at knee level, unspecified lower leg, sequela



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Code	Description
S88.021S	Partial traumatic amputation at knee level, right lower leg, sequela
S88.022S	Partial traumatic amputation at knee level, left lower leg, sequela
S88.029S	Partial traumatic amputation at knee level, unspecified lower leg, sequela
S88.111S	Complete traumatic amputation at level between knee and ankle, right lower leg, sequela
S88.112S	Complete traumatic amputation at level between knee and ankle, left lower leg, sequela
S88.119S	Complete traumatic amputation at level between knee and ankle, unspecified lower leg, sequela
S88.121S	Partial traumatic amputation at level between knee and ankle, right lower leg, sequela
S88.122S	Partial traumatic amputation at level between knee and ankle, left lower leg, sequela
S88.129S	Partial traumatic amputation at level between knee and ankle, unspecified lower leg, sequela
S88.911S	Complete traumatic amputation of right lower leg, level unspecified, sequela
S88.912S	Complete traumatic amputation of left lower leg, level unspecified, sequela
S88.919S	Complete traumatic amputation of unspecified lower leg, level unspecified, sequela
S88.921S	Partial traumatic amputation of right lower leg, level unspecified, sequela
S88.922S	Partial traumatic amputation of left lower leg, level unspecified, sequela
S88.929S	Partial traumatic amputation of unspecified lower leg, level unspecified, sequela
S89.001D	Unspecified physeal fracture of upper end of right tibia, subsequent encounter for fracture with routine healing
S89.001G	Unspecified physeal fracture of upper end of right tibia, subsequent encounter for fracture with delayed healing
S89.001S	Unspecified physeal fracture of upper end of right tibia, sequela
S89.002D	Unspecified physeal fracture of upper end of left tibia, subsequent encounter for fracture with routine healing
S89.002G	Unspecified physeal fracture of upper end of left tibia, subsequent encounter for fracture with delayed healing
S89.002S	Unspecified physeal fracture of upper end of left tibia, sequela
S89.009D	Unspecified physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.009G	Unspecified physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.009S	Unspecified physeal fracture of upper end of unspecified tibia, sequela



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Code	Description
S89.011D	Salter-Harris Type I physeal fracture of upper end of right tibia, subsequent encounter for fracture with routine healing
S89.011G	Salter-Harris Type I physeal fracture of upper end of right tibia, subsequent encounter for fracture with delayed healing
S89.011S	Salter-Harris Type I physeal fracture of upper end of right tibia, sequela
S89.012D	Salter-Harris Type I physeal fracture of upper end of left tibia, subsequent encounter for fracture with routine healing
S89.012G	Salter-Harris Type I physeal fracture of upper end of left tibia, subsequent encounter for fracture with delayed healing
S89.012S	Salter-Harris Type I physeal fracture of upper end of left tibia, sequela
S89.019D	Salter-Harris Type I physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.019G	Salter-Harris Type I physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.019S	Salter-Harris Type I physeal fracture of upper end of unspecified tibia, sequela
S89.021D	Salter-Harris Type II physeal fracture of upper end of right tibia, subsequent encounter for fracture with routine healing
S89.021G	Salter-Harris Type II physeal fracture of upper end of right tibia, subsequent encounter for fracture with delayed healing
S89.021S	Salter-Harris Type II physeal fracture of upper end of right tibia, sequela
S89.022D	Salter-Harris Type II physeal fracture of upper end of left tibia, subsequent encounter for fracture with routine healing
S89.022G	Salter-Harris Type II physeal fracture of upper end of left tibia, subsequent encounter for fracture with delayed healing
S89.022S	Salter-Harris Type II physeal fracture of upper end of left tibia, sequela
S89.029D	Salter-Harris Type II physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.029G	Salter-Harris Type II physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.029S	Salter-Harris Type II physeal fracture of upper end of unspecified tibia, sequela
S89.031D	Salter-Harris Type III physeal fracture of upper end of right tibia, subsequent encounter for fracture with routine healing
S89.031G	Salter-Harris Type III physeal fracture of upper end of right tibia, subsequent encounter for fracture with delayed healing
S89.031S	Salter-Harris Type III physeal fracture of upper end of right tibia, sequela



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Code	Description
S89.032D	Salter-Harris Type III physeal fracture of upper end of left tibia, subsequent encounter for fracture with routine healing
S89.032G	Salter-Harris Type III physeal fracture of upper end of left tibia, subsequent encounter for fracture with delayed healing
S89.032S	Salter-Harris Type III physeal fracture of upper end of left tibia, sequela
S89.039D	Salter-Harris Type III physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.039G	Salter-Harris Type III physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.039S	Salter-Harris Type III physeal fracture of upper end of unspecified tibia, sequela
S89.041D	Salter-Harris Type IV physeal fracture of upper end of right tibia, subsequent encounter for fracture with routine healing
S89.041G	Salter-Harris Type IV physeal fracture of upper end of right tibia, subsequent encounter for fracture with delayed healing
S89.041S	Salter-Harris Type IV physeal fracture of upper end of right tibia, sequela
S89.042D	Salter-Harris Type IV physeal fracture of upper end of left tibia, subsequent encounter for fracture with routine healing
S89.042G	Salter-Harris Type IV physeal fracture of upper end of left tibia, subsequent encounter for fracture with delayed healing
S89.042S	Salter-Harris Type IV physeal fracture of upper end of left tibia, sequela
S89.049D	Salter-Harris Type IV physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.049G	Salter-Harris Type IV physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.049S	Salter-Harris Type IV physeal fracture of upper end of unspecified tibia, sequela
S89.091D	Other physeal fracture of upper end of right tibia, subsequent encounter for fracture with routine healing
S89.091G	Other physeal fracture of upper end of right tibia, subsequent encounter for fracture with delayed healing
S89.091S	Other physeal fracture of upper end of right tibia, sequela
S89.092D	Other physeal fracture of upper end of left tibia, subsequent encounter for fracture with routine healing
S89.092G	Other physeal fracture of upper end of left tibia, subsequent encounter for fracture with delayed healing
S89.092S	Other physeal fracture of upper end of left tibia, sequela

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Code	Description
S89.099D	Other physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.099G	Other physeal fracture of upper end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.099S	Other physeal fracture of upper end of unspecified tibia, sequela
S89.101D	Unspecified physeal fracture of lower end of right tibia, subsequent encounter for fracture with routine healing
S89.101G	Unspecified physeal fracture of lower end of right tibia, subsequent encounter for fracture with delayed healing
S89.101S	Unspecified physeal fracture of lower end of right tibia, sequela
S89.102D	Unspecified physeal fracture of lower end of left tibia, subsequent encounter for fracture with routine healing
S89.102G	Unspecified physeal fracture of lower end of left tibia, subsequent encounter for fracture with delayed healing
S89.102S	Unspecified physeal fracture of lower end of left tibia, sequela
S89.109D	Unspecified physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.109G	Unspecified physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.109S	Unspecified physeal fracture of lower end of unspecified tibia, sequela
S89.111D	Salter-Harris Type I physeal fracture of lower end of right tibia, subsequent encounter for fracture with routine healing
S89.111G	Salter-Harris Type I physeal fracture of lower end of right tibia, subsequent encounter for fracture with delayed healing
S89.111S	Salter-Harris Type I physeal fracture of lower end of right tibia, sequela
S89.112D	Salter-Harris Type I physeal fracture of lower end of left tibia, subsequent encounter for fracture with routine healing
S89.112G	Salter-Harris Type I physeal fracture of lower end of left tibia, subsequent encounter for fracture with delayed healing
S89.112S	Salter-Harris Type I physeal fracture of lower end of left tibia, sequela
S89.119D	Salter-Harris Type I physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.119G	Salter-Harris Type I physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.119S	Salter-Harris Type I physeal fracture of lower end of unspecified tibia, sequela

NCD 190.15

***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S89.121D	Salter-Harris Type II physeal fracture of lower end of right tibia, subsequent encounter for fracture with routine healing
S89.121G	Salter-Harris Type II physeal fracture of lower end of right tibia, subsequent encounter for fracture with delayed healing
S89.121S	Salter-Harris Type II physeal fracture of lower end of right tibia, sequela
S89.122D	Salter-Harris Type II physeal fracture of lower end of left tibia, subsequent encounter for fracture with routine healing
S89.122G	Salter-Harris Type II physeal fracture of lower end of left tibia, subsequent encounter for fracture with delayed healing
S89.122S	Salter-Harris Type II physeal fracture of lower end of left tibia, sequela
S89.129D	Salter-Harris Type II physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.129G	Salter-Harris Type II physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.129S	Salter-Harris Type II physeal fracture of lower end of unspecified tibia, sequela
S89.131D	Salter-Harris Type III physeal fracture of lower end of right tibia, subsequent encounter for fracture with routine healing
S89.131G	Salter-Harris Type III physeal fracture of lower end of right tibia, subsequent encounter for fracture with delayed healing
S89.131S	Salter-Harris Type III physeal fracture of lower end of right tibia, sequela
S89.132D	Salter-Harris Type III physeal fracture of lower end of left tibia, subsequent encounter for fracture with routine healing
S89.132G	Salter-Harris Type III physeal fracture of lower end of left tibia, subsequent encounter for fracture with delayed healing
S89.132S	Salter-Harris Type III physeal fracture of lower end of left tibia, sequela
S89.139D	Salter-Harris Type III physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.139G	Salter-Harris Type III physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.139S	Salter-Harris Type III physeal fracture of lower end of unspecified tibia, sequela
S89.141D	Salter-Harris Type IV physeal fracture of lower end of right tibia, subsequent encounter for fracture with routine healing
S89.141G	Salter-Harris Type IV physeal fracture of lower end of right tibia, subsequent encounter for fracture with delayed healing
S89.141S	Salter-Harris Type IV physeal fracture of lower end of right tibia, sequela

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S89.142D	Salter-Harris Type IV physeal fracture of lower end of left tibia, subsequent encounter for fracture with routine healing
S89.142G	Salter-Harris Type IV physeal fracture of lower end of left tibia, subsequent encounter for fracture with delayed healing
S89.142S	Salter-Harris Type IV physeal fracture of lower end of left tibia, sequela
S89.149D	Salter-Harris Type IV physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.149G	Salter-Harris Type IV physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.149S	Salter-Harris Type IV physeal fracture of lower end of unspecified tibia, sequela
S89.191D	Other physeal fracture of lower end of right tibia, subsequent encounter for fracture with routine healing
S89.191G	Other physeal fracture of lower end of right tibia, subsequent encounter for fracture with delayed healing
S89.191S	Other physeal fracture of lower end of right tibia, sequela
S89.192D	Other physeal fracture of lower end of left tibia, subsequent encounter for fracture with routine healing
S89.192G	Other physeal fracture of lower end of left tibia, subsequent encounter for fracture with delayed healing
S89.192S	Other physeal fracture of lower end of left tibia, sequela
S89.199D	Other physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with routine healing
S89.199G	Other physeal fracture of lower end of unspecified tibia, subsequent encounter for fracture with delayed healing
S89.199S	Other physeal fracture of lower end of unspecified tibia, sequela
S89.201D	Unspecified physeal fracture of upper end of right fibula, subsequent encounter for fracture with routine healing
S89.201G	Unspecified physeal fracture of upper end of right fibula, subsequent encounter for fracture with delayed healing
S89.201S	Unspecified physeal fracture of upper end of right fibula, sequela
S89.202D	Unspecified physeal fracture of upper end of left fibula, subsequent encounter for fracture with routine healing
S89.202G	Unspecified physeal fracture of upper end of left fibula, subsequent encounter for fracture with delayed healing
S89.202S	Unspecified physeal fracture of upper end of left fibula, sequela

NCD 190.15

***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
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Code	Description
S89.209D	Unspecified physeal fracture of upper end of unspecified fibula, subsequent encounter for fracture with routine healing
S89.209G	Unspecified physeal fracture of upper end of unspecified fibula, subsequent encounter for fracture with delayed healing
S89.209S	Unspecified physeal fracture of upper end of unspecified fibula, sequela
S89.211D	Salter-Harris Type I physeal fracture of upper end of right fibula, subsequent encounter for fracture with routine healing
S89.211G	Salter-Harris Type I physeal fracture of upper end of right fibula, subsequent encounter for fracture with delayed healing
S89.211S	Salter-Harris Type I physeal fracture of upper end of right fibula, sequela
S89.212D	Salter-Harris Type I physeal fracture of upper end of left fibula, subsequent encounter for fracture with routine healing
S89.212G	Salter-Harris Type I physeal fracture of upper end of left fibula, subsequent encounter for fracture with delayed healing
S89.212S	Salter-Harris Type I physeal fracture of upper end of left fibula, sequela
S89.219D	Salter-Harris Type I physeal fracture of upper end of unspecified fibula, subsequent encounter for fracture with routine healing
S89.219G	Salter-Harris Type I physeal fracture of upper end of unspecified fibula, subsequent encounter for fracture with delayed healing
S89.219S	Salter-Harris Type I physeal fracture of upper end of unspecified fibula, sequela
S89.221D	Salter-Harris Type II physeal fracture of upper end of right fibula, subsequent encounter for fracture with routine healing
S89.221G	Salter-Harris Type II physeal fracture of upper end of right fibula, subsequent encounter for fracture with delayed healing
S89.221S	Salter-Harris Type II physeal fracture of upper end of right fibula, sequela
S89.222D	Salter-Harris Type II physeal fracture of upper end of left fibula, subsequent encounter for fracture with routine healing
S89.222G	Salter-Harris Type II physeal fracture of upper end of left fibula, subsequent encounter for fracture with delayed healing
S89.222S	Salter-Harris Type II physeal fracture of upper end of left fibula, sequela
S89.229D	Salter-Harris Type II physeal fracture of upper end of unspecified fibula, subsequent encounter for fracture with routine healing
S89.229G	Salter-Harris Type II physeal fracture of upper end of unspecified fibula, subsequent encounter for fracture with delayed healing
S89.229S	Salter-Harris Type II physeal fracture of upper end of unspecified fibula, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S89.291D	Other physeal fracture of upper end of right fibula, subsequent encounter for fracture with routine healing
S89.291G	Other physeal fracture of upper end of right fibula, subsequent encounter for fracture with delayed healing
S89.291S	Other physeal fracture of upper end of right fibula, sequela
S89.292D	Other physeal fracture of upper end of left fibula, subsequent encounter for fracture with routine healing
S89.292G	Other physeal fracture of upper end of left fibula, subsequent encounter for fracture with delayed healing
S89.292S	Other physeal fracture of upper end of left fibula, sequela
S89.299D	Other physeal fracture of upper end of unspecified fibula, subsequent encounter for fracture with routine healing
S89.299G	Other physeal fracture of upper end of unspecified fibula, subsequent encounter for fracture with delayed healing
S89.299S	Other physeal fracture of upper end of unspecified fibula, sequela
S89.301D	Unspecified physeal fracture of lower end of right fibula, subsequent encounter for fracture with routine healing
S89.301G	Unspecified physeal fracture of lower end of right fibula, subsequent encounter for fracture with delayed healing
S89.301S	Unspecified physeal fracture of lower end of right fibula, sequela
S89.302D	Unspecified physeal fracture of lower end of left fibula, subsequent encounter for fracture with routine healing
S89.302G	Unspecified physeal fracture of lower end of left fibula, subsequent encounter for fracture with delayed healing
S89.302S	Unspecified physeal fracture of lower end of left fibula, sequela
S89.309D	Unspecified physeal fracture of lower end of unspecified fibula, subsequent encounter for fracture with routine healing
S89.309G	Unspecified physeal fracture of lower end of unspecified fibula, subsequent encounter for fracture with delayed healing
S89.309S	Unspecified physeal fracture of lower end of unspecified fibula, sequela
S89.311D	Salter-Harris Type I physeal fracture of lower end of right fibula, subsequent encounter for fracture with routine healing
S89.311G	Salter-Harris Type I physeal fracture of lower end of right fibula, subsequent encounter for fracture with delayed healing
S89.311S	Salter-Harris Type I physeal fracture of lower end of right fibula, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S89.312D	Salter-Harris Type I physeal fracture of lower end of left fibula, subsequent encounter for fracture with routine healing
S89.312G	Salter-Harris Type I physeal fracture of lower end of left fibula, subsequent encounter for fracture with delayed healing
S89.312S	Salter-Harris Type I physeal fracture of lower end of left fibula, sequela
S89.319D	Salter-Harris Type I physeal fracture of lower end of unspecified fibula, subsequent encounter for fracture with routine healing
S89.319G	Salter-Harris Type I physeal fracture of lower end of unspecified fibula, subsequent encounter for fracture with delayed healing
S89.319S	Salter-Harris Type I physeal fracture of lower end of unspecified fibula, sequela
S89.321D	Salter-Harris Type II physeal fracture of lower end of right fibula, subsequent encounter for fracture with routine healing
S89.321G	Salter-Harris Type II physeal fracture of lower end of right fibula, subsequent encounter for fracture with delayed healing
S89.321S	Salter-Harris Type II physeal fracture of lower end of right fibula, sequela
S89.322D	Salter-Harris Type II physeal fracture of lower end of left fibula, subsequent encounter for fracture with routine healing
S89.322G	Salter-Harris Type II physeal fracture of lower end of left fibula, subsequent encounter for fracture with delayed healing
S89.322S	Salter-Harris Type II physeal fracture of lower end of left fibula, sequela
S89.329D	Salter-Harris Type II physeal fracture of lower end of unspecified fibula, subsequent encounter for fracture with routine healing
S89.329G	Salter-Harris Type II physeal fracture of lower end of unspecified fibula, subsequent encounter for fracture with delayed healing
S89.329S	Salter-Harris Type II physeal fracture of lower end of unspecified fibula, sequela
S89.391D	Other physeal fracture of lower end of right fibula, subsequent encounter for fracture with routine healing
S89.391G	Other physeal fracture of lower end of right fibula, subsequent encounter for fracture with delayed healing
S89.391S	Other physeal fracture of lower end of right fibula, sequela
S89.392D	Other physeal fracture of lower end of left fibula, subsequent encounter for fracture with routine healing
S89.392G	Other physeal fracture of lower end of left fibula, subsequent encounter for fracture with delayed healing
S89.392S	Other physeal fracture of lower end of left fibula, sequela

NCD 190.15

***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S89.399D	Other physeal fracture of lower end of unspecified fibula, subsequent encounter for fracture with routine healing
S89.399G	Other physeal fracture of lower end of unspecified fibula, subsequent encounter for fracture with delayed healing
S89.399S	Other physeal fracture of lower end of unspecified fibula, sequela
S89.80XS	Other specified injuries of unspecified lower leg, sequela
S89.81XS	Other specified injuries of right lower leg, sequela
S89.82XS	Other specified injuries of left lower leg, sequela
S89.90XS	Unspecified injury of unspecified lower leg, sequela
S89.91XS	Unspecified injury of right lower leg, sequela
S89.92XS	Unspecified injury of left lower leg, sequela
S90.00XS	Contusion of unspecified ankle, sequela
S90.01XS	Contusion of right ankle, sequela
S90.02XS	Contusion of left ankle, sequela
S90.111S	Contusion of right great toe without damage to nail, sequela
S90.112S	Contusion of left great toe without damage to nail, sequela
S90.119S	Contusion of unspecified great toe without damage to nail, sequela
S90.121S	Contusion of right lesser toe(s) without damage to nail, sequela
S90.122S	Contusion of left lesser toe(s) without damage to nail, sequela
S90.129S	Contusion of unspecified lesser toe(s) without damage to nail, sequela
S90.211S	Contusion of right great toe with damage to nail, sequela
S90.212S	Contusion of left great toe with damage to nail, sequela
S90.219S	Contusion of unspecified great toe with damage to nail, sequela
S90.221S	Contusion of right lesser toe(s) with damage to nail, sequela
S90.222S	Contusion of left lesser toe(s) with damage to nail, sequela
S90.229S	Contusion of unspecified lesser toe(s) with damage to nail, sequela
S90.30XS	Contusion of unspecified foot, sequela
S90.31XS	Contusion of right foot, sequela
S90.32XS	Contusion of left foot, sequela
S90.411A	Abrasion, right great toe, initial encounter
S90.411S	Abrasion, right great toe, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S90.412A	Abrasion, left great toe, initial encounter
S90.412S	Abrasion, left great toe, sequela
S90.413A	Abrasion, unspecified great toe, initial encounter
S90.413S	Abrasion, unspecified great toe, sequela
S90.414A	Abrasion, right lesser toe(s), initial encounter
S90.414S	Abrasion, right lesser toe(s), sequela
S90.415A	Abrasion, left lesser toe(s), initial encounter
S90.415S	Abrasion, left lesser toe(s), sequela
S90.416A	Abrasion, unspecified lesser toe(s), initial encounter
S90.416S	Abrasion, unspecified lesser toe(s), sequela
S90.421A	Blister (nonthermal), right great toe, initial encounter
S90.421S	Blister (nonthermal), right great toe, sequela
S90.422A	Blister (nonthermal), left great toe, initial encounter
S90.422S	Blister (nonthermal), left great toe, sequela
S90.423A	Blister (nonthermal), unspecified great toe, initial encounter
S90.423S	Blister (nonthermal), unspecified great toe, sequela
S90.424A	Blister (nonthermal), right lesser toe(s), initial encounter
S90.424S	Blister (nonthermal), right lesser toe(s), sequela
S90.425A	Blister (nonthermal), left lesser toe(s), initial encounter
S90.425S	Blister (nonthermal), left lesser toe(s), sequela
S90.426A	Blister (nonthermal), unspecified lesser toe(s), initial encounter
S90.426S	Blister (nonthermal), unspecified lesser toe(s), sequela
S90.441A	External constriction, right great toe, initial encounter
S90.441S	External constriction, right great toe, sequela
S90.442A	External constriction, left great toe, initial encounter
S90.442S	External constriction, left great toe, sequela
S90.443A	External constriction, unspecified great toe, initial encounter
S90.443S	External constriction, unspecified great toe, sequela
S90.444A	External constriction, right lesser toe(s), initial encounter
S90.444S	External constriction, right lesser toe(s), sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S90.445A	External constriction, left lesser toe(s), initial encounter
S90.445S	External constriction, left lesser toe(s), sequela
S90.446A	External constriction, unspecified lesser toe(s), initial encounter
S90.446S	External constriction, unspecified lesser toe(s), sequela
S90.451A	Superficial foreign body, right great toe, initial encounter
S90.451S	Superficial foreign body, right great toe, sequela
S90.452A	Superficial foreign body, left great toe, initial encounter
S90.452S	Superficial foreign body, left great toe, sequela
S90.453A	Superficial foreign body, unspecified great toe, initial encounter
S90.453S	Superficial foreign body, unspecified great toe, sequela
S90.454A	Superficial foreign body, right lesser toe(s), initial encounter
S90.454S	Superficial foreign body, right lesser toe(s), sequela
S90.455A	Superficial foreign body, left lesser toe(s), initial encounter
S90.455S	Superficial foreign body, left lesser toe(s), sequela
S90.456A	Superficial foreign body, unspecified lesser toe(s), initial encounter
S90.456S	Superficial foreign body, unspecified lesser toe(s), sequela
S90.461A	Insect bite (nonvenomous), right great toe, initial encounter
S90.461S	Insect bite (nonvenomous), right great toe, sequela
S90.462A	Insect bite (nonvenomous), left great toe, initial encounter
S90.462S	Insect bite (nonvenomous), left great toe, sequela
S90.463A	Insect bite (nonvenomous), unspecified great toe, initial encounter
S90.463S	Insect bite (nonvenomous), unspecified great toe, sequela
S90.464A	Insect bite (nonvenomous), right lesser toe(s), initial encounter
S90.464S	Insect bite (nonvenomous), right lesser toe(s), sequela
S90.465A	Insect bite (nonvenomous), left lesser toe(s), initial encounter
S90.465S	Insect bite (nonvenomous), left lesser toe(s), sequela
S90.466A	Insect bite (nonvenomous), unspecified lesser toe(s), initial encounter
S90.466S	Insect bite (nonvenomous), unspecified lesser toe(s), sequela
S90.471A	Other superficial bite of right great toe, initial encounter
S90.471S	Other superficial bite of right great toe, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S90.472A	Other superficial bite of left great toe, initial encounter
S90.472S	Other superficial bite of left great toe, sequela
S90.473A	Other superficial bite of unspecified great toe, initial encounter
S90.473S	Other superficial bite of unspecified great toe, sequela
S90.474A	Other superficial bite of right lesser toe(s), initial encounter
S90.474S	Other superficial bite of right lesser toe(s), sequela
S90.475A	Other superficial bite of left lesser toe(s), initial encounter
S90.475S	Other superficial bite of left lesser toe(s), sequela
S90.476A	Other superficial bite of unspecified lesser toe(s), initial encounter
S90.476S	Other superficial bite of unspecified lesser toe(s), sequela
S90.511A	Abrasion, right ankle, initial encounter
S90.511S	Abrasion, right ankle, sequela
S90.512A	Abrasion, left ankle, initial encounter
S90.512S	Abrasion, left ankle, sequela
S90.519A	Abrasion, unspecified ankle, initial encounter
S90.519S	Abrasion, unspecified ankle, sequela
S90.521A	Blister (nonthermal), right ankle, initial encounter
S90.521S	Blister (nonthermal), right ankle, sequela
S90.522A	Blister (nonthermal), left ankle, initial encounter
S90.522S	Blister (nonthermal), left ankle, sequela
S90.529A	Blister (nonthermal), unspecified ankle, initial encounter
S90.529S	Blister (nonthermal), unspecified ankle, sequela
S90.541A	External constriction, right ankle, initial encounter
S90.541S	External constriction, right ankle, sequela
S90.542A	External constriction, left ankle, initial encounter
S90.542S	External constriction, left ankle, sequela
S90.549A	External constriction, unspecified ankle, initial encounter
S90.549S	External constriction, unspecified ankle, sequela
S90.551A	Superficial foreign body, right ankle, initial encounter
S90.551S	Superficial foreign body, right ankle, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S90.552A	Superficial foreign body, left ankle, initial encounter
S90.552S	Superficial foreign body, left ankle, sequela
S90.559A	Superficial foreign body, unspecified ankle, initial encounter
S90.559S	Superficial foreign body, unspecified ankle, sequela
S90.561A	Insect bite (nonvenomous), right ankle, initial encounter
S90.561S	Insect bite (nonvenomous), right ankle, sequela
S90.562A	Insect bite (nonvenomous), left ankle, initial encounter
S90.562S	Insect bite (nonvenomous), left ankle, sequela
S90.569A	Insect bite (nonvenomous), unspecified ankle, initial encounter
S90.569S	Insect bite (nonvenomous), unspecified ankle, sequela
S90.571A	Other superficial bite of ankle, right ankle, initial encounter
S90.571S	Other superficial bite of ankle, right ankle, sequela
S90.572A	Other superficial bite of ankle, left ankle, initial encounter
S90.572S	Other superficial bite of ankle, left ankle, sequela
S90.579A	Other superficial bite of ankle, unspecified ankle, initial encounter
S90.579S	Other superficial bite of ankle, unspecified ankle, sequela
S90.811A	Abrasion, right foot, initial encounter
S90.811S	Abrasion, right foot, sequela
S90.812A	Abrasion, left foot, initial encounter
S90.812S	Abrasion, left foot, sequela
S90.819A	Abrasion, unspecified foot, initial encounter
S90.819S	Abrasion, unspecified foot, sequela
S90.821A	Blister (nonthermal), right foot, initial encounter
S90.821S	Blister (nonthermal), right foot, sequela
S90.822A	Blister (nonthermal), left foot, initial encounter
S90.822S	Blister (nonthermal), left foot, sequela
S90.829A	Blister (nonthermal), unspecified foot, initial encounter
S90.829S	Blister (nonthermal), unspecified foot, sequela
S90.841A	External constriction, right foot, initial encounter
S90.841S	External constriction, right foot, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S90.842A	External constriction, left foot, initial encounter
S90.842S	External constriction, left foot, sequela
S90.849A	External constriction, unspecified foot, initial encounter
S90.849S	External constriction, unspecified foot, sequela
S90.851A	Superficial foreign body, right foot, initial encounter
S90.851S	Superficial foreign body, right foot, sequela
S90.852A	Superficial foreign body, left foot, initial encounter
S90.852S	Superficial foreign body, left foot, sequela
S90.859A	Superficial foreign body, unspecified foot, initial encounter
S90.859S	Superficial foreign body, unspecified foot, sequela
S90.861A	Insect bite (nonvenomous), right foot, initial encounter
S90.861S	Insect bite (nonvenomous), right foot, sequela
S90.862A	Insect bite (nonvenomous), left foot, initial encounter
S90.862S	Insect bite (nonvenomous), left foot, sequela
S90.869A	Insect bite (nonvenomous), unspecified foot, initial encounter
S90.869S	Insect bite (nonvenomous), unspecified foot, sequela
S90.871A	Other superficial bite of right foot, initial encounter
S90.871S	Other superficial bite of right foot, sequela
S90.872A	Other superficial bite of left foot, initial encounter
S90.872S	Other superficial bite of left foot, sequela
S90.879A	Other superficial bite of unspecified foot, initial encounter
S90.879S	Other superficial bite of unspecified foot, sequela
S90.911A	Unspecified superficial injury of right ankle, initial encounter
S90.911S	Unspecified superficial injury of right ankle, sequela
S90.912A	Unspecified superficial injury of left ankle, initial encounter
S90.912S	Unspecified superficial injury of left ankle, sequela
S90.919A	Unspecified superficial injury of unspecified ankle, initial encounter
S90.919S	Unspecified superficial injury of unspecified ankle, sequela
S90.921A	Unspecified superficial injury of right foot, initial encounter
S90.921S	Unspecified superficial injury of right foot, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S90.922A	Unspecified superficial injury of left foot, initial encounter
S90.922S	Unspecified superficial injury of left foot, sequela
S90.929A	Unspecified superficial injury of unspecified foot, initial encounter
S90.929S	Unspecified superficial injury of unspecified foot, sequela
S90.931A	Unspecified superficial injury of right great toe, initial encounter
S90.931S	Unspecified superficial injury of right great toe, sequela
S90.932A	Unspecified superficial injury of left great toe, initial encounter
S90.932S	Unspecified superficial injury of left great toe, sequela
S90.933A	Unspecified superficial injury of unspecified great toe, initial encounter
S90.933S	Unspecified superficial injury of unspecified great toe, sequela
S90.934A	Unspecified superficial injury of right lesser toe(s), initial encounter
S90.934S	Unspecified superficial injury of right lesser toe(s), sequela
S90.935A	Unspecified superficial injury of left lesser toe(s), initial encounter
S90.935S	Unspecified superficial injury of left lesser toe(s), sequela
S90.936A	Unspecified superficial injury of unspecified lesser toe(s), initial encounter
S90.936S	Unspecified superficial injury of unspecified lesser toe(s), sequela
S91.001S	Unspecified open wound, right ankle, sequela
S91.002S	Unspecified open wound, left ankle, sequela
S91.009A	Unspecified open wound, unspecified ankle, initial encounter
S91.009S	Unspecified open wound, unspecified ankle, sequela
S91.011S	Laceration without foreign body, right ankle, sequela
S91.012S	Laceration without foreign body, left ankle, sequela
S91.019S	Laceration without foreign body, unspecified ankle, sequela
S91.021S	Laceration with foreign body, right ankle, sequela
S91.022S	Laceration with foreign body, left ankle, sequela
S91.029S	Laceration with foreign body, unspecified ankle, sequela
S91.031S	Puncture wound without foreign body, right ankle, sequela
S91.032S	Puncture wound without foreign body, left ankle, sequela
S91.039S	Puncture wound without foreign body, unspecified ankle, sequela
S91.041S	Puncture wound with foreign body, right ankle, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S91.042S	Puncture wound with foreign body, left ankle, sequela
S91.049S	Puncture wound with foreign body, unspecified ankle, sequela
S91.051S	Open bite, right ankle, sequela
S91.052S	Open bite, left ankle, sequela
S91.059S	Open bite, unspecified ankle, sequela
S91.101S	Unspecified open wound of right great toe without damage to nail, sequela
S91.102S	Unspecified open wound of left great toe without damage to nail, sequela
S91.103S	Unspecified open wound of unspecified great toe without damage to nail, sequela
S91.104S	Unspecified open wound of right lesser toe(s) without damage to nail, sequela
S91.105S	Unspecified open wound of left lesser toe(s) without damage to nail, sequela
S91.106S	Unspecified open wound of unspecified lesser toe(s) without damage to nail, sequela
S91.109A	Unspecified open wound of unspecified toe(s) without damage to nail, initial encounter
S91.109S	Unspecified open wound of unspecified toe(s) without damage to nail, sequela
S91.111S	Laceration without foreign body of right great toe without damage to nail, sequela
S91.112S	Laceration without foreign body of left great toe without damage to nail, sequela
S91.113S	Laceration without foreign body of unspecified great toe without damage to nail, sequela
S91.114S	Laceration without foreign body of right lesser toe(s) without damage to nail, sequela
S91.115S	Laceration without foreign body of left lesser toe(s) without damage to nail, sequela
S91.116S	Laceration without foreign body of unspecified lesser toe(s) without damage to nail, sequela
S91.119S	Laceration without foreign body of unspecified toe without damage to nail, sequela
S91.121S	Laceration with foreign body of right great toe without damage to nail, sequela
S91.122S	Laceration with foreign body of left great toe without damage to nail, sequela
S91.123S	Laceration with foreign body of unspecified great toe without damage to nail, sequela
S91.124S	Laceration with foreign body of right lesser toe(s) without damage to nail, sequela
S91.125S	Laceration with foreign body of left lesser toe(s) without damage to nail, sequela
S91.126S	Laceration with foreign body of unspecified lesser toe(s) without damage to nail, sequela
S91.129S	Laceration with foreign body of unspecified toe(s) without damage to nail, sequela
S91.131S	Puncture wound without foreign body of right great toe without damage to nail, sequela
S91.132S	Puncture wound without foreign body of left great toe without damage to nail, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S91.133S	Puncture wound without foreign body of unspecified great toe without damage to nail, sequela
S91.134S	Puncture wound without foreign body of right lesser toe(s) without damage to nail, sequela
S91.135S	Puncture wound without foreign body of left lesser toe(s) without damage to nail, sequela
S91.136S	Puncture wound without foreign body of unspecified lesser toe(s) without damage to nail, sequela
S91.139S	Puncture wound without foreign body of unspecified toe(s) without damage to nail, sequela
S91.141S	Puncture wound with foreign body of right great toe without damage to nail, sequela
S91.142S	Puncture wound with foreign body of left great toe without damage to nail, sequela
S91.143S	Puncture wound with foreign body of unspecified great toe without damage to nail, sequela
S91.144S	Puncture wound with foreign body of right lesser toe(s) without damage to nail, sequela
S91.145S	Puncture wound with foreign body of left lesser toe(s) without damage to nail, sequela
S91.146S	Puncture wound with foreign body of unspecified lesser toe(s) without damage to nail, sequela
S91.149S	Puncture wound with foreign body of unspecified toe(s) without damage to nail, sequela
S91.151S	Open bite of right great toe without damage to nail, sequela
S91.152S	Open bite of left great toe without damage to nail, sequela
S91.153S	Open bite of unspecified great toe without damage to nail, sequela
S91.154S	Open bite of right lesser toe(s) without damage to nail, sequela
S91.155S	Open bite of left lesser toe(s) without damage to nail, sequela
S91.156S	Open bite of unspecified lesser toe(s) without damage to nail, sequela
S91.159S	Open bite of unspecified toe(s) without damage to nail, sequela
S91.201S	Unspecified open wound of right great toe with damage to nail, sequela
S91.202S	Unspecified open wound of left great toe with damage to nail, sequela
S91.203S	Unspecified open wound of unspecified great toe with damage to nail, sequela
S91.204S	Unspecified open wound of right lesser toe(s) with damage to nail, sequela
S91.205S	Unspecified open wound of left lesser toe(s) with damage to nail, sequela
S91.206S	Unspecified open wound of unspecified lesser toe(s) with damage to nail, sequela
S91.209S	Unspecified open wound of unspecified toe(s) with damage to nail, sequela
S91.211S	Laceration without foreign body of right great toe with damage to nail, sequela
S91.212S	Laceration without foreign body of left great toe with damage to nail, sequela

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***April 2017 Changes
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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S91.213S	Laceration without foreign body of unspecified great toe with damage to nail, sequela
S91.214S	Laceration without foreign body of right lesser toe(s) with damage to nail, sequela
S91.215S	Laceration without foreign body of left lesser toe(s) with damage to nail, sequela
S91.216S	Laceration without foreign body of unspecified lesser toe(s) with damage to nail, sequela
S91.219S	Laceration without foreign body of unspecified toe(s) with damage to nail, sequela
S91.221S	Laceration with foreign body of right great toe with damage to nail, sequela
S91.222S	Laceration with foreign body of left great toe with damage to nail, sequela
S91.223S	Laceration with foreign body of unspecified great toe with damage to nail, sequela
S91.224S	Laceration with foreign body of right lesser toe(s) with damage to nail, sequela
S91.225S	Laceration with foreign body of left lesser toe(s) with damage to nail, sequela
S91.226S	Laceration with foreign body of unspecified lesser toe(s) with damage to nail, sequela
S91.229S	Laceration with foreign body of unspecified toe(s) with damage to nail, sequela
S91.231S	Puncture wound without foreign body of right great toe with damage to nail, sequela
S91.232S	Puncture wound without foreign body of left great toe with damage to nail, sequela
S91.233S	Puncture wound without foreign body of unspecified great toe with damage to nail, sequela
S91.234S	Puncture wound without foreign body of right lesser toe(s) with damage to nail, sequela
S91.235S	Puncture wound without foreign body of left lesser toe(s) with damage to nail, sequela
S91.236S	Puncture wound without foreign body of unspecified lesser toe(s) with damage to nail, sequela
S91.239S	Puncture wound without foreign body of unspecified toe(s) with damage to nail, sequela
S91.241S	Puncture wound with foreign body of right great toe with damage to nail, sequela
S91.242S	Puncture wound with foreign body of left great toe with damage to nail, sequela
S91.243S	Puncture wound with foreign body of unspecified great toe with damage to nail, sequela
S91.244S	Puncture wound with foreign body of right lesser toe(s) with damage to nail, sequela
S91.245S	Puncture wound with foreign body of left lesser toe(s) with damage to nail, sequela
S91.246S	Puncture wound with foreign body of unspecified lesser toe(s) with damage to nail, sequela
S91.249S	Puncture wound with foreign body of unspecified toe(s) with damage to nail, sequela
S91.251S	Open bite of right great toe with damage to nail, sequela
S91.252S	Open bite of left great toe with damage to nail, sequela
S91.253S	Open bite of unspecified great toe with damage to nail, sequela



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Code	Description
S91.254S	Open bite of right lesser toe(s) with damage to nail, sequela
S91.255S	Open bite of left lesser toe(s) with damage to nail, sequela
S91.256S	Open bite of unspecified lesser toe(s) with damage to nail, sequela
S91.259S	Open bite of unspecified toe(s) with damage to nail, sequela
S91.301S	Unspecified open wound, right foot, sequela
S91.302S	Unspecified open wound, left foot, sequela
S91.309A	Unspecified open wound, unspecified foot, initial encounter
S91.309S	Unspecified open wound, unspecified foot, sequela
S91.311S	Laceration without foreign body, right foot, sequela
S91.312S	Laceration without foreign body, left foot, sequela
S91.319S	Laceration without foreign body, unspecified foot, sequela
S91.321S	Laceration with foreign body, right foot, sequela
S91.322S	Laceration with foreign body, left foot, sequela
S91.329S	Laceration with foreign body, unspecified foot, sequela
S91.331S	Puncture wound without foreign body, right foot, sequela
S91.332S	Puncture wound without foreign body, left foot, sequela
S91.339S	Puncture wound without foreign body, unspecified foot, sequela
S91.341S	Puncture wound with foreign body, right foot, sequela
S91.342S	Puncture wound with foreign body, left foot, sequela
S91.349S	Puncture wound with foreign body, unspecified foot, sequela
S91.351S	Open bite, right foot, sequela
S91.352S	Open bite, left foot, sequela
S91.359S	Open bite, unspecified foot, sequela
S92.001D	Unspecified fracture of right calcaneus, subsequent encounter for fracture with routine healing
S92.001G	Unspecified fracture of right calcaneus, subsequent encounter for fracture with delayed healing
S92.001S	Unspecified fracture of right calcaneus, sequela
S92.002D	Unspecified fracture of left calcaneus, subsequent encounter for fracture with routine healing
S92.002G	Unspecified fracture of left calcaneus, subsequent encounter for fracture with delayed healing

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***April 2017 Changes
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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.002S	Unspecified fracture of left calcaneus, sequela
S92.009D	Unspecified fracture of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.009G	Unspecified fracture of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.009S	Unspecified fracture of unspecified calcaneus, sequela
S92.011D	Displaced fracture of body of right calcaneus, subsequent encounter for fracture with routine healing
S92.011G	Displaced fracture of body of right calcaneus, subsequent encounter for fracture with delayed healing
S92.011S	Displaced fracture of body of right calcaneus, sequela
S92.012D	Displaced fracture of body of left calcaneus, subsequent encounter for fracture with routine healing
S92.012G	Displaced fracture of body of left calcaneus, subsequent encounter for fracture with delayed healing
S92.012S	Displaced fracture of body of left calcaneus, sequela
S92.013D	Displaced fracture of body of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.013G	Displaced fracture of body of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.013S	Displaced fracture of body of unspecified calcaneus, sequela
S92.014D	Nondisplaced fracture of body of right calcaneus, subsequent encounter for fracture with routine healing
S92.014G	Nondisplaced fracture of body of right calcaneus, subsequent encounter for fracture with delayed healing
S92.014S	Nondisplaced fracture of body of right calcaneus, sequela
S92.015D	Nondisplaced fracture of body of left calcaneus, subsequent encounter for fracture with routine healing
S92.015G	Nondisplaced fracture of body of left calcaneus, subsequent encounter for fracture with delayed healing
S92.015S	Nondisplaced fracture of body of left calcaneus, sequela
S92.016D	Nondisplaced fracture of body of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.016G	Nondisplaced fracture of body of unspecified calcaneus, subsequent encounter for fracture with delayed healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.016S	Nondisplaced fracture of body of unspecified calcaneus, sequela
S92.021D	Displaced fracture of anterior process of right calcaneus, subsequent encounter for fracture with routine healing
S92.021G	Displaced fracture of anterior process of right calcaneus, subsequent encounter for fracture with delayed healing
S92.021S	Displaced fracture of anterior process of right calcaneus, sequela
S92.022D	Displaced fracture of anterior process of left calcaneus, subsequent encounter for fracture with routine healing
S92.022G	Displaced fracture of anterior process of left calcaneus, subsequent encounter for fracture with delayed healing
S92.022S	Displaced fracture of anterior process of left calcaneus, sequela
S92.023D	Displaced fracture of anterior process of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.023G	Displaced fracture of anterior process of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.023S	Displaced fracture of anterior process of unspecified calcaneus, sequela
S92.024D	Nondisplaced fracture of anterior process of right calcaneus, subsequent encounter for fracture with routine healing
S92.024G	Nondisplaced fracture of anterior process of right calcaneus, subsequent encounter for fracture with delayed healing
S92.024S	Nondisplaced fracture of anterior process of right calcaneus, sequela
S92.025D	Nondisplaced fracture of anterior process of left calcaneus, subsequent encounter for fracture with routine healing
S92.025G	Nondisplaced fracture of anterior process of left calcaneus, subsequent encounter for fracture with delayed healing
S92.025S	Nondisplaced fracture of anterior process of left calcaneus, sequela
S92.026D	Nondisplaced fracture of anterior process of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.026G	Nondisplaced fracture of anterior process of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.026S	Nondisplaced fracture of anterior process of unspecified calcaneus, sequela
S92.031D	Displaced avulsion fracture of tuberosity of right calcaneus, subsequent encounter for fracture with routine healing
S92.031G	Displaced avulsion fracture of tuberosity of right calcaneus, subsequent encounter for fracture with delayed healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S92.031S	Displaced avulsion fracture of tuberosity of right calcaneus, sequela
S92.032D	Displaced avulsion fracture of tuberosity of left calcaneus, subsequent encounter for fracture with routine healing
S92.032G	Displaced avulsion fracture of tuberosity of left calcaneus, subsequent encounter for fracture with delayed healing
S92.032S	Displaced avulsion fracture of tuberosity of left calcaneus, sequela
S92.033D	Displaced avulsion fracture of tuberosity of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.033G	Displaced avulsion fracture of tuberosity of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.033S	Displaced avulsion fracture of tuberosity of unspecified calcaneus, sequela
S92.034D	Nondisplaced avulsion fracture of tuberosity of right calcaneus, subsequent encounter for fracture with routine healing
S92.034G	Nondisplaced avulsion fracture of tuberosity of right calcaneus, subsequent encounter for fracture with delayed healing
S92.034S	Nondisplaced avulsion fracture of tuberosity of right calcaneus, sequela
S92.035D	Nondisplaced avulsion fracture of tuberosity of left calcaneus, subsequent encounter for fracture with routine healing
S92.035G	Nondisplaced avulsion fracture of tuberosity of left calcaneus, subsequent encounter for fracture with delayed healing
S92.035S	Nondisplaced avulsion fracture of tuberosity of left calcaneus, sequela
S92.036D	Nondisplaced avulsion fracture of tuberosity of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.036G	Nondisplaced avulsion fracture of tuberosity of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.036S	Nondisplaced avulsion fracture of tuberosity of unspecified calcaneus, sequela
S92.041D	Displaced other fracture of tuberosity of right calcaneus, subsequent encounter for fracture with routine healing
S92.041G	Displaced other fracture of tuberosity of right calcaneus, subsequent encounter for fracture with delayed healing
S92.041S	Displaced other fracture of tuberosity of right calcaneus, sequela
S92.042D	Displaced other fracture of tuberosity of left calcaneus, subsequent encounter for fracture with routine healing
S92.042G	Displaced other fracture of tuberosity of left calcaneus, subsequent encounter for fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.042S	Displaced other fracture of tuberosity of left calcaneus, sequela
S92.043D	Displaced other fracture of tuberosity of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.043G	Displaced other fracture of tuberosity of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.043S	Displaced other fracture of tuberosity of unspecified calcaneus, sequela
S92.044D	Nondisplaced other fracture of tuberosity of right calcaneus, subsequent encounter for fracture with routine healing
S92.044G	Nondisplaced other fracture of tuberosity of right calcaneus, subsequent encounter for fracture with delayed healing
S92.044S	Nondisplaced other fracture of tuberosity of right calcaneus, sequela
S92.045D	Nondisplaced other fracture of tuberosity of left calcaneus, subsequent encounter for fracture with routine healing
S92.045G	Nondisplaced other fracture of tuberosity of left calcaneus, subsequent encounter for fracture with delayed healing
S92.045S	Nondisplaced other fracture of tuberosity of left calcaneus, sequela
S92.046D	Nondisplaced other fracture of tuberosity of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.046G	Nondisplaced other fracture of tuberosity of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.046S	Nondisplaced other fracture of tuberosity of unspecified calcaneus, sequela
S92.051D	Displaced other extraarticular fracture of right calcaneus, subsequent encounter for fracture with routine healing
S92.051G	Displaced other extraarticular fracture of right calcaneus, subsequent encounter for fracture with delayed healing
S92.051S	Displaced other extraarticular fracture of right calcaneus, sequela
S92.052D	Displaced other extraarticular fracture of left calcaneus, subsequent encounter for fracture with routine healing
S92.052G	Displaced other extraarticular fracture of left calcaneus, subsequent encounter for fracture with delayed healing
S92.052S	Displaced other extraarticular fracture of left calcaneus, sequela
S92.053D	Displaced other extraarticular fracture of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.053G	Displaced other extraarticular fracture of unspecified calcaneus, subsequent encounter for fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.053S	Displaced other extraarticular fracture of unspecified calcaneus, sequela
S92.054D	Nondisplaced other extraarticular fracture of right calcaneus, subsequent encounter for fracture with routine healing
S92.054G	Nondisplaced other extraarticular fracture of right calcaneus, subsequent encounter for fracture with delayed healing
S92.054S	Nondisplaced other extraarticular fracture of right calcaneus, sequela
S92.055D	Nondisplaced other extraarticular fracture of left calcaneus, subsequent encounter for fracture with routine healing
S92.055G	Nondisplaced other extraarticular fracture of left calcaneus, subsequent encounter for fracture with delayed healing
S92.055S	Nondisplaced other extraarticular fracture of left calcaneus, sequela
S92.056D	Nondisplaced other extraarticular fracture of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.056G	Nondisplaced other extraarticular fracture of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.056S	Nondisplaced other extraarticular fracture of unspecified calcaneus, sequela
S92.061D	Displaced intraarticular fracture of right calcaneus, subsequent encounter for fracture with routine healing
S92.061G	Displaced intraarticular fracture of right calcaneus, subsequent encounter for fracture with delayed healing
S92.061S	Displaced intraarticular fracture of right calcaneus, sequela
S92.062D	Displaced intraarticular fracture of left calcaneus, subsequent encounter for fracture with routine healing
S92.062G	Displaced intraarticular fracture of left calcaneus, subsequent encounter for fracture with delayed healing
S92.062S	Displaced intraarticular fracture of left calcaneus, sequela
S92.063D	Displaced intraarticular fracture of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.063G	Displaced intraarticular fracture of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.063S	Displaced intraarticular fracture of unspecified calcaneus, sequela
S92.064D	Nondisplaced intraarticular fracture of right calcaneus, subsequent encounter for fracture with routine healing
S92.064G	Nondisplaced intraarticular fracture of right calcaneus, subsequent encounter for fracture with delayed healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.064S	Nondisplaced intraarticular fracture of right calcaneus, sequela
S92.065D	Nondisplaced intraarticular fracture of left calcaneus, subsequent encounter for fracture with routine healing
S92.065G	Nondisplaced intraarticular fracture of left calcaneus, subsequent encounter for fracture with delayed healing
S92.065S	Nondisplaced intraarticular fracture of left calcaneus, sequela
S92.066D	Nondisplaced intraarticular fracture of unspecified calcaneus, subsequent encounter for fracture with routine healing
S92.066G	Nondisplaced intraarticular fracture of unspecified calcaneus, subsequent encounter for fracture with delayed healing
S92.066S	Nondisplaced intraarticular fracture of unspecified calcaneus, sequela
S92.101D	Unspecified fracture of right talus, subsequent encounter for fracture with routine healing
S92.101G	Unspecified fracture of right talus, subsequent encounter for fracture with delayed healing
S92.101S	Unspecified fracture of right talus, sequela
S92.102D	Unspecified fracture of left talus, subsequent encounter for fracture with routine healing
S92.102G	Unspecified fracture of left talus, subsequent encounter for fracture with delayed healing
S92.102S	Unspecified fracture of left talus, sequela
S92.109D	Unspecified fracture of unspecified talus, subsequent encounter for fracture with routine healing
S92.109G	Unspecified fracture of unspecified talus, subsequent encounter for fracture with delayed healing
S92.109S	Unspecified fracture of unspecified talus, sequela
S92.111D	Displaced fracture of neck of right talus, subsequent encounter for fracture with routine healing
S92.111G	Displaced fracture of neck of right talus, subsequent encounter for fracture with delayed healing
S92.111S	Displaced fracture of neck of right talus, sequela
S92.112D	Displaced fracture of neck of left talus, subsequent encounter for fracture with routine healing
S92.112G	Displaced fracture of neck of left talus, subsequent encounter for fracture with delayed healing
S92.112S	Displaced fracture of neck of left talus, sequela
S92.113D	Displaced fracture of neck of unspecified talus, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.113G	Displaced fracture of neck of unspecified talus, subsequent encounter for fracture with delayed healing
S92.113S	Displaced fracture of neck of unspecified talus, sequela
S92.114D	Nondisplaced fracture of neck of right talus, subsequent encounter for fracture with routine healing
S92.114G	Nondisplaced fracture of neck of right talus, subsequent encounter for fracture with delayed healing
S92.114S	Nondisplaced fracture of neck of right talus, sequela
S92.115D	Nondisplaced fracture of neck of left talus, subsequent encounter for fracture with routine healing
S92.115G	Nondisplaced fracture of neck of left talus, subsequent encounter for fracture with delayed healing
S92.115S	Nondisplaced fracture of neck of left talus, sequela
S92.116D	Nondisplaced fracture of neck of unspecified talus, subsequent encounter for fracture with routine healing
S92.116G	Nondisplaced fracture of neck of unspecified talus, subsequent encounter for fracture with delayed healing
S92.116S	Nondisplaced fracture of neck of unspecified talus, sequela
S92.121D	Displaced fracture of body of right talus, subsequent encounter for fracture with routine healing
S92.121G	Displaced fracture of body of right talus, subsequent encounter for fracture with delayed healing
S92.121S	Displaced fracture of body of right talus, sequela
S92.122D	Displaced fracture of body of left talus, subsequent encounter for fracture with routine healing
S92.122G	Displaced fracture of body of left talus, subsequent encounter for fracture with delayed healing
S92.122S	Displaced fracture of body of left talus, sequela
S92.123D	Displaced fracture of body of unspecified talus, subsequent encounter for fracture with routine healing
S92.123G	Displaced fracture of body of unspecified talus, subsequent encounter for fracture with delayed healing
S92.123S	Displaced fracture of body of unspecified talus, sequela
S92.124D	Nondisplaced fracture of body of right talus, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.124G	Nondisplaced fracture of body of right talus, subsequent encounter for fracture with delayed healing
S92.124S	Nondisplaced fracture of body of right talus, sequela
S92.125D	Nondisplaced fracture of body of left talus, subsequent encounter for fracture with routine healing
S92.125G	Nondisplaced fracture of body of left talus, subsequent encounter for fracture with delayed healing
S92.125S	Nondisplaced fracture of body of left talus, sequela
S92.126D	Nondisplaced fracture of body of unspecified talus, subsequent encounter for fracture with routine healing
S92.126G	Nondisplaced fracture of body of unspecified talus, subsequent encounter for fracture with delayed healing
S92.126S	Nondisplaced fracture of body of unspecified talus, sequela
S92.131D	Displaced fracture of posterior process of right talus, subsequent encounter for fracture with routine healing
S92.131G	Displaced fracture of posterior process of right talus, subsequent encounter for fracture with delayed healing
S92.131S	Displaced fracture of posterior process of right talus, sequela
S92.132D	Displaced fracture of posterior process of left talus, subsequent encounter for fracture with routine healing
S92.132G	Displaced fracture of posterior process of left talus, subsequent encounter for fracture with delayed healing
S92.132S	Displaced fracture of posterior process of left talus, sequela
S92.133D	Displaced fracture of posterior process of unspecified talus, subsequent encounter for fracture with routine healing
S92.133G	Displaced fracture of posterior process of unspecified talus, subsequent encounter for fracture with delayed healing
S92.133S	Displaced fracture of posterior process of unspecified talus, sequela
S92.134D	Nondisplaced fracture of posterior process of right talus, subsequent encounter for fracture with routine healing
S92.134G	Nondisplaced fracture of posterior process of right talus, subsequent encounter for fracture with delayed healing
S92.134S	Nondisplaced fracture of posterior process of right talus, sequela
S92.135D	Nondisplaced fracture of posterior process of left talus, subsequent encounter for fracture with routine healing



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Code	Description
S92.135G	Nondisplaced fracture of posterior process of left talus, subsequent encounter for fracture with delayed healing
S92.135S	Nondisplaced fracture of posterior process of left talus, sequela
S92.136D	Nondisplaced fracture of posterior process of unspecified talus, subsequent encounter for fracture with routine healing
S92.136G	Nondisplaced fracture of posterior process of unspecified talus, subsequent encounter for fracture with delayed healing
S92.136S	Nondisplaced fracture of posterior process of unspecified talus, sequela
S92.141D	Displaced dome fracture of right talus, subsequent encounter for fracture with routine healing
S92.141G	Displaced dome fracture of right talus, subsequent encounter for fracture with delayed healing
S92.141S	Displaced dome fracture of right talus, sequela
S92.142D	Displaced dome fracture of left talus, subsequent encounter for fracture with routine healing
S92.142G	Displaced dome fracture of left talus, subsequent encounter for fracture with delayed healing
S92.142S	Displaced dome fracture of left talus, sequela
S92.143D	Displaced dome fracture of unspecified talus, subsequent encounter for fracture with routine healing
S92.143G	Displaced dome fracture of unspecified talus, subsequent encounter for fracture with delayed healing
S92.143S	Displaced dome fracture of unspecified talus, sequela
S92.144D	Nondisplaced dome fracture of right talus, subsequent encounter for fracture with routine healing
S92.144G	Nondisplaced dome fracture of right talus, subsequent encounter for fracture with delayed healing
S92.144S	Nondisplaced dome fracture of right talus, sequela
S92.145D	Nondisplaced dome fracture of left talus, subsequent encounter for fracture with routine healing
S92.145G	Nondisplaced dome fracture of left talus, subsequent encounter for fracture with delayed healing
S92.145S	Nondisplaced dome fracture of left talus, sequela
S92.146D	Nondisplaced dome fracture of unspecified talus, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.146G	Nondisplaced dome fracture of unspecified talus, subsequent encounter for fracture with delayed healing
S92.146S	Nondisplaced dome fracture of unspecified talus, sequela
S92.151D	Displaced avulsion fracture (chip fracture) of right talus, subsequent encounter for fracture with routine healing
S92.151G	Displaced avulsion fracture (chip fracture) of right talus, subsequent encounter for fracture with delayed healing
S92.151S	Displaced avulsion fracture (chip fracture) of right talus, sequela
S92.152D	Displaced avulsion fracture (chip fracture) of left talus, subsequent encounter for fracture with routine healing
S92.152G	Displaced avulsion fracture (chip fracture) of left talus, subsequent encounter for fracture with delayed healing
S92.152S	Displaced avulsion fracture (chip fracture) of left talus, sequela
S92.153D	Displaced avulsion fracture (chip fracture) of unspecified talus, subsequent encounter for fracture with routine healing
S92.153G	Displaced avulsion fracture (chip fracture) of unspecified talus, subsequent encounter for fracture with delayed healing
S92.153S	Displaced avulsion fracture (chip fracture) of unspecified talus, sequela
S92.154D	Nondisplaced avulsion fracture (chip fracture) of right talus, subsequent encounter for fracture with routine healing
S92.154G	Nondisplaced avulsion fracture (chip fracture) of right talus, subsequent encounter for fracture with delayed healing
S92.154S	Nondisplaced avulsion fracture (chip fracture) of right talus, sequela
S92.155D	Nondisplaced avulsion fracture (chip fracture) of left talus, subsequent encounter for fracture with routine healing
S92.155G	Nondisplaced avulsion fracture (chip fracture) of left talus, subsequent encounter for fracture with delayed healing
S92.155S	Nondisplaced avulsion fracture (chip fracture) of left talus, sequela
S92.156D	Nondisplaced avulsion fracture (chip fracture) of unspecified talus, subsequent encounter for fracture with routine healing
S92.156G	Nondisplaced avulsion fracture (chip fracture) of unspecified talus, subsequent encounter for fracture with delayed healing
S92.156S	Nondisplaced avulsion fracture (chip fracture) of unspecified talus, sequela
S92.191D	Other fracture of right talus, subsequent encounter for fracture with routine healing
S92.191G	Other fracture of right talus, subsequent encounter for fracture with delayed healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.191S	Other fracture of right talus, sequela
S92.192D	Other fracture of left talus, subsequent encounter for fracture with routine healing
S92.192G	Other fracture of left talus, subsequent encounter for fracture with delayed healing
S92.192S	Other fracture of left talus, sequela
S92.199D	Other fracture of unspecified talus, subsequent encounter for fracture with routine healing
S92.199G	Other fracture of unspecified talus, subsequent encounter for fracture with delayed healing
S92.199S	Other fracture of unspecified talus, sequela
S92.201D	Fracture of unspecified tarsal bone(s) of right foot, subsequent encounter for fracture with routine healing
S92.201G	Fracture of unspecified tarsal bone(s) of right foot, subsequent encounter for fracture with delayed healing
S92.201S	Fracture of unspecified tarsal bone(s) of right foot, sequela
S92.202D	Fracture of unspecified tarsal bone(s) of left foot, subsequent encounter for fracture with routine healing
S92.202G	Fracture of unspecified tarsal bone(s) of left foot, subsequent encounter for fracture with delayed healing
S92.202S	Fracture of unspecified tarsal bone(s) of left foot, sequela
S92.209D	Fracture of unspecified tarsal bone(s) of unspecified foot, subsequent encounter for fracture with routine healing
S92.209G	Fracture of unspecified tarsal bone(s) of unspecified foot, subsequent encounter for fracture with delayed healing
S92.209S	Fracture of unspecified tarsal bone(s) of unspecified foot, sequela
S92.211D	Displaced fracture of cuboid bone of right foot, subsequent encounter for fracture with routine healing
S92.211G	Displaced fracture of cuboid bone of right foot, subsequent encounter for fracture with delayed healing
S92.211S	Displaced fracture of cuboid bone of right foot, sequela
S92.212D	Displaced fracture of cuboid bone of left foot, subsequent encounter for fracture with routine healing
S92.212G	Displaced fracture of cuboid bone of left foot, subsequent encounter for fracture with delayed healing
S92.212S	Displaced fracture of cuboid bone of left foot, sequela
S92.213D	Displaced fracture of cuboid bone of unspecified foot, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.213G	Displaced fracture of cuboid bone of unspecified foot, subsequent encounter for fracture with delayed healing
S92.213S	Displaced fracture of cuboid bone of unspecified foot, sequela
S92.214D	Nondisplaced fracture of cuboid bone of right foot, subsequent encounter for fracture with routine healing
S92.214G	Nondisplaced fracture of cuboid bone of right foot, subsequent encounter for fracture with delayed healing
S92.214S	Nondisplaced fracture of cuboid bone of right foot, sequela
S92.215D	Nondisplaced fracture of cuboid bone of left foot, subsequent encounter for fracture with routine healing
S92.215G	Nondisplaced fracture of cuboid bone of left foot, subsequent encounter for fracture with delayed healing
S92.215S	Nondisplaced fracture of cuboid bone of left foot, sequela
S92.216D	Nondisplaced fracture of cuboid bone of unspecified foot, subsequent encounter for fracture with routine healing
S92.216G	Nondisplaced fracture of cuboid bone of unspecified foot, subsequent encounter for fracture with delayed healing
S92.216S	Nondisplaced fracture of cuboid bone of unspecified foot, sequela
S92.221D	Displaced fracture of lateral cuneiform of right foot, subsequent encounter for fracture with routine healing
S92.221G	Displaced fracture of lateral cuneiform of right foot, subsequent encounter for fracture with delayed healing
S92.221S	Displaced fracture of lateral cuneiform of right foot, sequela
S92.222D	Displaced fracture of lateral cuneiform of left foot, subsequent encounter for fracture with routine healing
S92.222G	Displaced fracture of lateral cuneiform of left foot, subsequent encounter for fracture with delayed healing
S92.222S	Displaced fracture of lateral cuneiform of left foot, sequela
S92.223D	Displaced fracture of lateral cuneiform of unspecified foot, subsequent encounter for fracture with routine healing
S92.223G	Displaced fracture of lateral cuneiform of unspecified foot, subsequent encounter for fracture with delayed healing
S92.223S	Displaced fracture of lateral cuneiform of unspecified foot, sequela
S92.224D	Nondisplaced fracture of lateral cuneiform of right foot, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.224G	Nondisplaced fracture of lateral cuneiform of right foot, subsequent encounter for fracture with delayed healing
S92.224S	Nondisplaced fracture of lateral cuneiform of right foot, sequela
S92.225D	Nondisplaced fracture of lateral cuneiform of left foot, subsequent encounter for fracture with routine healing
S92.225G	Nondisplaced fracture of lateral cuneiform of left foot, subsequent encounter for fracture with delayed healing
S92.225S	Nondisplaced fracture of lateral cuneiform of left foot, sequela
S92.226D	Nondisplaced fracture of lateral cuneiform of unspecified foot, subsequent encounter for fracture with routine healing
S92.226G	Nondisplaced fracture of lateral cuneiform of unspecified foot, subsequent encounter for fracture with delayed healing
S92.226S	Nondisplaced fracture of lateral cuneiform of unspecified foot, sequela
S92.231D	Displaced fracture of intermediate cuneiform of right foot, subsequent encounter for fracture with routine healing
S92.231G	Displaced fracture of intermediate cuneiform of right foot, subsequent encounter for fracture with delayed healing
S92.231S	Displaced fracture of intermediate cuneiform of right foot, sequela
S92.232D	Displaced fracture of intermediate cuneiform of left foot, subsequent encounter for fracture with routine healing
S92.232G	Displaced fracture of intermediate cuneiform of left foot, subsequent encounter for fracture with delayed healing
S92.232S	Displaced fracture of intermediate cuneiform of left foot, sequela
S92.233D	Displaced fracture of intermediate cuneiform of unspecified foot, subsequent encounter for fracture with routine healing
S92.233G	Displaced fracture of intermediate cuneiform of unspecified foot, subsequent encounter for fracture with delayed healing
S92.233S	Displaced fracture of intermediate cuneiform of unspecified foot, sequela
S92.234D	Nondisplaced fracture of intermediate cuneiform of right foot, subsequent encounter for fracture with routine healing
S92.234G	Nondisplaced fracture of intermediate cuneiform of right foot, subsequent encounter for fracture with delayed healing
S92.234S	Nondisplaced fracture of intermediate cuneiform of right foot, sequela
S92.235D	Nondisplaced fracture of intermediate cuneiform of left foot, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.235G	Nondisplaced fracture of intermediate cuneiform of left foot, subsequent encounter for fracture with delayed healing
S92.235S	Nondisplaced fracture of intermediate cuneiform of left foot, sequela
S92.236D	Nondisplaced fracture of intermediate cuneiform of unspecified foot, subsequent encounter for fracture with routine healing
S92.236G	Nondisplaced fracture of intermediate cuneiform of unspecified foot, subsequent encounter for fracture with delayed healing
S92.236S	Nondisplaced fracture of intermediate cuneiform of unspecified foot, sequela
S92.241D	Displaced fracture of medial cuneiform of right foot, subsequent encounter for fracture with routine healing
S92.241G	Displaced fracture of medial cuneiform of right foot, subsequent encounter for fracture with delayed healing
S92.241S	Displaced fracture of medial cuneiform of right foot, sequela
S92.242D	Displaced fracture of medial cuneiform of left foot, subsequent encounter for fracture with routine healing
S92.242G	Displaced fracture of medial cuneiform of left foot, subsequent encounter for fracture with delayed healing
S92.242S	Displaced fracture of medial cuneiform of left foot, sequela
S92.243D	Displaced fracture of medial cuneiform of unspecified foot, subsequent encounter for fracture with routine healing
S92.243G	Displaced fracture of medial cuneiform of unspecified foot, subsequent encounter for fracture with delayed healing
S92.243S	Displaced fracture of medial cuneiform of unspecified foot, sequela
S92.244D	Nondisplaced fracture of medial cuneiform of right foot, subsequent encounter for fracture with routine healing
S92.244G	Nondisplaced fracture of medial cuneiform of right foot, subsequent encounter for fracture with delayed healing
S92.244S	Nondisplaced fracture of medial cuneiform of right foot, sequela
S92.245D	Nondisplaced fracture of medial cuneiform of left foot, subsequent encounter for fracture with routine healing
S92.245G	Nondisplaced fracture of medial cuneiform of left foot, subsequent encounter for fracture with delayed healing
S92.245S	Nondisplaced fracture of medial cuneiform of left foot, sequela
S92.246D	Nondisplaced fracture of medial cuneiform of unspecified foot, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.246G	Nondisplaced fracture of medial cuneiform of unspecified foot, subsequent encounter for fracture with delayed healing
S92.246S	Nondisplaced fracture of medial cuneiform of unspecified foot, sequela
S92.251D	Displaced fracture of navicular [scaphoid] of right foot, subsequent encounter for fracture with routine healing
S92.251G	Displaced fracture of navicular [scaphoid] of right foot, subsequent encounter for fracture with delayed healing
S92.251S	Displaced fracture of navicular [scaphoid] of right foot, sequela
S92.252D	Displaced fracture of navicular [scaphoid] of left foot, subsequent encounter for fracture with routine healing
S92.252G	Displaced fracture of navicular [scaphoid] of left foot, subsequent encounter for fracture with delayed healing
S92.252S	Displaced fracture of navicular [scaphoid] of left foot, sequela
S92.253D	Displaced fracture of navicular [scaphoid] of unspecified foot, subsequent encounter for fracture with routine healing
S92.253G	Displaced fracture of navicular [scaphoid] of unspecified foot, subsequent encounter for fracture with delayed healing
S92.253S	Displaced fracture of navicular [scaphoid] of unspecified foot, sequela
S92.254D	Nondisplaced fracture of navicular [scaphoid] of right foot, subsequent encounter for fracture with routine healing
S92.254G	Nondisplaced fracture of navicular [scaphoid] of right foot, subsequent encounter for fracture with delayed healing
S92.254S	Nondisplaced fracture of navicular [scaphoid] of right foot, sequela
S92.255D	Nondisplaced fracture of navicular [scaphoid] of left foot, subsequent encounter for fracture with routine healing
S92.255G	Nondisplaced fracture of navicular [scaphoid] of left foot, subsequent encounter for fracture with delayed healing
S92.255S	Nondisplaced fracture of navicular [scaphoid] of left foot, sequela
S92.256D	Nondisplaced fracture of navicular [scaphoid] of unspecified foot, subsequent encounter for fracture with routine healing
S92.256G	Nondisplaced fracture of navicular [scaphoid] of unspecified foot, subsequent encounter for fracture with delayed healing
S92.256S	Nondisplaced fracture of navicular [scaphoid] of unspecified foot, sequela
S92.301D	Fracture of unspecified metatarsal bone(s), right foot, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.301G	Fracture of unspecified metatarsal bone(s), right foot, subsequent encounter for fracture with delayed healing
S92.301S	Fracture of unspecified metatarsal bone(s), right foot, sequela
S92.302D	Fracture of unspecified metatarsal bone(s), left foot, subsequent encounter for fracture with routine healing
S92.302G	Fracture of unspecified metatarsal bone(s), left foot, subsequent encounter for fracture with delayed healing
S92.302S	Fracture of unspecified metatarsal bone(s), left foot, sequela
S92.309D	Fracture of unspecified metatarsal bone(s), unspecified foot, subsequent encounter for fracture with routine healing
S92.309G	Fracture of unspecified metatarsal bone(s), unspecified foot, subsequent encounter for fracture with delayed healing
S92.309S	Fracture of unspecified metatarsal bone(s), unspecified foot, sequela
S92.311D	Displaced fracture of first metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.311G	Displaced fracture of first metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.311S	Displaced fracture of first metatarsal bone, right foot, sequela
S92.312D	Displaced fracture of first metatarsal bone, left foot, subsequent encounter for fracture with routine healing
S92.312G	Displaced fracture of first metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.312S	Displaced fracture of first metatarsal bone, left foot, sequela
S92.313D	Displaced fracture of first metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.313G	Displaced fracture of first metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.313S	Displaced fracture of first metatarsal bone, unspecified foot, sequela
S92.314D	Nondisplaced fracture of first metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.314G	Nondisplaced fracture of first metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.314S	Nondisplaced fracture of first metatarsal bone, right foot, sequela
S92.315D	Nondisplaced fracture of first metatarsal bone, left foot, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.315G	Nondisplaced fracture of first metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.315S	Nondisplaced fracture of first metatarsal bone, left foot, sequela
S92.316D	Nondisplaced fracture of first metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.316G	Nondisplaced fracture of first metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.316S	Nondisplaced fracture of first metatarsal bone, unspecified foot, sequela
S92.321D	Displaced fracture of second metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.321G	Displaced fracture of second metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.321S	Displaced fracture of second metatarsal bone, right foot, sequela
S92.322D	Displaced fracture of second metatarsal bone, left foot, subsequent encounter for fracture with routine healing
S92.322G	Displaced fracture of second metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.322S	Displaced fracture of second metatarsal bone, left foot, sequela
S92.323D	Displaced fracture of second metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.323G	Displaced fracture of second metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.323S	Displaced fracture of second metatarsal bone, unspecified foot, sequela
S92.324D	Nondisplaced fracture of second metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.324G	Nondisplaced fracture of second metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.324S	Nondisplaced fracture of second metatarsal bone, right foot, sequela
S92.325D	Nondisplaced fracture of second metatarsal bone, left foot, subsequent encounter for fracture with routine healing
S92.325G	Nondisplaced fracture of second metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.325S	Nondisplaced fracture of second metatarsal bone, left foot, sequela
S92.326D	Nondisplaced fracture of second metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.326G	Nondisplaced fracture of second metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.326S	Nondisplaced fracture of second metatarsal bone, unspecified foot, sequela
S92.331D	Displaced fracture of third metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.331G	Displaced fracture of third metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.331S	Displaced fracture of third metatarsal bone, right foot, sequela
S92.332D	Displaced fracture of third metatarsal bone, left foot, subsequent encounter for fracture with routine healing
S92.332G	Displaced fracture of third metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.332S	Displaced fracture of third metatarsal bone, left foot, sequela
S92.333D	Displaced fracture of third metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.333G	Displaced fracture of third metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.333S	Displaced fracture of third metatarsal bone, unspecified foot, sequela
S92.334D	Nondisplaced fracture of third metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.334G	Nondisplaced fracture of third metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.334S	Nondisplaced fracture of third metatarsal bone, right foot, sequela
S92.335D	Nondisplaced fracture of third metatarsal bone, left foot, subsequent encounter for fracture with routine healing
S92.335G	Nondisplaced fracture of third metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.335S	Nondisplaced fracture of third metatarsal bone, left foot, sequela
S92.336D	Nondisplaced fracture of third metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.336G	Nondisplaced fracture of third metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.336S	Nondisplaced fracture of third metatarsal bone, unspecified foot, sequela
S92.341D	Displaced fracture of fourth metatarsal bone, right foot, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.341G	Displaced fracture of fourth metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.341S	Displaced fracture of fourth metatarsal bone, right foot, sequela
S92.342D	Displaced fracture of fourth metatarsal bone, left foot, subsequent encounter for fracture with routine healing
S92.342G	Displaced fracture of fourth metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.342S	Displaced fracture of fourth metatarsal bone, left foot, sequela
S92.343D	Displaced fracture of fourth metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.343G	Displaced fracture of fourth metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.343S	Displaced fracture of fourth metatarsal bone, unspecified foot, sequela
S92.344D	Nondisplaced fracture of fourth metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.344G	Nondisplaced fracture of fourth metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.344S	Nondisplaced fracture of fourth metatarsal bone, right foot, sequela
S92.345D	Nondisplaced fracture of fourth metatarsal bone, left foot, subsequent encounter for fracture with routine healing
S92.345G	Nondisplaced fracture of fourth metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.345S	Nondisplaced fracture of fourth metatarsal bone, left foot, sequela
S92.346D	Nondisplaced fracture of fourth metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.346G	Nondisplaced fracture of fourth metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.346S	Nondisplaced fracture of fourth metatarsal bone, unspecified foot, sequela
S92.351D	Displaced fracture of fifth metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.351G	Displaced fracture of fifth metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.351S	Displaced fracture of fifth metatarsal bone, right foot, sequela
S92.352D	Displaced fracture of fifth metatarsal bone, left foot, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.352G	Displaced fracture of fifth metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.352S	Displaced fracture of fifth metatarsal bone, left foot, sequela
S92.353D	Displaced fracture of fifth metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.353G	Displaced fracture of fifth metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.353S	Displaced fracture of fifth metatarsal bone, unspecified foot, sequela
S92.354D	Nondisplaced fracture of fifth metatarsal bone, right foot, subsequent encounter for fracture with routine healing
S92.354G	Nondisplaced fracture of fifth metatarsal bone, right foot, subsequent encounter for fracture with delayed healing
S92.354S	Nondisplaced fracture of fifth metatarsal bone, right foot, sequela
S92.355D	Nondisplaced fracture of fifth metatarsal bone, left foot, subsequent encounter for fracture with routine healing
S92.355G	Nondisplaced fracture of fifth metatarsal bone, left foot, subsequent encounter for fracture with delayed healing
S92.355S	Nondisplaced fracture of fifth metatarsal bone, left foot, sequela
S92.356D	Nondisplaced fracture of fifth metatarsal bone, unspecified foot, subsequent encounter for fracture with routine healing
S92.356G	Nondisplaced fracture of fifth metatarsal bone, unspecified foot, subsequent encounter for fracture with delayed healing
S92.356S	Nondisplaced fracture of fifth metatarsal bone, unspecified foot, sequela
S92.401D	Displaced unspecified fracture of right great toe, subsequent encounter for fracture with routine healing
S92.401G	Displaced unspecified fracture of right great toe, subsequent encounter for fracture with delayed healing
S92.401S	Displaced unspecified fracture of right great toe, sequela
S92.402D	Displaced unspecified fracture of left great toe, subsequent encounter for fracture with routine healing
S92.402G	Displaced unspecified fracture of left great toe, subsequent encounter for fracture with delayed healing
S92.402S	Displaced unspecified fracture of left great toe, sequela
S92.403D	Displaced unspecified fracture of unspecified great toe, subsequent encounter for fracture with routine healing

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.403G	Displaced unspecified fracture of unspecified great toe, subsequent encounter for fracture with delayed healing
S92.403S	Displaced unspecified fracture of unspecified great toe, sequela
S92.404D	Nondisplaced unspecified fracture of right great toe, subsequent encounter for fracture with routine healing
S92.404G	Nondisplaced unspecified fracture of right great toe, subsequent encounter for fracture with delayed healing
S92.404S	Nondisplaced unspecified fracture of right great toe, sequela
S92.405D	Nondisplaced unspecified fracture of left great toe, subsequent encounter for fracture with routine healing
S92.405G	Nondisplaced unspecified fracture of left great toe, subsequent encounter for fracture with delayed healing
S92.405S	Nondisplaced unspecified fracture of left great toe, sequela
S92.406D	Nondisplaced unspecified fracture of unspecified great toe, subsequent encounter for fracture with routine healing
S92.406G	Nondisplaced unspecified fracture of unspecified great toe, subsequent encounter for fracture with delayed healing
S92.406S	Nondisplaced unspecified fracture of unspecified great toe, sequela
S92.411D	Displaced fracture of proximal phalanx of right great toe, subsequent encounter for fracture with routine healing
S92.411G	Displaced fracture of proximal phalanx of right great toe, subsequent encounter for fracture with delayed healing
S92.411S	Displaced fracture of proximal phalanx of right great toe, sequela
S92.412D	Displaced fracture of proximal phalanx of left great toe, subsequent encounter for fracture with routine healing
S92.412G	Displaced fracture of proximal phalanx of left great toe, subsequent encounter for fracture with delayed healing
S92.412S	Displaced fracture of proximal phalanx of left great toe, sequela
S92.413D	Displaced fracture of proximal phalanx of unspecified great toe, subsequent encounter for fracture with routine healing
S92.413G	Displaced fracture of proximal phalanx of unspecified great toe, subsequent encounter for fracture with delayed healing
S92.413S	Displaced fracture of proximal phalanx of unspecified great toe, sequela
S92.414D	Nondisplaced fracture of proximal phalanx of right great toe, subsequent encounter for fracture with routine healing



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.414G	Nondisplaced fracture of proximal phalanx of right great toe, subsequent encounter for fracture with delayed healing
S92.414S	Nondisplaced fracture of proximal phalanx of right great toe, sequela
S92.415D	Nondisplaced fracture of proximal phalanx of left great toe, subsequent encounter for fracture with routine healing
S92.415G	Nondisplaced fracture of proximal phalanx of left great toe, subsequent encounter for fracture with delayed healing
S92.415S	Nondisplaced fracture of proximal phalanx of left great toe, sequela
S92.416D	Nondisplaced fracture of proximal phalanx of unspecified great toe, subsequent encounter for fracture with routine healing
S92.416G	Nondisplaced fracture of proximal phalanx of unspecified great toe, subsequent encounter for fracture with delayed healing
S92.416S	Nondisplaced fracture of proximal phalanx of unspecified great toe, sequela
S92.421D	Displaced fracture of distal phalanx of right great toe, subsequent encounter for fracture with routine healing
S92.421G	Displaced fracture of distal phalanx of right great toe, subsequent encounter for fracture with delayed healing
S92.421S	Displaced fracture of distal phalanx of right great toe, sequela
S92.422D	Displaced fracture of distal phalanx of left great toe, subsequent encounter for fracture with routine healing
S92.422G	Displaced fracture of distal phalanx of left great toe, subsequent encounter for fracture with delayed healing
S92.422S	Displaced fracture of distal phalanx of left great toe, sequela
S92.423D	Displaced fracture of distal phalanx of unspecified great toe, subsequent encounter for fracture with routine healing
S92.423G	Displaced fracture of distal phalanx of unspecified great toe, subsequent encounter for fracture with delayed healing
S92.423S	Displaced fracture of distal phalanx of unspecified great toe, sequela
S92.424D	Nondisplaced fracture of distal phalanx of right great toe, subsequent encounter for fracture with routine healing
S92.424G	Nondisplaced fracture of distal phalanx of right great toe, subsequent encounter for fracture with delayed healing
S92.424S	Nondisplaced fracture of distal phalanx of right great toe, sequela
S92.425D	Nondisplaced fracture of distal phalanx of left great toe, subsequent encounter for fracture with routine healing

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S92.425G	Nondisplaced fracture of distal phalanx of left great toe, subsequent encounter for fracture with delayed healing
S92.425S	Nondisplaced fracture of distal phalanx of left great toe, sequela
S92.426D	Nondisplaced fracture of distal phalanx of unspecified great toe, subsequent encounter for fracture with routine healing
S92.426G	Nondisplaced fracture of distal phalanx of unspecified great toe, subsequent encounter for fracture with delayed healing
S92.426S	Nondisplaced fracture of distal phalanx of unspecified great toe, sequela
S92.491D	Other fracture of right great toe, subsequent encounter for fracture with routine healing
S92.491G	Other fracture of right great toe, subsequent encounter for fracture with delayed healing
S92.491S	Other fracture of right great toe, sequela
S92.492D	Other fracture of left great toe, subsequent encounter for fracture with routine healing
S92.492G	Other fracture of left great toe, subsequent encounter for fracture with delayed healing
S92.492S	Other fracture of left great toe, sequela
S92.499D	Other fracture of unspecified great toe, subsequent encounter for fracture with routine healing
S92.499G	Other fracture of unspecified great toe, subsequent encounter for fracture with delayed healing
S92.499S	Other fracture of unspecified great toe, sequela
S92.501D	Displaced unspecified fracture of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.501G	Displaced unspecified fracture of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.501S	Displaced unspecified fracture of right lesser toe(s), sequela
S92.502D	Displaced unspecified fracture of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.502G	Displaced unspecified fracture of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.502S	Displaced unspecified fracture of left lesser toe(s), sequela
S92.503D	Displaced unspecified fracture of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.503G	Displaced unspecified fracture of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.503S	Displaced unspecified fracture of unspecified lesser toe(s), sequela

NCD 190.15

***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.504D	Nondisplaced unspecified fracture of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.504G	Nondisplaced unspecified fracture of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.504S	Nondisplaced unspecified fracture of right lesser toe(s), sequela
S92.505D	Nondisplaced unspecified fracture of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.505G	Nondisplaced unspecified fracture of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.505S	Nondisplaced unspecified fracture of left lesser toe(s), sequela
S92.506D	Nondisplaced unspecified fracture of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.506G	Nondisplaced unspecified fracture of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.506S	Nondisplaced unspecified fracture of unspecified lesser toe(s), sequela
S92.511D	Displaced fracture of proximal phalanx of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.511G	Displaced fracture of proximal phalanx of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.511S	Displaced fracture of proximal phalanx of right lesser toe(s), sequela
S92.512D	Displaced fracture of proximal phalanx of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.512G	Displaced fracture of proximal phalanx of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.512S	Displaced fracture of proximal phalanx of left lesser toe(s), sequela
S92.513D	Displaced fracture of proximal phalanx of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.513G	Displaced fracture of proximal phalanx of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.513S	Displaced fracture of proximal phalanx of unspecified lesser toe(s), sequela
S92.514D	Nondisplaced fracture of proximal phalanx of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.514G	Nondisplaced fracture of proximal phalanx of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.514S	Nondisplaced fracture of proximal phalanx of right lesser toe(s), sequela

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***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.515D	Nondisplaced fracture of proximal phalanx of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.515G	Nondisplaced fracture of proximal phalanx of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.515S	Nondisplaced fracture of proximal phalanx of left lesser toe(s), sequela
S92.516D	Nondisplaced fracture of proximal phalanx of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.516G	Nondisplaced fracture of proximal phalanx of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.516S	Nondisplaced fracture of proximal phalanx of unspecified lesser toe(s), sequela
S92.521D	Displaced fracture of medial phalanx of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.521G	Displaced fracture of medial phalanx of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.521S	Displaced fracture of medial phalanx of right lesser toe(s), sequela
S92.522D	Displaced fracture of medial phalanx of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.522G	Displaced fracture of medial phalanx of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.522S	Displaced fracture of medial phalanx of left lesser toe(s), sequela
S92.523D	Displaced fracture of medial phalanx of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.523G	Displaced fracture of medial phalanx of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.523S	Displaced fracture of medial phalanx of unspecified lesser toe(s), sequela
S92.524D	Nondisplaced fracture of medial phalanx of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.524G	Nondisplaced fracture of medial phalanx of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.524S	Nondisplaced fracture of medial phalanx of right lesser toe(s), sequela
S92.525D	Nondisplaced fracture of medial phalanx of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.525G	Nondisplaced fracture of medial phalanx of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.525S	Nondisplaced fracture of medial phalanx of left lesser toe(s), sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S92.526D	Nondisplaced fracture of medial phalanx of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.526G	Nondisplaced fracture of medial phalanx of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.526S	Nondisplaced fracture of medial phalanx of unspecified lesser toe(s), sequela
S92.531D	Displaced fracture of distal phalanx of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.531G	Displaced fracture of distal phalanx of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.531S	Displaced fracture of distal phalanx of right lesser toe(s), sequela
S92.532D	Displaced fracture of distal phalanx of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.532G	Displaced fracture of distal phalanx of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.532S	Displaced fracture of distal phalanx of left lesser toe(s), sequela
S92.533D	Displaced fracture of distal phalanx of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.533G	Displaced fracture of distal phalanx of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.533S	Displaced fracture of distal phalanx of unspecified lesser toe(s), sequela
S92.534D	Nondisplaced fracture of distal phalanx of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.534G	Nondisplaced fracture of distal phalanx of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.534S	Nondisplaced fracture of distal phalanx of right lesser toe(s), sequela
S92.535D	Nondisplaced fracture of distal phalanx of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.535G	Nondisplaced fracture of distal phalanx of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.535S	Nondisplaced fracture of distal phalanx of left lesser toe(s), sequela
S92.536D	Nondisplaced fracture of distal phalanx of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.536G	Nondisplaced fracture of distal phalanx of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.536S	Nondisplaced fracture of distal phalanx of unspecified lesser toe(s), sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S92.591D	Other fracture of right lesser toe(s), subsequent encounter for fracture with routine healing
S92.591G	Other fracture of right lesser toe(s), subsequent encounter for fracture with delayed healing
S92.591S	Other fracture of right lesser toe(s), sequela
S92.592D	Other fracture of left lesser toe(s), subsequent encounter for fracture with routine healing
S92.592G	Other fracture of left lesser toe(s), subsequent encounter for fracture with delayed healing
S92.592S	Other fracture of left lesser toe(s), sequela
S92.599D	Other fracture of unspecified lesser toe(s), subsequent encounter for fracture with routine healing
S92.599G	Other fracture of unspecified lesser toe(s), subsequent encounter for fracture with delayed healing
S92.599S	Other fracture of unspecified lesser toe(s), sequela
*S92.812A	*Other fracture of left foot, initial encounter for closed fracture
*S92.812B	*Other fracture of left foot, initial encounter for open fracture
*S92.819A	*Other fracture of unspecified foot, initial encounter for closed fracture
*S92.819B	*Other fracture of unspecified foot, initial encounter for open fracture
S92.901D	Unspecified fracture of right foot, subsequent encounter for fracture with routine healing
S92.901G	Unspecified fracture of right foot, subsequent encounter for fracture with delayed healing
S92.901S	Unspecified fracture of right foot, sequela
S92.902D	Unspecified fracture of left foot, subsequent encounter for fracture with routine healing
S92.902G	Unspecified fracture of left foot, subsequent encounter for fracture with delayed healing
S92.902S	Unspecified fracture of left foot, sequela
S92.909D	Unspecified fracture of unspecified foot, subsequent encounter for fracture with routine healing
S92.909G	Unspecified fracture of unspecified foot, subsequent encounter for fracture with delayed healing
S92.909S	Unspecified fracture of unspecified foot, sequela
S92.911D	Unspecified fracture of right toe(s), subsequent encounter for fracture with routine healing
S92.911G	Unspecified fracture of right toe(s), subsequent encounter for fracture with delayed healing
S92.911S	Unspecified fracture of right toe(s), sequela
S92.912D	Unspecified fracture of left toe(s), subsequent encounter for fracture with routine healing
S92.912G	Unspecified fracture of left toe(s), subsequent encounter for fracture with delayed healing
S92.912S	Unspecified fracture of left toe(s), sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S92.919D	Unspecified fracture of unspecified toe(s), subsequent encounter for fracture with routine healing
S92.919G	Unspecified fracture of unspecified toe(s), subsequent encounter for fracture with delayed healing
S92.919S	Unspecified fracture of unspecified toe(s), sequela
S93.01XA	Subluxation of right ankle joint, initial encounter
S93.01XS	Subluxation of right ankle joint, sequela
S93.02XA	Subluxation of left ankle joint, initial encounter
S93.02XS	Subluxation of left ankle joint, sequela
S93.03XA	Subluxation of unspecified ankle joint, initial encounter
S93.03XS	Subluxation of unspecified ankle joint, sequela
S93.04XA	Dislocation of right ankle joint, initial encounter
S93.04XS	Dislocation of right ankle joint, sequela
S93.05XA	Dislocation of left ankle joint, initial encounter
S93.05XS	Dislocation of left ankle joint, sequela
S93.06XA	Dislocation of unspecified ankle joint, initial encounter
S93.06XS	Dislocation of unspecified ankle joint, sequela
S93.101A	Unspecified subluxation of right toe(s), initial encounter
S93.101S	Unspecified subluxation of right toe(s), sequela
S93.102A	Unspecified subluxation of left toe(s), initial encounter
S93.102S	Unspecified subluxation of left toe(s), sequela
S93.103A	Unspecified subluxation of unspecified toe(s), initial encounter
S93.103S	Unspecified subluxation of unspecified toe(s), sequela
S93.104A	Unspecified dislocation of right toe(s), initial encounter
S93.104S	Unspecified dislocation of right toe(s), sequela
S93.105A	Unspecified dislocation of left toe(s), initial encounter
S93.105S	Unspecified dislocation of left toe(s), sequela
S93.106A	Unspecified dislocation of unspecified toe(s), initial encounter
S93.106S	Unspecified dislocation of unspecified toe(s), sequela
S93.111A	Dislocation of interphalangeal joint of right great toe, initial encounter
S93.111S	Dislocation of interphalangeal joint of right great toe, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S93.112A	Dislocation of interphalangeal joint of left great toe, initial encounter
S93.112S	Dislocation of interphalangeal joint of left great toe, sequela
S93.113A	Dislocation of interphalangeal joint of unspecified great toe, initial encounter
S93.113S	Dislocation of interphalangeal joint of unspecified great toe, sequela
S93.114A	Dislocation of interphalangeal joint of right lesser toe(s), initial encounter
S93.114S	Dislocation of interphalangeal joint of right lesser toe(s), sequela
S93.115A	Dislocation of interphalangeal joint of left lesser toe(s), initial encounter
S93.115S	Dislocation of interphalangeal joint of left lesser toe(s), sequela
S93.116A	Dislocation of interphalangeal joint of unspecified lesser toe(s), initial encounter
S93.116S	Dislocation of interphalangeal joint of unspecified lesser toe(s), sequela
S93.119A	Dislocation of interphalangeal joint of unspecified toe(s), initial encounter
S93.119S	Dislocation of interphalangeal joint of unspecified toe(s), sequela
S93.121A	Dislocation of metatarsophalangeal joint of right great toe, initial encounter
S93.121S	Dislocation of metatarsophalangeal joint of right great toe, sequela
S93.122A	Dislocation of metatarsophalangeal joint of left great toe, initial encounter
S93.122S	Dislocation of metatarsophalangeal joint of left great toe, sequela
S93.123A	Dislocation of metatarsophalangeal joint of unspecified great toe, initial encounter
S93.123S	Dislocation of metatarsophalangeal joint of unspecified great toe, sequela
S93.124A	Dislocation of metatarsophalangeal joint of right lesser toe(s), initial encounter
S93.124S	Dislocation of metatarsophalangeal joint of right lesser toe(s), sequela
S93.125A	Dislocation of metatarsophalangeal joint of left lesser toe(s), initial encounter
S93.125S	Dislocation of metatarsophalangeal joint of left lesser toe(s), sequela
S93.126A	Dislocation of metatarsophalangeal joint of unspecified lesser toe(s), initial encounter
S93.126S	Dislocation of metatarsophalangeal joint of unspecified lesser toe(s), sequela
S93.129A	Dislocation of metatarsophalangeal joint of unspecified toe(s), initial encounter
S93.129S	Dislocation of metatarsophalangeal joint of unspecified toe(s), sequela
S93.131A	Subluxation of interphalangeal joint of right great toe, initial encounter
S93.131S	Subluxation of interphalangeal joint of right great toe, sequela
S93.132A	Subluxation of interphalangeal joint of left great toe, initial encounter
S93.132S	Subluxation of interphalangeal joint of left great toe, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S93.133A	Subluxation of interphalangeal joint of unspecified great toe, initial encounter
S93.133S	Subluxation of interphalangeal joint of unspecified great toe, sequela
S93.134A	Subluxation of interphalangeal joint of right lesser toe(s), initial encounter
S93.134S	Subluxation of interphalangeal joint of right lesser toe(s), sequela
S93.135A	Subluxation of interphalangeal joint of left lesser toe(s), initial encounter
S93.135S	Subluxation of interphalangeal joint of left lesser toe(s), sequela
S93.136A	Subluxation of interphalangeal joint of unspecified lesser toe(s), initial encounter
S93.136S	Subluxation of interphalangeal joint of unspecified lesser toe(s), sequela
S93.139A	Subluxation of interphalangeal joint of unspecified toe(s), initial encounter
S93.139S	Subluxation of interphalangeal joint of unspecified toe(s), sequela
S93.141A	Subluxation of metatarsophalangeal joint of right great toe, initial encounter
S93.141S	Subluxation of metatarsophalangeal joint of right great toe, sequela
S93.142A	Subluxation of metatarsophalangeal joint of left great toe, initial encounter
S93.142S	Subluxation of metatarsophalangeal joint of left great toe, sequela
S93.143A	Subluxation of metatarsophalangeal joint of unspecified great toe, initial encounter
S93.143S	Subluxation of metatarsophalangeal joint of unspecified great toe, sequela
S93.144A	Subluxation of metatarsophalangeal joint of right lesser toe(s), initial encounter
S93.144S	Subluxation of metatarsophalangeal joint of right lesser toe(s), sequela
S93.145A	Subluxation of metatarsophalangeal joint of left lesser toe(s), initial encounter
S93.145S	Subluxation of metatarsophalangeal joint of left lesser toe(s), sequela
S93.146A	Subluxation of metatarsophalangeal joint of unspecified lesser toe(s), initial encounter
S93.146S	Subluxation of metatarsophalangeal joint of unspecified lesser toe(s), sequela
S93.149A	Subluxation of metatarsophalangeal joint of unspecified toe(s), initial encounter
S93.149S	Subluxation of metatarsophalangeal joint of unspecified toe(s), sequela
S93.301A	Unspecified subluxation of right foot, initial encounter
S93.301S	Unspecified subluxation of right foot, sequela
S93.302A	Unspecified subluxation of left foot, initial encounter
S93.302S	Unspecified subluxation of left foot, sequela
S93.303A	Unspecified subluxation of unspecified foot, initial encounter
S93.303S	Unspecified subluxation of unspecified foot, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S93.304A	Unspecified dislocation of right foot, initial encounter
S93.304S	Unspecified dislocation of right foot, sequela
S93.305A	Unspecified dislocation of left foot, initial encounter
S93.305S	Unspecified dislocation of left foot, sequela
S93.306A	Unspecified dislocation of unspecified foot, initial encounter
S93.306S	Unspecified dislocation of unspecified foot, sequela
S93.311A	Subluxation of tarsal joint of right foot, initial encounter
S93.311S	Subluxation of tarsal joint of right foot, sequela
S93.312A	Subluxation of tarsal joint of left foot, initial encounter
S93.312S	Subluxation of tarsal joint of left foot, sequela
S93.313A	Subluxation of tarsal joint of unspecified foot, initial encounter
S93.313S	Subluxation of tarsal joint of unspecified foot, sequela
S93.314A	Dislocation of tarsal joint of right foot, initial encounter
S93.314S	Dislocation of tarsal joint of right foot, sequela
S93.315A	Dislocation of tarsal joint of left foot, initial encounter
S93.315S	Dislocation of tarsal joint of left foot, sequela
S93.316A	Dislocation of tarsal joint of unspecified foot, initial encounter
S93.316S	Dislocation of tarsal joint of unspecified foot, sequela
S93.321A	Subluxation of tarsometatarsal joint of right foot, initial encounter
S93.321S	Subluxation of tarsometatarsal joint of right foot, sequela
S93.322A	Subluxation of tarsometatarsal joint of left foot, initial encounter
S93.322S	Subluxation of tarsometatarsal joint of left foot, sequela
S93.323A	Subluxation of tarsometatarsal joint of unspecified foot, initial encounter
S93.323S	Subluxation of tarsometatarsal joint of unspecified foot, sequela
S93.324A	Dislocation of tarsometatarsal joint of right foot, initial encounter
S93.324S	Dislocation of tarsometatarsal joint of right foot, sequela
S93.325A	Dislocation of tarsometatarsal joint of left foot, initial encounter
S93.325S	Dislocation of tarsometatarsal joint of left foot, sequela
S93.326A	Dislocation of tarsometatarsal joint of unspecified foot, initial encounter
S93.326S	Dislocation of tarsometatarsal joint of unspecified foot, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S93.331A	Other subluxation of right foot, initial encounter
S93.331S	Other subluxation of right foot, sequela
S93.332A	Other subluxation of left foot, initial encounter
S93.332S	Other subluxation of left foot, sequela
S93.333A	Other subluxation of unspecified foot, initial encounter
S93.333S	Other subluxation of unspecified foot, sequela
S93.334A	Other dislocation of right foot, initial encounter
S93.334S	Other dislocation of right foot, sequela
S93.335A	Other dislocation of left foot, initial encounter
S93.335S	Other dislocation of left foot, sequela
S93.336A	Other dislocation of unspecified foot, initial encounter
S93.336S	Other dislocation of unspecified foot, sequela
S93.401A	Sprain of unspecified ligament of right ankle, initial encounter
S93.401S	Sprain of unspecified ligament of right ankle, sequela
S93.402A	Sprain of unspecified ligament of left ankle, initial encounter
S93.402S	Sprain of unspecified ligament of left ankle, sequela
S93.409A	Sprain of unspecified ligament of unspecified ankle, initial encounter
S93.409S	Sprain of unspecified ligament of unspecified ankle, sequela
S93.411A	Sprain of calcaneofibular ligament of right ankle, initial encounter
S93.411S	Sprain of calcaneofibular ligament of right ankle, sequela
S93.412A	Sprain of calcaneofibular ligament of left ankle, initial encounter
S93.412S	Sprain of calcaneofibular ligament of left ankle, sequela
S93.419A	Sprain of calcaneofibular ligament of unspecified ankle, initial encounter
S93.419S	Sprain of calcaneofibular ligament of unspecified ankle, sequela
S93.421A	Sprain of deltoid ligament of right ankle, initial encounter
S93.421S	Sprain of deltoid ligament of right ankle, sequela
S93.422A	Sprain of deltoid ligament of left ankle, initial encounter
S93.422S	Sprain of deltoid ligament of left ankle, sequela
S93.429A	Sprain of deltoid ligament of unspecified ankle, initial encounter
S93.429S	Sprain of deltoid ligament of unspecified ankle, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S93.431A	Sprain of tibiofibular ligament of right ankle, initial encounter
S93.431S	Sprain of tibiofibular ligament of right ankle, sequela
S93.432A	Sprain of tibiofibular ligament of left ankle, initial encounter
S93.432S	Sprain of tibiofibular ligament of left ankle, sequela
S93.439A	Sprain of tibiofibular ligament of unspecified ankle, initial encounter
S93.439S	Sprain of tibiofibular ligament of unspecified ankle, sequela
S93.491A	Sprain of other ligament of right ankle, initial encounter
S93.491S	Sprain of other ligament of right ankle, sequela
S93.492A	Sprain of other ligament of left ankle, initial encounter
S93.492S	Sprain of other ligament of left ankle, sequela
S93.499A	Sprain of other ligament of unspecified ankle, initial encounter
S93.499S	Sprain of other ligament of unspecified ankle, sequela
S93.501A	Unspecified sprain of right great toe, initial encounter
S93.501S	Unspecified sprain of right great toe, sequela
S93.502A	Unspecified sprain of left great toe, initial encounter
S93.502S	Unspecified sprain of left great toe, sequela
S93.503A	Unspecified sprain of unspecified great toe, initial encounter
S93.503S	Unspecified sprain of unspecified great toe, sequela
S93.504A	Unspecified sprain of right lesser toe(s), initial encounter
S93.504S	Unspecified sprain of right lesser toe(s), sequela
S93.505A	Unspecified sprain of left lesser toe(s), initial encounter
S93.505S	Unspecified sprain of left lesser toe(s), sequela
S93.506A	Unspecified sprain of unspecified lesser toe(s), initial encounter
S93.506S	Unspecified sprain of unspecified lesser toe(s), sequela
S93.509A	Unspecified sprain of unspecified toe(s), initial encounter
S93.509S	Unspecified sprain of unspecified toe(s), sequela
S93.511A	Sprain of interphalangeal joint of right great toe, initial encounter
S93.511S	Sprain of interphalangeal joint of right great toe, sequela
S93.512A	Sprain of interphalangeal joint of left great toe, initial encounter
S93.512S	Sprain of interphalangeal joint of left great toe, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S93.513A	Sprain of interphalangeal joint of unspecified great toe, initial encounter
S93.513S	Sprain of interphalangeal joint of unspecified great toe, sequela
S93.514A	Sprain of interphalangeal joint of right lesser toe(s), initial encounter
S93.514S	Sprain of interphalangeal joint of right lesser toe(s), sequela
S93.515A	Sprain of interphalangeal joint of left lesser toe(s), initial encounter
S93.515S	Sprain of interphalangeal joint of left lesser toe(s), sequela
S93.516A	Sprain of interphalangeal joint of unspecified lesser toe(s), initial encounter
S93.516S	Sprain of interphalangeal joint of unspecified lesser toe(s), sequela
S93.519A	Sprain of interphalangeal joint of unspecified toe(s), initial encounter
S93.519S	Sprain of interphalangeal joint of unspecified toe(s), sequela
S93.521A	Sprain of metatarsophalangeal joint of right great toe, initial encounter
S93.521S	Sprain of metatarsophalangeal joint of right great toe, sequela
S93.522A	Sprain of metatarsophalangeal joint of left great toe, initial encounter
S93.522S	Sprain of metatarsophalangeal joint of left great toe, sequela
S93.523A	Sprain of metatarsophalangeal joint of unspecified great toe, initial encounter
S93.523S	Sprain of metatarsophalangeal joint of unspecified great toe, sequela
S93.524A	Sprain of metatarsophalangeal joint of right lesser toe(s), initial encounter
S93.524S	Sprain of metatarsophalangeal joint of right lesser toe(s), sequela
S93.525A	Sprain of metatarsophalangeal joint of left lesser toe(s), initial encounter
S93.525S	Sprain of metatarsophalangeal joint of left lesser toe(s), sequela
S93.526A	Sprain of metatarsophalangeal joint of unspecified lesser toe(s), initial encounter
S93.526S	Sprain of metatarsophalangeal joint of unspecified lesser toe(s), sequela
S93.529A	Sprain of metatarsophalangeal joint of unspecified toe(s), initial encounter
S93.529S	Sprain of metatarsophalangeal joint of unspecified toe(s), sequela
S93.601A	Unspecified sprain of right foot, initial encounter
S93.601S	Unspecified sprain of right foot, sequela
S93.602A	Unspecified sprain of left foot, initial encounter
S93.602S	Unspecified sprain of left foot, sequela
S93.609A	Unspecified sprain of unspecified foot, initial encounter
S93.609S	Unspecified sprain of unspecified foot, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
S93.611A	Sprain of tarsal ligament of right foot, initial encounter
S93.611S	Sprain of tarsal ligament of right foot, sequela
S93.612A	Sprain of tarsal ligament of left foot, initial encounter
S93.612S	Sprain of tarsal ligament of left foot, sequela
S93.619A	Sprain of tarsal ligament of unspecified foot, initial encounter
S93.619S	Sprain of tarsal ligament of unspecified foot, sequela
S93.621A	Sprain of tarsometatarsal ligament of right foot, initial encounter
S93.621S	Sprain of tarsometatarsal ligament of right foot, sequela
S93.622A	Sprain of tarsometatarsal ligament of left foot, initial encounter
S93.622S	Sprain of tarsometatarsal ligament of left foot, sequela
S93.629A	Sprain of tarsometatarsal ligament of unspecified foot, initial encounter
S93.629S	Sprain of tarsometatarsal ligament of unspecified foot, sequela
S93.691A	Other sprain of right foot, initial encounter
S93.691S	Other sprain of right foot, sequela
S93.692A	Other sprain of left foot, initial encounter
S93.692S	Other sprain of left foot, sequela
S93.699A	Other sprain of unspecified foot, initial encounter
S93.699S	Other sprain of unspecified foot, sequela
S94.00XA	Injury of lateral plantar nerve, unspecified leg, initial encounter
S94.00XS	Injury of lateral plantar nerve, unspecified leg, sequela
S94.01XA	Injury of lateral plantar nerve, right leg, initial encounter
S94.01XS	Injury of lateral plantar nerve, right leg, sequela
S94.02XA	Injury of lateral plantar nerve, left leg, initial encounter
S94.02XS	Injury of lateral plantar nerve, left leg, sequela
S94.10XA	Injury of medial plantar nerve, unspecified leg, initial encounter
S94.10XS	Injury of medial plantar nerve, unspecified leg, sequela
S94.11XA	Injury of medial plantar nerve, right leg, initial encounter
S94.11XS	Injury of medial plantar nerve, right leg, sequela
S94.12XA	Injury of medial plantar nerve, left leg, initial encounter
S94.12XS	Injury of medial plantar nerve, left leg, sequela

NCD 190.15

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S94.20XA	Injury of deep peroneal nerve at ankle and foot level, unspecified leg, initial encounter
S94.20XS	Injury of deep peroneal nerve at ankle and foot level, unspecified leg, sequela
S94.21XA	Injury of deep peroneal nerve at ankle and foot level, right leg, initial encounter
S94.21XS	Injury of deep peroneal nerve at ankle and foot level, right leg, sequela
S94.22XA	Injury of deep peroneal nerve at ankle and foot level, left leg, initial encounter
S94.22XS	Injury of deep peroneal nerve at ankle and foot level, left leg, sequela
S94.30XA	Injury of cutaneous sensory nerve at ankle and foot level, unspecified leg, initial encounter
S94.30XS	Injury of cutaneous sensory nerve at ankle and foot level, unspecified leg, sequela
S94.31XA	Injury of cutaneous sensory nerve at ankle and foot level, right leg, initial encounter
S94.31XS	Injury of cutaneous sensory nerve at ankle and foot level, right leg, sequela
S94.32XA	Injury of cutaneous sensory nerve at ankle and foot level, left leg, initial encounter
S94.32XS	Injury of cutaneous sensory nerve at ankle and foot level, left leg, sequela
S94.8X1A	Injury of other nerves at ankle and foot level, right leg, initial encounter
S94.8X1S	Injury of other nerves at ankle and foot level, right leg, sequela
S94.8X2A	Injury of other nerves at ankle and foot level, left leg, initial encounter
S94.8X2S	Injury of other nerves at ankle and foot level, left leg, sequela
S94.8X9A	Injury of other nerves at ankle and foot level, unspecified leg, initial encounter
S94.8X9S	Injury of other nerves at ankle and foot level, unspecified leg, sequela
S94.90XA	Injury of unspecified nerve at ankle and foot level, unspecified leg, initial encounter
S94.90XS	Injury of unspecified nerve at ankle and foot level, unspecified leg, sequela
S94.91XA	Injury of unspecified nerve at ankle and foot level, right leg, initial encounter
S94.91XS	Injury of unspecified nerve at ankle and foot level, right leg, sequela
S94.92XA	Injury of unspecified nerve at ankle and foot level, left leg, initial encounter
S94.92XS	Injury of unspecified nerve at ankle and foot level, left leg, sequela
S95.001S	Unspecified injury of dorsal artery of right foot, sequela
S95.002S	Unspecified injury of dorsal artery of left foot, sequela
S95.009S	Unspecified injury of dorsal artery of unspecified foot, sequela
S95.011S	Laceration of dorsal artery of right foot, sequela
S95.012S	Laceration of dorsal artery of left foot, sequela
S95.019S	Laceration of dorsal artery of unspecified foot, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S95.091S	Other specified injury of dorsal artery of right foot, sequela
S95.092S	Other specified injury of dorsal artery of left foot, sequela
S95.099S	Other specified injury of dorsal artery of unspecified foot, sequela
S95.101S	Unspecified injury of plantar artery of right foot, sequela
S95.102S	Unspecified injury of plantar artery of left foot, sequela
S95.109S	Unspecified injury of plantar artery of unspecified foot, sequela
S95.111S	Laceration of plantar artery of right foot, sequela
S95.112S	Laceration of plantar artery of left foot, sequela
S95.119S	Laceration of plantar artery of unspecified foot, sequela
S95.191S	Other specified injury of plantar artery of right foot, sequela
S95.192S	Other specified injury of plantar artery of left foot, sequela
S95.199S	Other specified injury of plantar artery of unspecified foot, sequela
S95.201S	Unspecified injury of dorsal vein of right foot, sequela
S95.202S	Unspecified injury of dorsal vein of left foot, sequela
S95.209S	Unspecified injury of dorsal vein of unspecified foot, sequela
S95.211S	Laceration of dorsal vein of right foot, sequela
S95.212S	Laceration of dorsal vein of left foot, sequela
S95.219S	Laceration of dorsal vein of unspecified foot, sequela
S95.291S	Other specified injury of dorsal vein of right foot, sequela
S95.292S	Other specified injury of dorsal vein of left foot, sequela
S95.299S	Other specified injury of dorsal vein of unspecified foot, sequela
S95.801S	Unspecified injury of other blood vessels at ankle and foot level, right leg, sequela
S95.802S	Unspecified injury of other blood vessels at ankle and foot level, left leg, sequela
S95.809S	Unspecified injury of other blood vessels at ankle and foot level, unspecified leg, sequela
S95.811S	Laceration of other blood vessels at ankle and foot level, right leg, sequela
S95.812S	Laceration of other blood vessels at ankle and foot level, left leg, sequela
S95.819S	Laceration of other blood vessels at ankle and foot level, unspecified leg, sequela
S95.891S	Other specified injury of other blood vessels at ankle and foot level, right leg, sequela
S95.892S	Other specified injury of other blood vessels at ankle and foot level, left leg, sequela
S95.899S	Other specified injury of other blood vessels at ankle and foot level, unspecified leg, sequela

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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S95.901S	Unspecified injury of unspecified blood vessel at ankle and foot level, right leg, sequela
S95.902S	Unspecified injury of unspecified blood vessel at ankle and foot level, left leg, sequela
S95.909S	Unspecified injury of unspecified blood vessel at ankle and foot level, unspecified leg, sequela
S95.911S	Laceration of unspecified blood vessel at ankle and foot level, right leg, sequela
S95.912S	Laceration of unspecified blood vessel at ankle and foot level, left leg, sequela
S95.919S	Laceration of unspecified blood vessel at ankle and foot level, unspecified leg, sequela
S95.991S	Other specified injury of unspecified blood vessel at ankle and foot level, right leg, sequela
S95.992S	Other specified injury of unspecified blood vessel at ankle and foot level, left leg, sequela
S95.999S	Other specified injury of unspecified blood vessel at ankle and foot level, unspecified leg, sequela
S96.001S	Unspecified injury of muscle and tendon of long flexor muscle of toe at ankle and foot level, right foot, sequela
S96.002S	Unspecified injury of muscle and tendon of long flexor muscle of toe at ankle and foot level, left foot, sequela
S96.009S	Unspecified injury of muscle and tendon of long flexor muscle of toe at ankle and foot level, unspecified foot, sequela
S96.011A	Strain of muscle and tendon of long flexor muscle of toe at ankle and foot level, right foot, initial encounter
S96.011S	Strain of muscle and tendon of long flexor muscle of toe at ankle and foot level, right foot, sequela
S96.012A	Strain of muscle and tendon of long flexor muscle of toe at ankle and foot level, left foot, initial encounter
S96.012S	Strain of muscle and tendon of long flexor muscle of toe at ankle and foot level, left foot, sequela
S96.019A	Strain of muscle and tendon of long flexor muscle of toe at ankle and foot level, unspecified foot, initial encounter
S96.019S	Strain of muscle and tendon of long flexor muscle of toe at ankle and foot level, unspecified foot, sequela
S96.021S	Laceration of muscle and tendon of long flexor muscle of toe at ankle and foot level, right foot, sequela
S96.022S	Laceration of muscle and tendon of long flexor muscle of toe at ankle and foot level, left foot, sequela
S96.029S	Laceration of muscle and tendon of long flexor muscle of toe at ankle and foot level, unspecified foot, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S96.091S	Other injury of muscle and tendon of long flexor muscle of toe at ankle and foot level, right foot, sequela
S96.092S	Other injury of muscle and tendon of long flexor muscle of toe at ankle and foot level, left foot, sequela
S96.099S	Other injury of muscle and tendon of long flexor muscle of toe at ankle and foot level, unspecified foot, sequela
S96.101S	Unspecified injury of muscle and tendon of long extensor muscle of toe at ankle and foot level, right foot, sequela
S96.102S	Unspecified injury of muscle and tendon of long extensor muscle of toe at ankle and foot level, left foot, sequela
S96.109S	Unspecified injury of muscle and tendon of long extensor muscle of toe at ankle and foot level, unspecified foot, sequela
S96.111A	Strain of muscle and tendon of long extensor muscle of toe at ankle and foot level, right foot, initial encounter
S96.111S	Strain of muscle and tendon of long extensor muscle of toe at ankle and foot level, right foot, sequela
S96.112A	Strain of muscle and tendon of long extensor muscle of toe at ankle and foot level, left foot, initial encounter
S96.112S	Strain of muscle and tendon of long extensor muscle of toe at ankle and foot level, left foot, sequela
S96.119A	Strain of muscle and tendon of long extensor muscle of toe at ankle and foot level, unspecified foot, initial encounter
S96.119S	Strain of muscle and tendon of long extensor muscle of toe at ankle and foot level, unspecified foot, sequela
S96.121S	Laceration of muscle and tendon of long extensor muscle of toe at ankle and foot level, right foot, sequela
S96.122S	Laceration of muscle and tendon of long extensor muscle of toe at ankle and foot level, left foot, sequela
S96.129S	Laceration of muscle and tendon of long extensor muscle of toe at ankle and foot level, unspecified foot, sequela
S96.191S	Other specified injury of muscle and tendon of long extensor muscle of toe at ankle and foot level, right foot, sequela
S96.192S	Other specified injury of muscle and tendon of long extensor muscle of toe at ankle and foot level, left foot, sequela
S96.199S	Other specified injury of muscle and tendon of long extensor muscle of toe at ankle and foot level, unspecified foot, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S96.201S	Unspecified injury of intrinsic muscle and tendon at ankle and foot level, right foot, sequela
S96.202S	Unspecified injury of intrinsic muscle and tendon at ankle and foot level, left foot, sequela
S96.209S	Unspecified injury of intrinsic muscle and tendon at ankle and foot level, unspecified foot, sequela
S96.211A	Strain of intrinsic muscle and tendon at ankle and foot level, right foot, initial encounter
S96.211S	Strain of intrinsic muscle and tendon at ankle and foot level, right foot, sequela
S96.212A	Strain of intrinsic muscle and tendon at ankle and foot level, left foot, initial encounter
S96.212S	Strain of intrinsic muscle and tendon at ankle and foot level, left foot, sequela
S96.219A	Strain of intrinsic muscle and tendon at ankle and foot level, unspecified foot, initial encounter
S96.219S	Strain of intrinsic muscle and tendon at ankle and foot level, unspecified foot, sequela
S96.221S	Laceration of intrinsic muscle and tendon at ankle and foot level, right foot, sequela
S96.222S	Laceration of intrinsic muscle and tendon at ankle and foot level, left foot, sequela
S96.229S	Laceration of intrinsic muscle and tendon at ankle and foot level, unspecified foot, sequela
S96.291S	Other specified injury of intrinsic muscle and tendon at ankle and foot level, right foot, sequela
S96.292S	Other specified injury of intrinsic muscle and tendon at ankle and foot level, left foot, sequela
S96.299S	Other specified injury of intrinsic muscle and tendon at ankle and foot level, unspecified foot, sequela
S96.801S	Unspecified injury of other specified muscles and tendons at ankle and foot level, right foot, sequela
S96.802S	Unspecified injury of other specified muscles and tendons at ankle and foot level, left foot, sequela
S96.809S	Unspecified injury of other specified muscles and tendons at ankle and foot level, unspecified foot, sequela
S96.811A	Strain of other specified muscles and tendons at ankle and foot level, right foot, initial encounter
S96.811S	Strain of other specified muscles and tendons at ankle and foot level, right foot, sequela
S96.812A	Strain of other specified muscles and tendons at ankle and foot level, left foot, initial encounter
S96.812S	Strain of other specified muscles and tendons at ankle and foot level, left foot, sequela
S96.819A	Strain of other specified muscles and tendons at ankle and foot level, unspecified foot, initial encounter

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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S96.819S	Strain of other specified muscles and tendons at ankle and foot level, unspecified foot, sequela
S96.821S	Laceration of other specified muscles and tendons at ankle and foot level, right foot, sequela
S96.822S	Laceration of other specified muscles and tendons at ankle and foot level, left foot, sequela
S96.829S	Laceration of other specified muscles and tendons at ankle and foot level, unspecified foot, sequela
S96.891S	Other specified injury of other specified muscles and tendons at ankle and foot level, right foot, sequela
S96.892S	Other specified injury of other specified muscles and tendons at ankle and foot level, left foot, sequela
S96.899S	Other specified injury of other specified muscles and tendons at ankle and foot level, unspecified foot, sequela
S96.901S	Unspecified injury of unspecified muscle and tendon at ankle and foot level, right foot, sequela
S96.902S	Unspecified injury of unspecified muscle and tendon at ankle and foot level, left foot, sequela
S96.909S	Unspecified injury of unspecified muscle and tendon at ankle and foot level, unspecified foot, sequela
S96.911A	Strain of unspecified muscle and tendon at ankle and foot level, right foot, initial encounter
S96.911S	Strain of unspecified muscle and tendon at ankle and foot level, right foot, sequela
S96.912A	Strain of unspecified muscle and tendon at ankle and foot level, left foot, initial encounter
S96.912S	Strain of unspecified muscle and tendon at ankle and foot level, left foot, sequela
S96.919A	Strain of unspecified muscle and tendon at ankle and foot level, unspecified foot, initial encounter
S96.919S	Strain of unspecified muscle and tendon at ankle and foot level, unspecified foot, sequela
S96.921S	Laceration of unspecified muscle and tendon at ankle and foot level, right foot, sequela
S96.922S	Laceration of unspecified muscle and tendon at ankle and foot level, left foot, sequela
S96.929S	Laceration of unspecified muscle and tendon at ankle and foot level, unspecified foot, sequela
S96.991S	Other specified injury of unspecified muscle and tendon at ankle and foot level, right foot, sequela
S96.992S	Other specified injury of unspecified muscle and tendon at ankle and foot level, left foot, sequela



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S96.999S	Other specified injury of unspecified muscle and tendon at ankle and foot level, unspecified foot, sequela
S97.00XS	Crushing injury of unspecified ankle, sequela
S97.01XS	Crushing injury of right ankle, sequela
S97.02XS	Crushing injury of left ankle, sequela
S97.101S	Crushing injury of unspecified right toe(s), sequela
S97.102S	Crushing injury of unspecified left toe(s), sequela
S97.109S	Crushing injury of unspecified toe(s), sequela
S97.111S	Crushing injury of right great toe, sequela
S97.112S	Crushing injury of left great toe, sequela
S97.119S	Crushing injury of unspecified great toe, sequela
S97.121S	Crushing injury of right lesser toe(s), sequela
S97.122S	Crushing injury of left lesser toe(s), sequela
S97.129S	Crushing injury of unspecified lesser toe(s), sequela
S97.80XS	Crushing injury of unspecified foot, sequela
S97.81XS	Crushing injury of right foot, sequela
S97.82XS	Crushing injury of left foot, sequela
S98.011S	Complete traumatic amputation of right foot at ankle level, sequela
S98.012S	Complete traumatic amputation of left foot at ankle level, sequela
S98.019S	Complete traumatic amputation of unspecified foot at ankle level, sequela
S98.021S	Partial traumatic amputation of right foot at ankle level, sequela
S98.022S	Partial traumatic amputation of left foot at ankle level, sequela
S98.029S	Partial traumatic amputation of unspecified foot at ankle level, sequela
S98.111S	Complete traumatic amputation of right great toe, sequela
S98.112S	Complete traumatic amputation of left great toe, sequela
S98.119S	Complete traumatic amputation of unspecified great toe, sequela
S98.121S	Partial traumatic amputation of right great toe, sequela
S98.122S	Partial traumatic amputation of left great toe, sequela
S98.129S	Partial traumatic amputation of unspecified great toe, sequela
S98.131S	Complete traumatic amputation of one right lesser toe, sequela
S98.132S	Complete traumatic amputation of one left lesser toe, sequela

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S98.139S	Complete traumatic amputation of one unspecified lesser toe, sequela
S98.141S	Partial traumatic amputation of one right lesser toe, sequela
S98.142S	Partial traumatic amputation of one left lesser toe, sequela
S98.149S	Partial traumatic amputation of one unspecified lesser toe, sequela
S98.211S	Complete traumatic amputation of two or more right lesser toes, sequela
S98.212S	Complete traumatic amputation of two or more left lesser toes, sequela
S98.219S	Complete traumatic amputation of two or more unspecified lesser toes, sequela
S98.221S	Partial traumatic amputation of two or more right lesser toes, sequela
S98.222S	Partial traumatic amputation of two or more left lesser toes, sequela
S98.229S	Partial traumatic amputation of two or more unspecified lesser toes, sequela
S98.311S	Complete traumatic amputation of right midfoot, sequela
S98.312S	Complete traumatic amputation of left midfoot, sequela
S98.319S	Complete traumatic amputation of unspecified midfoot, sequela
S98.321S	Partial traumatic amputation of right midfoot, sequela
S98.322S	Partial traumatic amputation of left midfoot, sequela
S98.329S	Partial traumatic amputation of unspecified midfoot, sequela
S98.911S	Complete traumatic amputation of right foot, level unspecified, sequela
S98.912S	Complete traumatic amputation of left foot, level unspecified, sequela
S98.919S	Complete traumatic amputation of unspecified foot, level unspecified, sequela
S98.921S	Partial traumatic amputation of right foot, level unspecified, sequela
S98.922S	Partial traumatic amputation of left foot, level unspecified, sequela
S98.929S	Partial traumatic amputation of unspecified foot, level unspecified, sequela
*S99.001A	*Unspecified physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.002A	*Unspecified physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.002B	*Unspecified physeal fracture of left calcaneus, initial encounter for open fracture
*S99.009A	*Unspecified physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.009B	*Unspecified physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.011B	*Salter-Harris Type I physeal fracture of right calcaneus, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.011D	*Salter-Harris Type I physeal fracture of right calcaneus, subsequent encounter for fracture with routine healing
*S99.012A	*Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.012B	*Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for open fracture
*S99.019A	*Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.019B	*Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.021A	*Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.021B	*Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for open fracture
*S99.022A	*Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.022B	*Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for open fracture
*S99.029A	*Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.029B	*Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.031B	*Salter-Harris Type III physeal fracture of right calcaneus, initial encounter for open fracture
*S99.031D	*Salter-Harris Type III physeal fracture of right calcaneus, subsequent encounter for fracture with routine healing
*S99.032A	*Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.032B	*Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for open fracture
*S99.039A	*Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.039B	*Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.041A	*Salter-Harris Type IV physeal fracture of right calcaneus, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.041B	*Salter-Harris Type IV physeal fracture of right calcaneus, initial encounter for open fracture
*S99.042A	*Salter-Harris Type IV physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.042B	*Salter-Harris Type IV physeal fracture of left calcaneus, initial encounter for open fracture
*S99.049A	*Salter-Harris Type IV physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.049B	*Salter-Harris Type IV physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.091A	*Other physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.091B	*Other physeal fracture of right calcaneus, initial encounter for open fracture
*S99.092A	*Other physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.092B	*Other physeal fracture of left calcaneus, initial encounter for open fracture
*S99.099A	*Other physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.101A	*Unspecified physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.102A	*Unspecified physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.102B	*Unspecified physeal fracture of left metatarsal, initial encounter for open fracture
*S99.109A	*Unspecified physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.109B	*Unspecified physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.111A	*Salter-Harris Type I physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.111B	*Salter-Harris Type I physeal fracture of right metatarsal, initial encounter for open fracture
*S99.112A	*Salter-Harris Type I physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.112B	*Salter-Harris Type I physeal fracture of left metatarsal, initial encounter for open fracture
*S99.119A	*Salter-Harris Type I physeal fracture of unspecified metatarsal, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.119B	*Salter-Harris Type I physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.121A	*Salter-Harris Type II physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.121B	*Salter-Harris Type II physeal fracture of right metatarsal, initial encounter for open fracture
*S99.122A	*Salter-Harris Type II physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.122B	*Salter-Harris Type II physeal fracture of left metatarsal, initial encounter for open fracture
*S99.129A	*Salter-Harris Type II physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.129B	*Salter-Harris Type II physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.131A	*Salter-Harris Type III physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.131B	*Salter-Harris Type III physeal fracture of right metatarsal, initial encounter for open fracture
*S99.132A	*Salter-Harris Type III physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.132B	*Salter-Harris Type III physeal fracture of left metatarsal, initial encounter for open fracture
*S99.139A	*Salter-Harris Type III physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.139B	*Salter-Harris Type III physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.141A	*Salter-Harris Type IV physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.141B	*Salter-Harris Type IV physeal fracture of right metatarsal, initial encounter for open fracture
*S99.142A	*Salter-Harris Type IV physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.142B	*Salter-Harris Type IV physeal fracture of left metatarsal, initial encounter for open fracture
*S99.149A	*Salter-Harris Type IV physeal fracture of unspecified metatarsal, initial encounter for closed fracture



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Code	Description
*S99.149B	*Salter-Harris Type IV physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.192A	*Other physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.192B	*Other physeal fracture of left metatarsal, initial encounter for open fracture
*S99.199A	*Other physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.199B	*Other physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.201A	*Unspecified physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.201B	*Unspecified physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.202A	*Unspecified physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.202B	*Unspecified physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.209A	*Unspecified physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.209B	*Unspecified physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.211A	*Salter-Harris Type I physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.211B	*Salter-Harris Type I physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.212A	*Salter-Harris Type I physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.212B	*Salter-Harris Type I physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.219A	*Salter-Harris Type I physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.219B	*Salter-Harris Type I physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.221A	*Salter-Harris Type II physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.221B	*Salter-Harris Type II physeal fracture of phalanx of right toe, initial encounter for open fracture



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Code	Description
*S99.222A	*Salter-Harris Type II physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.222B	*Salter-Harris Type II physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.229A	*Salter-Harris Type II physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.229B	*Salter-Harris Type II physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.231A	*Salter-Harris Type III physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.231B	*Salter-Harris Type III physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.232A	*Salter-Harris Type III physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.232B	*Salter-Harris Type III physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.239A	*Salter-Harris Type III physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.239B	*Salter-Harris Type III physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.241A	*Salter-Harris Type IV physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.241B	*Salter-Harris Type IV physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.242A	*Salter-Harris Type IV physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.242B	*Salter-Harris Type IV physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.249A	*Salter-Harris Type IV physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.249B	*Salter-Harris Type IV physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.291A	*Other physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.291B	*Other physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.292A	*Other physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.292B	*Other physeal fracture of phalanx of left toe, initial encounter for open fracture



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Code	Description
*S99.299A	*Other physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.299B	*Other physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
S99.811S	Other specified injuries of right ankle, sequela
S99.812S	Other specified injuries of left ankle, sequela
S99.819S	Other specified injuries of unspecified ankle, sequela
S99.821S	Other specified injuries of right foot, sequela
S99.822S	Other specified injuries of left foot, sequela
S99.829S	Other specified injuries of unspecified foot, sequela
S99.911S	Unspecified injury of right ankle, sequela
S99.912S	Unspecified injury of left ankle, sequela
S99.919S	Unspecified injury of unspecified ankle, sequela
S99.921S	Unspecified injury of right foot, sequela
S99.922S	Unspecified injury of left foot, sequela
S99.929S	Unspecified injury of unspecified foot, sequela
T07	Unspecified multiple injuries
T14.90	Injury, unspecified
T15.00XA	Foreign body in cornea, unspecified eye, initial encounter
T15.00XS	Foreign body in cornea, unspecified eye, sequela
T15.01XA	Foreign body in cornea, right eye, initial encounter
T15.01XS	Foreign body in cornea, right eye, sequela
T15.02XA	Foreign body in cornea, left eye, initial encounter
T15.02XS	Foreign body in cornea, left eye, sequela
T15.10XA	Foreign body in conjunctival sac, unspecified eye, initial encounter
T15.10XS	Foreign body in conjunctival sac, unspecified eye, sequela
T15.11XA	Foreign body in conjunctival sac, right eye, initial encounter
T15.11XS	Foreign body in conjunctival sac, right eye, sequela
T15.12XA	Foreign body in conjunctival sac, left eye, initial encounter
T15.12XS	Foreign body in conjunctival sac, left eye, sequela
T15.80XA	Foreign body in other and multiple parts of external eye, unspecified eye, initial encounter

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Code	Description
T15.80XS	Foreign body in other and multiple parts of external eye, unspecified eye, sequela
T15.81XA	Foreign body in other and multiple parts of external eye, right eye, initial encounter
T15.81XS	Foreign body in other and multiple parts of external eye, right eye, sequela
T15.82XA	Foreign body in other and multiple parts of external eye, left eye, initial encounter
T15.82XS	Foreign body in other and multiple parts of external eye, left eye, sequela
T15.90XA	Foreign body on external eye, part unspecified, unspecified eye, initial encounter
T15.90XS	Foreign body on external eye, part unspecified, unspecified eye, sequela
T15.91XA	Foreign body on external eye, part unspecified, right eye, initial encounter
T15.91XS	Foreign body on external eye, part unspecified, right eye, sequela
T15.92XA	Foreign body on external eye, part unspecified, left eye, initial encounter
T15.92XS	Foreign body on external eye, part unspecified, left eye, sequela
T16.1XXA	Foreign body in right ear, initial encounter
T16.1XXS	Foreign body in right ear, sequela
T16.2XXA	Foreign body in left ear, initial encounter
T16.2XXS	Foreign body in left ear, sequela
T16.9XXA	Foreign body in ear, unspecified ear, initial encounter
T16.9XXS	Foreign body in ear, unspecified ear, sequela
T17.0XXA	Foreign body in nasal sinus, initial encounter
T17.0XXS	Foreign body in nasal sinus, sequela
T17.1XXA	Foreign body in nostril, initial encounter
T17.1XXS	Foreign body in nostril, sequela
T17.200S	Unspecified foreign body in pharynx causing asphyxiation, sequela
T17.208S	Unspecified foreign body in pharynx causing other injury, sequela
T17.210S	Gastric contents in pharynx causing asphyxiation, sequela
T17.218S	Gastric contents in pharynx causing other injury, sequela
T17.220S	Food in pharynx causing asphyxiation, sequela
T17.228S	Food in pharynx causing other injury, sequela
T17.290S	Other foreign object in pharynx causing asphyxiation, sequela
T17.298S	Other foreign object in pharynx causing other injury, sequela
T17.300S	Unspecified foreign body in larynx causing asphyxiation, sequela



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Code	Description
T17.308S	Unspecified foreign body in larynx causing other injury, sequela
T17.310S	Gastric contents in larynx causing asphyxiation, sequela
T17.318S	Gastric contents in larynx causing other injury, sequela
T17.320S	Food in larynx causing asphyxiation, sequela
T17.328S	Food in larynx causing other injury, sequela
T17.390S	Other foreign object in larynx causing asphyxiation, sequela
T17.398S	Other foreign object in larynx causing other injury, sequela
T17.400S	Unspecified foreign body in trachea causing asphyxiation, sequela
T17.408S	Unspecified foreign body in trachea causing other injury, sequela
T17.410S	Gastric contents in trachea causing asphyxiation, sequela
T17.418S	Gastric contents in trachea causing other injury, sequela
T17.420S	Food in trachea causing asphyxiation, sequela
T17.428S	Food in trachea causing other injury, sequela
T17.490S	Other foreign object in trachea causing asphyxiation, sequela
T17.498S	Other foreign object in trachea causing other injury, sequela
T17.500S	Unspecified foreign body in bronchus causing asphyxiation, sequela
T17.508S	Unspecified foreign body in bronchus causing other injury, sequela
T17.510S	Gastric contents in bronchus causing asphyxiation, sequela
T17.518S	Gastric contents in bronchus causing other injury, sequela
T17.520S	Food in bronchus causing asphyxiation, sequela
T17.528S	Food in bronchus causing other injury, sequela
T17.590S	Other foreign object in bronchus causing asphyxiation, sequela
T17.598S	Other foreign object in bronchus causing other injury, sequela
T17.800S	Unspecified foreign body in other parts of respiratory tract causing asphyxiation, sequela
T17.808S	Unspecified foreign body in other parts of respiratory tract causing other injury, sequela
T17.810S	Gastric contents in other parts of respiratory tract causing asphyxiation, sequela
T17.818S	Gastric contents in other parts of respiratory tract causing other injury, sequela
T17.820S	Food in other parts of respiratory tract causing asphyxiation, sequela
T17.828S	Food in other parts of respiratory tract causing other injury, sequela
T17.890S	Other foreign object in other parts of respiratory tract causing asphyxiation, sequela

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Code	Description
T17.898S	Other foreign object in other parts of respiratory tract causing other injury, sequela
T17.900S	Unspecified foreign body in respiratory tract, part unspecified causing asphyxiation, sequela
T17.908S	Unspecified foreign body in respiratory tract, part unspecified causing other injury, sequela
T17.910S	Gastric contents in respiratory tract, part unspecified causing asphyxiation, sequela
T17.918S	Gastric contents in respiratory tract, part unspecified causing other injury, sequela
T17.920S	Food in respiratory tract, part unspecified causing asphyxiation, sequela
T17.928S	Food in respiratory tract, part unspecified causing other injury, sequela
T17.990S	Other foreign object in respiratory tract, part unspecified in causing asphyxiation, sequela
T17.998S	Other foreign object in respiratory tract, part unspecified causing other injury, sequela
T18.0XXS	Foreign body in mouth, sequela
T18.100S	Unspecified foreign body in esophagus causing compression of trachea, sequela
T18.108S	Unspecified foreign body in esophagus causing other injury, sequela
T18.110S	Gastric contents in esophagus causing compression of trachea, sequela
T18.118S	Gastric contents in esophagus causing other injury, sequela
T18.120S	Food in esophagus causing compression of trachea, sequela
T18.128S	Food in esophagus causing other injury, sequela
T18.190S	Other foreign object in esophagus causing compression of trachea, sequela
T18.198S	Other foreign object in esophagus causing other injury, sequela
T18.2XXS	Foreign body in stomach, sequela
T18.3XXS	Foreign body in small intestine, sequela
T18.4XXS	Foreign body in colon, sequela
T18.5XXS	Foreign body in anus and rectum, sequela
T18.8XXS	Foreign body in other parts of alimentary tract, sequela
T18.9XXS	Foreign body of alimentary tract, part unspecified, sequela
T19.0XXS	Foreign body in urethra, sequela
T19.1XXS	Foreign body in bladder, sequela
T19.2XXS	Foreign body in vulva and vagina, sequela
T19.3XXS	Foreign body in uterus, sequela
T19.4XXS	Foreign body in penis, sequela
T19.8XXS	Foreign body in other parts of genitourinary tract, sequela

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Code	Description
T19.9XXS	Foreign body in genitourinary tract, part unspecified, sequela
T20.00XS	Burn of unspecified degree of head, face, and neck, unspecified site, sequela
T20.011S	Burn of unspecified degree of right ear [any part, except ear drum], sequela
T20.012S	Burn of unspecified degree of left ear [any part, except ear drum], sequela
T20.019S	Burn of unspecified degree of unspecified ear [any part, except ear drum], sequela
T20.02XS	Burn of unspecified degree of lip(s), sequela
T20.03XS	Burn of unspecified degree of chin, sequela
T20.04XS	Burn of unspecified degree of nose (septum), sequela
T20.05XS	Burn of unspecified degree of scalp [any part], sequela
T20.06XS	Burn of unspecified degree of forehead and cheek, sequela
T20.07XS	Burn of unspecified degree of neck, sequela
T20.09XS	Burn of unspecified degree of multiple sites of head, face, and neck, sequela
T20.10XS	Burn of first degree of head, face, and neck, unspecified site, sequela
T20.111S	Burn of first degree of right ear [any part, except ear drum], sequela
T20.112S	Burn of first degree of left ear [any part, except ear drum], sequela
T20.119S	Burn of first degree of unspecified ear [any part, except ear drum], sequela
T20.12XS	Burn of first degree of lip(s), sequela
T20.13XS	Burn of first degree of chin, sequela
T20.14XS	Burn of first degree of nose (septum), sequela
T20.15XS	Burn of first degree of scalp [any part], sequela
T20.16XS	Burn of first degree of forehead and cheek, sequela
T20.17XS	Burn of first degree of neck, sequela
T20.19XS	Burn of first degree of multiple sites of head, face, and neck, sequela
T20.20XS	Burn of second degree of head, face, and neck, unspecified site, sequela
T20.211S	Burn of second degree of right ear [any part, except ear drum], sequela
T20.212S	Burn of second degree of left ear [any part, except ear drum], sequela
T20.219S	Burn of second degree of unspecified ear [any part, except ear drum], sequela
T20.22XS	Burn of second degree of lip(s), sequela
T20.23XS	Burn of second degree of chin, sequela
T20.24XS	Burn of second degree of nose (septum), sequela

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Code	Description
T20.25XS	Burn of second degree of scalp [any part], sequela
T20.26XS	Burn of second degree of forehead and cheek, sequela
T20.27XS	Burn of second degree of neck, sequela
T20.29XS	Burn of second degree of multiple sites of head, face, and neck, sequela
T20.30XS	Burn of third degree of head, face, and neck, unspecified site, sequela
T20.311S	Burn of third degree of right ear [any part, except ear drum], sequela
T20.312S	Burn of third degree of left ear [any part, except ear drum], sequela
T20.319S	Burn of third degree of unspecified ear [any part, except ear drum], sequela
T20.32XS	Burn of third degree of lip(s), sequela
T20.33XS	Burn of third degree of chin, sequela
T20.34XS	Burn of third degree of nose (septum), sequela
T20.35XS	Burn of third degree of scalp [any part], sequela
T20.36XS	Burn of third degree of forehead and cheek, sequela
T20.37XS	Burn of third degree of neck, sequela
T20.39XS	Burn of third degree of multiple sites of head, face, and neck, sequela
T20.40XS	Corrosion of unspecified degree of head, face, and neck, unspecified site, sequela
T20.411S	Corrosion of unspecified degree of right ear [any part, except ear drum], sequela
T20.412S	Corrosion of unspecified degree of left ear [any part, except ear drum], sequela
T20.419S	Corrosion of unspecified degree of unspecified ear [any part, except ear drum], sequela
T20.42XS	Corrosion of unspecified degree of lip(s), sequela
T20.43XS	Corrosion of unspecified degree of chin, sequela
T20.44XS	Corrosion of unspecified degree of nose (septum), sequela
T20.45XS	Corrosion of unspecified degree of scalp [any part], sequela
T20.46XS	Corrosion of unspecified degree of forehead and cheek, sequela
T20.47XS	Corrosion of unspecified degree of neck, sequela
T20.49XS	Corrosion of unspecified degree of multiple sites of head, face, and neck, sequela
T20.50XS	Corrosion of first degree of head, face, and neck, unspecified site, sequela
T20.511S	Corrosion of first degree of right ear [any part, except ear drum], sequela
T20.512S	Corrosion of first degree of left ear [any part, except ear drum], sequela
T20.519S	Corrosion of first degree of unspecified ear [any part, except ear drum], sequela

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Code	Description
T20.52XS	Corrosion of first degree of lip(s), sequela
T20.53XS	Corrosion of first degree of chin, sequela
T20.54XS	Corrosion of first degree of nose (septum), sequela
T20.55XS	Corrosion of first degree of scalp [any part], sequela
T20.56XS	Corrosion of first degree of forehead and cheek, sequela
T20.57XS	Corrosion of first degree of neck, sequela
T20.59XS	Corrosion of first degree of multiple sites of head, face, and neck, sequela
T20.60XS	Corrosion of second degree of head, face, and neck, unspecified site, sequela
T20.611S	Corrosion of second degree of right ear [any part, except ear drum], sequela
T20.612S	Corrosion of second degree of left ear [any part, except ear drum], sequela
T20.619S	Corrosion of second degree of unspecified ear [any part, except ear drum], sequela
T20.62XS	Corrosion of second degree of lip(s), sequela
T20.63XS	Corrosion of second degree of chin, sequela
T20.64XS	Corrosion of second degree of nose (septum), sequela
T20.65XS	Corrosion of second degree of scalp [any part], sequela
T20.66XS	Corrosion of second degree of forehead and cheek, sequela
T20.67XS	Corrosion of second degree of neck, sequela
T20.69XS	Corrosion of second degree of multiple sites of head, face, and neck, sequela
T20.70XS	Corrosion of third degree of head, face, and neck, unspecified site, sequela
T20.711S	Corrosion of third degree of right ear [any part, except ear drum], sequela
T20.712S	Corrosion of third degree of left ear [any part, except ear drum], sequela
T20.719S	Corrosion of third degree of unspecified ear [any part, except ear drum], sequela
T20.72XS	Corrosion of third degree of lip(s), sequela
T20.73XS	Corrosion of third degree of chin, sequela
T20.74XS	Corrosion of third degree of nose (septum), sequela
T20.75XS	Corrosion of third degree of scalp [any part], sequela
T20.76XS	Corrosion of third degree of forehead and cheek, sequela
T20.77XS	Corrosion of third degree of neck, sequela
T20.79XS	Corrosion of third degree of multiple sites of head, face, and neck, sequela
T21.00XS	Burn of unspecified degree of trunk, unspecified site, sequela

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Code	Description
T21.01XS	Burn of unspecified degree of chest wall, sequela
T21.02XS	Burn of unspecified degree of abdominal wall, sequela
T21.03XS	Burn of unspecified degree of upper back, sequela
T21.04XS	Burn of unspecified degree of lower back, sequela
T21.05XS	Burn of unspecified degree of buttock, sequela
T21.06XS	Burn of unspecified degree of male genital region, sequela
T21.07XS	Burn of unspecified degree of female genital region, sequela
T21.09XS	Burn of unspecified degree of other site of trunk, sequela
T21.10XS	Burn of first degree of trunk, unspecified site, sequela
T21.11XS	Burn of first degree of chest wall, sequela
T21.12XS	Burn of first degree of abdominal wall, sequela
T21.13XS	Burn of first degree of upper back, sequela
T21.14XS	Burn of first degree of lower back, sequela
T21.15XS	Burn of first degree of buttock, sequela
T21.16XS	Burn of first degree of male genital region, sequela
T21.17XS	Burn of first degree of female genital region, sequela
T21.19XS	Burn of first degree of other site of trunk, sequela
T21.20XS	Burn of second degree of trunk, unspecified site, sequela
T21.21XS	Burn of second degree of chest wall, sequela
T21.22XS	Burn of second degree of abdominal wall, sequela
T21.23XS	Burn of second degree of upper back, sequela
T21.24XS	Burn of second degree of lower back, sequela
T21.25XS	Burn of second degree of buttock, sequela
T21.26XS	Burn of second degree of male genital region, sequela
T21.27XS	Burn of second degree of female genital region, sequela
T21.29XS	Burn of second degree of other site of trunk, sequela
T21.30XS	Burn of third degree of trunk, unspecified site, sequela
T21.31XS	Burn of third degree of chest wall, sequela
T21.32XS	Burn of third degree of abdominal wall, sequela
T21.33XS	Burn of third degree of upper back, sequela

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Code	Description
T21.34XS	Burn of third degree of lower back, sequela
T21.35XS	Burn of third degree of buttock, sequela
T21.36XS	Burn of third degree of male genital region, sequela
T21.37XS	Burn of third degree of female genital region, sequela
T21.39XS	Burn of third degree of other site of trunk, sequela
T21.40XS	Corrosion of unspecified degree of trunk, unspecified site, sequela
T21.41XS	Corrosion of unspecified degree of chest wall, sequela
T21.42XS	Corrosion of unspecified degree of abdominal wall, sequela
T21.43XS	Corrosion of unspecified degree of upper back, sequela
T21.44XS	Corrosion of unspecified degree of lower back, sequela
T21.45XS	Corrosion of unspecified degree of buttock, sequela
T21.46XS	Corrosion of unspecified degree of male genital region, sequela
T21.47XS	Corrosion of unspecified degree of female genital region, sequela
T21.49XS	Corrosion of unspecified degree of other site of trunk, sequela
T21.50XS	Corrosion of first degree of trunk, unspecified site, sequela
T21.51XS	Corrosion of first degree of chest wall, sequela
T21.52XS	Corrosion of first degree of abdominal wall, sequela
T21.53XS	Corrosion of first degree of upper back, sequela
T21.54XS	Corrosion of first degree of lower back, sequela
T21.55XS	Corrosion of first degree of buttock, sequela
T21.56XS	Corrosion of first degree of male genital region, sequela
T21.57XS	Corrosion of first degree of female genital region, sequela
T21.59XS	Corrosion of first degree of other site of trunk, sequela
T21.60XS	Corrosion of second degree of trunk, unspecified site, sequela
T21.61XS	Corrosion of second degree of chest wall, sequela
T21.62XS	Corrosion of second degree of abdominal wall, sequela
T21.63XS	Corrosion of second degree of upper back, sequela
T21.64XS	Corrosion of second degree of lower back, sequela
T21.65XS	Corrosion of second degree of buttock, sequela
T21.66XS	Corrosion of second degree of male genital region, sequela

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Code	Description
T21.67XS	Corrosion of second degree of female genital region, sequela
T21.69XS	Corrosion of second degree of other site of trunk, sequela
T21.70XS	Corrosion of third degree of trunk, unspecified site, sequela
T21.71XS	Corrosion of third degree of chest wall, sequela
T21.72XS	Corrosion of third degree of abdominal wall, sequela
T21.73XS	Corrosion of third degree of upper back, sequela
T21.74XS	Corrosion of third degree of lower back, sequela
T21.75XS	Corrosion of third degree of buttock, sequela
T21.76XS	Corrosion of third degree of male genital region, sequela
T21.77XS	Corrosion of third degree of female genital region, sequela
T21.79XS	Corrosion of third degree of other site of trunk, sequela
T22.00XS	Burn of unspecified degree of shoulder and upper limb, except wrist and hand, unspecified site, sequela
T22.011S	Burn of unspecified degree of right forearm, sequela
T22.012S	Burn of unspecified degree of left forearm, sequela
T22.019S	Burn of unspecified degree of unspecified forearm, sequela
T22.021S	Burn of unspecified degree of right elbow, sequela
T22.022S	Burn of unspecified degree of left elbow, sequela
T22.029S	Burn of unspecified degree of unspecified elbow, sequela
T22.031S	Burn of unspecified degree of right upper arm, sequela
T22.032S	Burn of unspecified degree of left upper arm, sequela
T22.039S	Burn of unspecified degree of unspecified upper arm, sequela
T22.041S	Burn of unspecified degree of right axilla, sequela
T22.042S	Burn of unspecified degree of left axilla, sequela
T22.049S	Burn of unspecified degree of unspecified axilla, sequela
T22.051S	Burn of unspecified degree of right shoulder, sequela
T22.052S	Burn of unspecified degree of left shoulder, sequela
T22.059S	Burn of unspecified degree of unspecified shoulder, sequela
T22.061S	Burn of unspecified degree of right scapular region, sequela
T22.062S	Burn of unspecified degree of left scapular region, sequela
T22.069S	Burn of unspecified degree of unspecified scapular region, sequela

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Code	Description
T22.091S	Burn of unspecified degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela
T22.092S	Burn of unspecified degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela
T22.099S	Burn of unspecified degree of multiple sites of unspecified shoulder and upper limb, except wrist and hand, sequela
T22.10XS	Burn of first degree of shoulder and upper limb, except wrist and hand, unspecified site, sequela
T22.111S	Burn of first degree of right forearm, sequela
T22.112S	Burn of first degree of left forearm, sequela
T22.119S	Burn of first degree of unspecified forearm, sequela
T22.121S	Burn of first degree of right elbow, sequela
T22.122S	Burn of first degree of left elbow, sequela
T22.129S	Burn of first degree of unspecified elbow, sequela
T22.131S	Burn of first degree of right upper arm, sequela
T22.132S	Burn of first degree of left upper arm, sequela
T22.139S	Burn of first degree of unspecified upper arm, sequela
T22.141S	Burn of first degree of right axilla, sequela
T22.142S	Burn of first degree of left axilla, sequela
T22.149S	Burn of first degree of unspecified axilla, sequela
T22.151S	Burn of first degree of right shoulder, sequela
T22.152S	Burn of first degree of left shoulder, sequela
T22.159S	Burn of first degree of unspecified shoulder, sequela
T22.161S	Burn of first degree of right scapular region, sequela
T22.162S	Burn of first degree of left scapular region, sequela
T22.169S	Burn of first degree of unspecified scapular region, sequela
T22.191S	Burn of first degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela
T22.192S	Burn of first degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela
T22.199S	Burn of first degree of multiple sites of unspecified shoulder and upper limb, except wrist and hand, sequela



**Medicare National Coverage Determinations (NCD)
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Code	Description
T22.20XS	Burn of second degree of shoulder and upper limb, except wrist and hand, unspecified site, sequela
T22.211S	Burn of second degree of right forearm, sequela
T22.212S	Burn of second degree of left forearm, sequela
T22.219S	Burn of second degree of unspecified forearm, sequela
T22.221S	Burn of second degree of right elbow, sequela
T22.222S	Burn of second degree of left elbow, sequela
T22.229S	Burn of second degree of unspecified elbow, sequela
T22.231S	Burn of second degree of right upper arm, sequela
T22.232S	Burn of second degree of left upper arm, sequela
T22.239S	Burn of second degree of unspecified upper arm, sequela
T22.241S	Burn of second degree of right axilla, sequela
T22.242S	Burn of second degree of left axilla, sequela
T22.249S	Burn of second degree of unspecified axilla, sequela
T22.251S	Burn of second degree of right shoulder, sequela
T22.252S	Burn of second degree of left shoulder, sequela
T22.259S	Burn of second degree of unspecified shoulder, sequela
T22.261S	Burn of second degree of right scapular region, sequela
T22.262S	Burn of second degree of left scapular region, sequela
T22.269S	Burn of second degree of unspecified scapular region, sequela
T22.291S	Burn of second degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela
T22.292S	Burn of second degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela
T22.299S	Burn of second degree of multiple sites of unspecified shoulder and upper limb, except wrist and hand, sequela
T22.30XS	Burn of third degree of shoulder and upper limb, except wrist and hand, unspecified site, sequela
T22.311S	Burn of third degree of right forearm, sequela
T22.312S	Burn of third degree of left forearm, sequela
T22.319S	Burn of third degree of unspecified forearm, sequela
T22.321S	Burn of third degree of right elbow, sequela

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Code	Description
T22.322S	Burn of third degree of left elbow, sequela
T22.329S	Burn of third degree of unspecified elbow, sequela
T22.331S	Burn of third degree of right upper arm, sequela
T22.332S	Burn of third degree of left upper arm, sequela
T22.339S	Burn of third degree of unspecified upper arm, sequela
T22.341S	Burn of third degree of right axilla, sequela
T22.342S	Burn of third degree of left axilla, sequela
T22.349S	Burn of third degree of unspecified axilla, sequela
T22.351S	Burn of third degree of right shoulder, sequela
T22.352S	Burn of third degree of left shoulder, sequela
T22.359S	Burn of third degree of unspecified shoulder, sequela
T22.361S	Burn of third degree of right scapular region, sequela
T22.362S	Burn of third degree of left scapular region, sequela
T22.369S	Burn of third degree of unspecified scapular region, sequela
T22.391S	Burn of third degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela
T22.392S	Burn of third degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela
T22.399S	Burn of third degree of multiple sites of unspecified shoulder and upper limb, except wrist and hand, sequela
T22.40XS	Corrosion of unspecified degree of shoulder and upper limb, except wrist and hand, unspecified site, sequela
T22.411S	Corrosion of unspecified degree of right forearm, sequela
T22.412S	Corrosion of unspecified degree of left forearm, sequela
T22.419S	Corrosion of unspecified degree of unspecified forearm, sequela
T22.421S	Corrosion of unspecified degree of right elbow, sequela
T22.422S	Corrosion of unspecified degree of left elbow, sequela
T22.429S	Corrosion of unspecified degree of unspecified elbow, sequela
T22.431S	Corrosion of unspecified degree of right upper arm, sequela
T22.432S	Corrosion of unspecified degree of left upper arm, sequela
T22.439S	Corrosion of unspecified degree of unspecified upper arm, sequela
T22.441S	Corrosion of unspecified degree of right axilla, sequela

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Code	Description
T22.442S	Corrosion of unspecified degree of left axilla, sequela
T22.449S	Corrosion of unspecified degree of unspecified axilla, sequela
T22.451S	Corrosion of unspecified degree of right shoulder, sequela
T22.452S	Corrosion of unspecified degree of left shoulder, sequela
T22.459S	Corrosion of unspecified degree of unspecified shoulder, sequela
T22.461S	Corrosion of unspecified degree of right scapular region, sequela
T22.462S	Corrosion of unspecified degree of left scapular region, sequela
T22.469S	Corrosion of unspecified degree of unspecified scapular region, sequela
T22.491S	Corrosion of unspecified degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela
T22.492S	Corrosion of unspecified degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela
T22.499S	Corrosion of unspecified degree of multiple sites of unspecified shoulder and upper limb, except wrist and hand, sequela
T22.50XS	Corrosion of first degree of shoulder and upper limb, except wrist and hand unspecified site, sequela
T22.511S	Corrosion of first degree of right forearm, sequela
T22.512S	Corrosion of first degree of left forearm, sequela
T22.519S	Corrosion of first degree of unspecified forearm, sequela
T22.521S	Corrosion of first degree of right elbow, sequela
T22.522S	Corrosion of first degree of left elbow, sequela
T22.529S	Corrosion of first degree of unspecified elbow, sequela
T22.531S	Corrosion of first degree of right upper arm, sequela
T22.532S	Corrosion of first degree of left upper arm, sequela
T22.539S	Corrosion of first degree of unspecified upper arm, sequela
T22.541S	Corrosion of first degree of right axilla, sequela
T22.542S	Corrosion of first degree of left axilla, sequela
T22.549S	Corrosion of first degree of unspecified axilla, sequela
T22.551S	Corrosion of first degree of right shoulder, sequela
T22.552S	Corrosion of first degree of left shoulder, sequela
T22.559S	Corrosion of first degree of unspecified shoulder, sequela
T22.561S	Corrosion of first degree of right scapular region, sequela

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Code	Description
T22.562S	Corrosion of first degree of left scapular region, sequela
T22.569S	Corrosion of first degree of unspecified scapular region, sequela
T22.591S	Corrosion of first degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela
T22.592S	Corrosion of first degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela
T22.599S	Corrosion of first degree of multiple sites of unspecified shoulder and upper limb, except wrist and hand, sequela
T22.60XS	Corrosion of second degree of shoulder and upper limb, except wrist and hand, unspecified site, sequela
T22.611S	Corrosion of second degree of right forearm, sequela
T22.612S	Corrosion of second degree of left forearm, sequela
T22.619S	Corrosion of second degree of unspecified forearm, sequela
T22.621S	Corrosion of second degree of right elbow, sequela
T22.622S	Corrosion of second degree of left elbow, sequela
T22.629S	Corrosion of second degree of unspecified elbow, sequela
T22.631S	Corrosion of second degree of right upper arm, sequela
T22.632S	Corrosion of second degree of left upper arm, sequela
T22.639S	Corrosion of second degree of unspecified upper arm, sequela
T22.641S	Corrosion of second degree of right axilla, sequela
T22.642S	Corrosion of second degree of left axilla, sequela
T22.649S	Corrosion of second degree of unspecified axilla, sequela
T22.651S	Corrosion of second degree of right shoulder, sequela
T22.652S	Corrosion of second degree of left shoulder, sequela
T22.659S	Corrosion of second degree of unspecified shoulder, sequela
T22.661S	Corrosion of second degree of right scapular region, sequela
T22.662S	Corrosion of second degree of left scapular region, sequela
T22.669S	Corrosion of second degree of unspecified scapular region, sequela
T22.691S	Corrosion of second degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela
T22.692S	Corrosion of second degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela



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Code	Description
T22.699S	Corrosion of second degree of multiple sites of unspecified shoulder and upper limb, except wrist and hand, sequela
T22.70XS	Corrosion of third degree of shoulder and upper limb, except wrist and hand, unspecified site, sequela
T22.711S	Corrosion of third degree of right forearm, sequela
T22.712S	Corrosion of third degree of left forearm, sequela
T22.719S	Corrosion of third degree of unspecified forearm, sequela
T22.721S	Corrosion of third degree of right elbow, sequela
T22.722S	Corrosion of third degree of left elbow, sequela
T22.729S	Corrosion of third degree of unspecified elbow, sequela
T22.731S	Corrosion of third degree of right upper arm, sequela
T22.732S	Corrosion of third degree of left upper arm, sequela
T22.739S	Corrosion of third degree of unspecified upper arm, sequela
T22.741S	Corrosion of third degree of right axilla, sequela
T22.742S	Corrosion of third degree of left axilla, sequela
T22.749S	Corrosion of third degree of unspecified axilla, sequela
T22.751S	Corrosion of third degree of right shoulder, sequela
T22.752S	Corrosion of third degree of left shoulder, sequela
T22.759S	Corrosion of third degree of unspecified shoulder, sequela
T22.761S	Corrosion of third degree of right scapular region, sequela
T22.762S	Corrosion of third degree of left scapular region, sequela
T22.769S	Corrosion of third degree of unspecified scapular region, sequela
T22.791S	Corrosion of third degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela
T22.792S	Corrosion of third degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela
T22.799S	Corrosion of third degree of multiple sites of unspecified shoulder and upper limb, except wrist and hand, sequela
T23.001S	Burn of unspecified degree of right hand, unspecified site, sequela
T23.002S	Burn of unspecified degree of left hand, unspecified site, sequela
T23.009S	Burn of unspecified degree of unspecified hand, unspecified site, sequela
T23.011S	Burn of unspecified degree of right thumb (nail), sequela

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Code	Description
T23.012S	Burn of unspecified degree of left thumb (nail), sequela
T23.019S	Burn of unspecified degree of unspecified thumb (nail), sequela
T23.021S	Burn of unspecified degree of single right finger (nail) except thumb, sequela
T23.022S	Burn of unspecified degree of single left finger (nail) except thumb, sequela
T23.029S	Burn of unspecified degree of unspecified single finger (nail) except thumb, sequela
T23.031S	Burn of unspecified degree of multiple right fingers (nail), not including thumb, sequela
T23.032S	Burn of unspecified degree of multiple left fingers (nail), not including thumb, sequela
T23.039S	Burn of unspecified degree of unspecified multiple fingers (nail), not including thumb, sequela
T23.041S	Burn of unspecified degree of multiple right fingers (nail), including thumb, sequela
T23.042S	Burn of unspecified degree of multiple left fingers (nail), including thumb, sequela
T23.049S	Burn of unspecified degree of unspecified multiple fingers (nail), including thumb, sequela
T23.051S	Burn of unspecified degree of right palm, sequela
T23.052S	Burn of unspecified degree of left palm, sequela
T23.059S	Burn of unspecified degree of unspecified palm, sequela
T23.061S	Burn of unspecified degree of back of right hand, sequela
T23.062S	Burn of unspecified degree of back of left hand, sequela
T23.069S	Burn of unspecified degree of back of unspecified hand, sequela
T23.071S	Burn of unspecified degree of right wrist, sequela
T23.072S	Burn of unspecified degree of left wrist, sequela
T23.079S	Burn of unspecified degree of unspecified wrist, sequela
T23.091S	Burn of unspecified degree of multiple sites of right wrist and hand, sequela
T23.092S	Burn of unspecified degree of multiple sites of left wrist and hand, sequela
T23.099S	Burn of unspecified degree of multiple sites of unspecified wrist and hand, sequela
T23.101S	Burn of first degree of right hand, unspecified site, sequela
T23.102S	Burn of first degree of left hand, unspecified site, sequela
T23.109S	Burn of first degree of unspecified hand, unspecified site, sequela
T23.111S	Burn of first degree of right thumb (nail), sequela
T23.112S	Burn of first degree of left thumb (nail), sequela
T23.119S	Burn of first degree of unspecified thumb (nail), sequela
T23.121S	Burn of first degree of single right finger (nail) except thumb, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T23.122S	Burn of first degree of single left finger (nail) except thumb, sequela
T23.129S	Burn of first degree of unspecified single finger (nail) except thumb, sequela
T23.131S	Burn of first degree of multiple right fingers (nail), not including thumb, sequela
T23.132S	Burn of first degree of multiple left fingers (nail), not including thumb, sequela
T23.139S	Burn of first degree of unspecified multiple fingers (nail), not including thumb, sequela
T23.141S	Burn of first degree of multiple right fingers (nail), including thumb, sequela
T23.142S	Burn of first degree of multiple left fingers (nail), including thumb, sequela
T23.149S	Burn of first degree of unspecified multiple fingers (nail), including thumb, sequela
T23.151S	Burn of first degree of right palm, sequela
T23.152S	Burn of first degree of left palm, sequela
T23.159S	Burn of first degree of unspecified palm, sequela
T23.161S	Burn of first degree of back of right hand, sequela
T23.162S	Burn of first degree of back of left hand, sequela
T23.169S	Burn of first degree of back of unspecified hand, sequela
T23.171S	Burn of first degree of right wrist, sequela
T23.172S	Burn of first degree of left wrist, sequela
T23.179S	Burn of first degree of unspecified wrist, sequela
T23.191S	Burn of first degree of multiple sites of right wrist and hand, sequela
T23.192S	Burn of first degree of multiple sites of left wrist and hand, sequela
T23.199S	Burn of first degree of multiple sites of unspecified wrist and hand, sequela
T23.201S	Burn of second degree of right hand, unspecified site, sequela
T23.202S	Burn of second degree of left hand, unspecified site, sequela
T23.209S	Burn of second degree of unspecified hand, unspecified site, sequela
T23.211S	Burn of second degree of right thumb (nail), sequela
T23.212S	Burn of second degree of left thumb (nail), sequela
T23.219S	Burn of second degree of unspecified thumb (nail), sequela
T23.221S	Burn of second degree of single right finger (nail) except thumb, sequela
T23.222S	Burn of second degree of single left finger (nail) except thumb, sequela
T23.229S	Burn of second degree of unspecified single finger (nail) except thumb, sequela
T23.231S	Burn of second degree of multiple right fingers (nail), not including thumb, sequela



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Code	Description
T23.232S	Burn of second degree of multiple left fingers (nail), not including thumb, sequela
T23.239S	Burn of second degree of unspecified multiple fingers (nail), not including thumb, sequela
T23.241S	Burn of second degree of multiple right fingers (nail), including thumb, sequela
T23.242S	Burn of second degree of multiple left fingers (nail), including thumb, sequela
T23.249S	Burn of second degree of unspecified multiple fingers (nail), including thumb, sequela
T23.251S	Burn of second degree of right palm, sequela
T23.252S	Burn of second degree of left palm, sequela
T23.259S	Burn of second degree of unspecified palm, sequela
T23.261S	Burn of second degree of back of right hand, sequela
T23.262S	Burn of second degree of back of left hand, sequela
T23.269S	Burn of second degree of back of unspecified hand, sequela
T23.271S	Burn of second degree of right wrist, sequela
T23.272S	Burn of second degree of left wrist, sequela
T23.279S	Burn of second degree of unspecified wrist, sequela
T23.291S	Burn of second degree of multiple sites of right wrist and hand, sequela
T23.292S	Burn of second degree of multiple sites of left wrist and hand, sequela
T23.299S	Burn of second degree of multiple sites of unspecified wrist and hand, sequela
T23.301S	Burn of third degree of right hand, unspecified site, sequela
T23.302S	Burn of third degree of left hand, unspecified site, sequela
T23.309S	Burn of third degree of unspecified hand, unspecified site, sequela
T23.311S	Burn of third degree of right thumb (nail), sequela
T23.312S	Burn of third degree of left thumb (nail), sequela
T23.319S	Burn of third degree of unspecified thumb (nail), sequela
T23.321S	Burn of third degree of single right finger (nail) except thumb, sequela
T23.322S	Burn of third degree of single left finger (nail) except thumb, sequela
T23.329S	Burn of third degree of unspecified single finger (nail) except thumb, sequela
T23.331S	Burn of third degree of multiple right fingers (nail), not including thumb, sequela
T23.332S	Burn of third degree of multiple left fingers (nail), not including thumb, sequela
T23.339S	Burn of third degree of unspecified multiple fingers (nail), not including thumb, sequela
T23.341S	Burn of third degree of multiple right fingers (nail), including thumb, sequela



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Code	Description
T23.342S	Burn of third degree of multiple left fingers (nail), including thumb, sequela
T23.349S	Burn of third degree of unspecified multiple fingers (nail), including thumb, sequela
T23.351S	Burn of third degree of right palm, sequela
T23.352S	Burn of third degree of left palm, sequela
T23.359S	Burn of third degree of unspecified palm, sequela
T23.361S	Burn of third degree of back of right hand, sequela
T23.362S	Burn of third degree of back of left hand, sequela
T23.369S	Burn of third degree of back of unspecified hand, sequela
T23.371S	Burn of third degree of right wrist, sequela
T23.372S	Burn of third degree of left wrist, sequela
T23.379S	Burn of third degree of unspecified wrist, sequela
T23.391S	Burn of third degree of multiple sites of right wrist and hand, sequela
T23.392S	Burn of third degree of multiple sites of left wrist and hand, sequela
T23.399S	Burn of third degree of multiple sites of unspecified wrist and hand, sequela
T23.401S	Corrosion of unspecified degree of right hand, unspecified site, sequela
T23.402S	Corrosion of unspecified degree of left hand, unspecified site, sequela
T23.409S	Corrosion of unspecified degree of unspecified hand, unspecified site, sequela
T23.411S	Corrosion of unspecified degree of right thumb (nail), sequela
T23.412S	Corrosion of unspecified degree of left thumb (nail), sequela
T23.419S	Corrosion of unspecified degree of unspecified thumb (nail), sequela
T23.421S	Corrosion of unspecified degree of single right finger (nail) except thumb, sequela
T23.422S	Corrosion of unspecified degree of single left finger (nail) except thumb, sequela
T23.429S	Corrosion of unspecified degree of unspecified single finger (nail) except thumb, sequela
T23.431S	Corrosion of unspecified degree of multiple right fingers (nail), not including thumb, sequela
T23.432S	Corrosion of unspecified degree of multiple left fingers (nail), not including thumb, sequela
T23.439S	Corrosion of unspecified degree of unspecified multiple fingers (nail), not including thumb, sequela
T23.441S	Corrosion of unspecified degree of multiple right fingers (nail), including thumb, sequela
T23.442S	Corrosion of unspecified degree of multiple left fingers (nail), including thumb, sequela



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Code	Description
T23.449S	Corrosion of unspecified degree of unspecified multiple fingers (nail), including thumb, sequela
T23.451S	Corrosion of unspecified degree of right palm, sequela
T23.452S	Corrosion of unspecified degree of left palm, sequela
T23.459S	Corrosion of unspecified degree of unspecified palm, sequela
T23.461S	Corrosion of unspecified degree of back of right hand, sequela
T23.462S	Corrosion of unspecified degree of back of left hand, sequela
T23.469S	Corrosion of unspecified degree of back of unspecified hand, sequela
T23.471S	Corrosion of unspecified degree of right wrist, sequela
T23.472S	Corrosion of unspecified degree of left wrist, sequela
T23.479S	Corrosion of unspecified degree of unspecified wrist, sequela
T23.491S	Corrosion of unspecified degree of multiple sites of right wrist and hand, sequela
T23.492S	Corrosion of unspecified degree of multiple sites of left wrist and hand, sequela
T23.499S	Corrosion of unspecified degree of multiple sites of unspecified wrist and hand, sequela
T23.501S	Corrosion of first degree of right hand, unspecified site, sequela
T23.502S	Corrosion of first degree of left hand, unspecified site, sequela
T23.509S	Corrosion of first degree of unspecified hand, unspecified site, sequela
T23.511S	Corrosion of first degree of right thumb (nail), sequela
T23.512S	Corrosion of first degree of left thumb (nail), sequela
T23.519S	Corrosion of first degree of unspecified thumb (nail), sequela
T23.521S	Corrosion of first degree of single right finger (nail) except thumb, sequela
T23.522S	Corrosion of first degree of single left finger (nail) except thumb, sequela
T23.529S	Corrosion of first degree of unspecified single finger (nail) except thumb, sequela
T23.531S	Corrosion of first degree of multiple right fingers (nail), not including thumb, sequela
T23.532S	Corrosion of first degree of multiple left fingers (nail), not including thumb, sequela
T23.539S	Corrosion of first degree of unspecified multiple fingers (nail), not including thumb, sequela
T23.541S	Corrosion of first degree of multiple right fingers (nail), including thumb, sequela
T23.542S	Corrosion of first degree of multiple left fingers (nail), including thumb, sequela
T23.549S	Corrosion of first degree of unspecified multiple fingers (nail), including thumb, sequela
T23.551S	Corrosion of first degree of right palm, sequela
T23.552S	Corrosion of first degree of left palm, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T23.559S	Corrosion of first degree of unspecified palm, sequela
T23.561S	Corrosion of first degree of back of right hand, sequela
T23.562S	Corrosion of first degree of back of left hand, sequela
T23.569S	Corrosion of first degree of back of unspecified hand, sequela
T23.571S	Corrosion of first degree of right wrist, sequela
T23.572S	Corrosion of first degree of left wrist, sequela
T23.579S	Corrosion of first degree of unspecified wrist, sequela
T23.591S	Corrosion of first degree of multiple sites of right wrist and hand, sequela
T23.592S	Corrosion of first degree of multiple sites of left wrist and hand, sequela
T23.599S	Corrosion of first degree of multiple sites of unspecified wrist and hand, sequela
T23.601S	Corrosion of second degree of right hand, unspecified site, sequela
T23.602S	Corrosion of second degree of left hand, unspecified site, sequela
T23.609S	Corrosion of second degree of unspecified hand, unspecified site, sequela
T23.611S	Corrosion of second degree of right thumb (nail), sequela
T23.612S	Corrosion of second degree of left thumb (nail), sequela
T23.619S	Corrosion of second degree of unspecified thumb (nail), sequela
T23.621S	Corrosion of second degree of single right finger (nail) except thumb, sequela
T23.622S	Corrosion of second degree of single left finger (nail) except thumb, sequela
T23.629S	Corrosion of second degree of unspecified single finger (nail) except thumb, sequela
T23.631S	Corrosion of second degree of multiple right fingers (nail), not including thumb, sequela
T23.632S	Corrosion of second degree of multiple left fingers (nail), not including thumb, sequela
T23.639S	Corrosion of second degree of unspecified multiple fingers (nail), not including thumb, sequela
T23.641S	Corrosion of second degree of multiple right fingers (nail), including thumb, sequela
T23.642S	Corrosion of second degree of multiple left fingers (nail), including thumb, sequela
T23.649S	Corrosion of second degree of unspecified multiple fingers (nail), including thumb, sequela
T23.651S	Corrosion of second degree of right palm, sequela
T23.652S	Corrosion of second degree of left palm, sequela
T23.659S	Corrosion of second degree of unspecified palm, sequela
T23.661S	Corrosion of second degree back of right hand, sequela
T23.662S	Corrosion of second degree back of left hand, sequela

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Code	Description
T23.669S	Corrosion of second degree back of unspecified hand, sequela
T23.671S	Corrosion of second degree of right wrist, sequela
T23.672S	Corrosion of second degree of left wrist, sequela
T23.679S	Corrosion of second degree of unspecified wrist, sequela
T23.691S	Corrosion of second degree of multiple sites of right wrist and hand, sequela
T23.692S	Corrosion of second degree of multiple sites of left wrist and hand, sequela
T23.699S	Corrosion of second degree of multiple sites of unspecified wrist and hand, sequela
T23.701S	Corrosion of third degree of right hand, unspecified site, sequela
T23.702S	Corrosion of third degree of left hand, unspecified site, sequela
T23.709S	Corrosion of third degree of unspecified hand, unspecified site, sequela
T23.711S	Corrosion of third degree of right thumb (nail), sequela
T23.712S	Corrosion of third degree of left thumb (nail), sequela
T23.719S	Corrosion of third degree of unspecified thumb (nail), sequela
T23.721S	Corrosion of third degree of single right finger (nail) except thumb, sequela
T23.722S	Corrosion of third degree of single left finger (nail) except thumb, sequela
T23.729S	Corrosion of third degree of unspecified single finger (nail) except thumb, sequela
T23.731S	Corrosion of third degree of multiple right fingers (nail), not including thumb, sequela
T23.732S	Corrosion of third degree of multiple left fingers (nail), not including thumb, sequela
T23.739S	Corrosion of third degree of unspecified multiple fingers (nail), not including thumb, sequela
T23.741S	Corrosion of third degree of multiple right fingers (nail), including thumb, sequela
T23.742S	Corrosion of third degree of multiple left fingers (nail), including thumb, sequela
T23.749S	Corrosion of third degree of unspecified multiple fingers (nail), including thumb, sequela
T23.751S	Corrosion of third degree of right palm, sequela
T23.752S	Corrosion of third degree of left palm, sequela
T23.759S	Corrosion of third degree of unspecified palm, sequela
T23.761S	Corrosion of third degree of back of right hand, sequela
T23.762S	Corrosion of third degree of back of left hand, sequela
T23.769S	Corrosion of third degree back of unspecified hand, sequela
T23.771S	Corrosion of third degree of right wrist, sequela
T23.772S	Corrosion of third degree of left wrist, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T23.779S	Corrosion of third degree of unspecified wrist, sequela
T23.791S	Corrosion of third degree of multiple sites of right wrist and hand, sequela
T23.792S	Corrosion of third degree of multiple sites of left wrist and hand, sequela
T23.799S	Corrosion of third degree of multiple sites of unspecified wrist and hand, sequela
T24.001S	Burn of unspecified degree of unspecified site of right lower limb, except ankle and foot, sequela
T24.002S	Burn of unspecified degree of unspecified site of left lower limb, except ankle and foot, sequela
T24.009S	Burn of unspecified degree of unspecified site of unspecified lower limb, except ankle and foot, sequela
T24.011S	Burn of unspecified degree of right thigh, sequela
T24.012S	Burn of unspecified degree of left thigh, sequela
T24.019S	Burn of unspecified degree of unspecified thigh, sequela
T24.021S	Burn of unspecified degree of right knee, sequela
T24.022S	Burn of unspecified degree of left knee, sequela
T24.029S	Burn of unspecified degree of unspecified knee, sequela
T24.031S	Burn of unspecified degree of right lower leg, sequela
T24.032S	Burn of unspecified degree of left lower leg, sequela
T24.039S	Burn of unspecified degree of unspecified lower leg, sequela
T24.091S	Burn of unspecified degree of multiple sites of right lower limb, except ankle and foot, sequela
T24.092S	Burn of unspecified degree of multiple sites of left lower limb, except ankle and foot, sequela
T24.099S	Burn of unspecified degree of multiple sites of unspecified lower limb, except ankle and foot, sequela
T24.101S	Burn of first degree of unspecified site of right lower limb, except ankle and foot, sequela
T24.102S	Burn of first degree of unspecified site of left lower limb, except ankle and foot, sequela
T24.109S	Burn of first degree of unspecified site of unspecified lower limb, except ankle and foot, sequela
T24.111S	Burn of first degree of right thigh, sequela
T24.112S	Burn of first degree of left thigh, sequela
T24.119S	Burn of first degree of unspecified thigh, sequela
T24.121S	Burn of first degree of right knee, sequela

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Code	Description
T24.122S	Burn of first degree of left knee, sequela
T24.129S	Burn of first degree of unspecified knee, sequela
T24.131S	Burn of first degree of right lower leg, sequela
T24.132S	Burn of first degree of left lower leg, sequela
T24.139S	Burn of first degree of unspecified lower leg, sequela
T24.191S	Burn of first degree of multiple sites of right lower limb, except ankle and foot, sequela
T24.192S	Burn of first degree of multiple sites of left lower limb, except ankle and foot, sequela
T24.199S	Burn of first degree of multiple sites of unspecified lower limb, except ankle and foot, sequela
T24.201S	Burn of second degree of unspecified site of right lower limb, except ankle and foot, sequela
T24.202S	Burn of second degree of unspecified site of left lower limb, except ankle and foot, sequela
T24.209S	Burn of second degree of unspecified site of unspecified lower limb, except ankle and foot, sequela
T24.211S	Burn of second degree of right thigh, sequela
T24.212S	Burn of second degree of left thigh, sequela
T24.219S	Burn of second degree of unspecified thigh, sequela
T24.221S	Burn of second degree of right knee, sequela
T24.222S	Burn of second degree of left knee, sequela
T24.229S	Burn of second degree of unspecified knee, sequela
T24.231S	Burn of second degree of right lower leg, sequela
T24.232S	Burn of second degree of left lower leg, sequela
T24.239S	Burn of second degree of unspecified lower leg, sequela
T24.291S	Burn of second degree of multiple sites of right lower limb, except ankle and foot, sequela
T24.292S	Burn of second degree of multiple sites of left lower limb, except ankle and foot, sequela
T24.299S	Burn of second degree of multiple sites of unspecified lower limb, except ankle and foot, sequela
T24.301S	Burn of third degree of unspecified site of right lower limb, except ankle and foot, sequela
T24.302S	Burn of third degree of unspecified site of left lower limb, except ankle and foot, sequela
T24.309S	Burn of third degree of unspecified site of unspecified lower limb, except ankle and foot, sequela
T24.311S	Burn of third degree of right thigh, sequela

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Code	Description
T24.312S	Burn of third degree of left thigh, sequela
T24.319S	Burn of third degree of unspecified thigh, sequela
T24.321S	Burn of third degree of right knee, sequela
T24.322S	Burn of third degree of left knee, sequela
T24.329S	Burn of third degree of unspecified knee, sequela
T24.331S	Burn of third degree of right lower leg, sequela
T24.332S	Burn of third degree of left lower leg, sequela
T24.339S	Burn of third degree of unspecified lower leg, sequela
T24.391S	Burn of third degree of multiple sites of right lower limb, except ankle and foot, sequela
T24.392S	Burn of third degree of multiple sites of left lower limb, except ankle and foot, sequela
T24.399S	Burn of third degree of multiple sites of unspecified lower limb, except ankle and foot, sequela
T24.401S	Corrosion of unspecified degree of unspecified site of right lower limb, except ankle and foot, sequela
T24.402S	Corrosion of unspecified degree of unspecified site of left lower limb, except ankle and foot, sequela
T24.409S	Corrosion of unspecified degree of unspecified site of unspecified lower limb, except ankle and foot, sequela
T24.411S	Corrosion of unspecified degree of right thigh, sequela
T24.412S	Corrosion of unspecified degree of left thigh, sequela
T24.419S	Corrosion of unspecified degree of unspecified thigh, sequela
T24.421S	Corrosion of unspecified degree of right knee, sequela
T24.422S	Corrosion of unspecified degree of left knee, sequela
T24.429S	Corrosion of unspecified degree of unspecified knee, sequela
T24.431S	Corrosion of unspecified degree of right lower leg, sequela
T24.432S	Corrosion of unspecified degree of left lower leg, sequela
T24.439S	Corrosion of unspecified degree of unspecified lower leg, sequela
T24.491S	Corrosion of unspecified degree of multiple sites of right lower limb, except ankle and foot, sequela
T24.492S	Corrosion of unspecified degree of multiple sites of left lower limb, except ankle and foot, sequela
T24.499S	Corrosion of unspecified degree of multiple sites of unspecified lower limb, except ankle and foot, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T24.501S	Corrosion of first degree of unspecified site of right lower limb, except ankle and foot, sequela
T24.502S	Corrosion of first degree of unspecified site of left lower limb, except ankle and foot, sequela
T24.509S	Corrosion of first degree of unspecified site of unspecified lower limb, except ankle and foot, sequela
T24.511S	Corrosion of first degree of right thigh, sequela
T24.512S	Corrosion of first degree of left thigh, sequela
T24.519S	Corrosion of first degree of unspecified thigh, sequela
T24.521S	Corrosion of first degree of right knee, sequela
T24.522S	Corrosion of first degree of left knee, sequela
T24.529S	Corrosion of first degree of unspecified knee, sequela
T24.531S	Corrosion of first degree of right lower leg, sequela
T24.532S	Corrosion of first degree of left lower leg, sequela
T24.539S	Corrosion of first degree of unspecified lower leg, sequela
T24.591S	Corrosion of first degree of multiple sites of right lower limb, except ankle and foot, sequela
T24.592S	Corrosion of first degree of multiple sites of left lower limb, except ankle and foot, sequela
T24.599S	Corrosion of first degree of multiple sites of unspecified lower limb, except ankle and foot, sequela
T24.601S	Corrosion of second degree of unspecified site of right lower limb, except ankle and foot, sequela
T24.602S	Corrosion of second degree of unspecified site of left lower limb, except ankle and foot, sequela
T24.609S	Corrosion of second degree of unspecified site of unspecified lower limb, except ankle and foot, sequela
T24.611S	Corrosion of second degree of right thigh, sequela
T24.612S	Corrosion of second degree of left thigh, sequela
T24.619S	Corrosion of second degree of unspecified thigh, sequela
T24.621S	Corrosion of second degree of right knee, sequela
T24.622S	Corrosion of second degree of left knee, sequela
T24.629S	Corrosion of second degree of unspecified knee, sequela
T24.631S	Corrosion of second degree of right lower leg, sequela
T24.632S	Corrosion of second degree of left lower leg, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T24.639S	Corrosion of second degree of unspecified lower leg, sequela
T24.691S	Corrosion of second degree of multiple sites of right lower limb, except ankle and foot, sequela
T24.692S	Corrosion of second degree of multiple sites of left lower limb, except ankle and foot, sequela
T24.699S	Corrosion of second degree of multiple sites of unspecified lower limb, except ankle and foot, sequela
T24.701S	Corrosion of third degree of unspecified site of right lower limb, except ankle and foot, sequela
T24.702S	Corrosion of third degree of unspecified site of left lower limb, except ankle and foot, sequela
T24.709S	Corrosion of third degree of unspecified site of unspecified lower limb, except ankle and foot, sequela
T24.711S	Corrosion of third degree of right thigh, sequela
T24.712S	Corrosion of third degree of left thigh, sequela
T24.719S	Corrosion of third degree of unspecified thigh, sequela
T24.721S	Corrosion of third degree of right knee, sequela
T24.722S	Corrosion of third degree of left knee, sequela
T24.729S	Corrosion of third degree of unspecified knee, sequela
T24.731S	Corrosion of third degree of right lower leg, sequela
T24.732S	Corrosion of third degree of left lower leg, sequela
T24.739S	Corrosion of third degree of unspecified lower leg, sequela
T24.791S	Corrosion of third degree of multiple sites of right lower limb, except ankle and foot, sequela
T24.792S	Corrosion of third degree of multiple sites of left lower limb, except ankle and foot, sequela
T24.799S	Corrosion of third degree of multiple sites of unspecified lower limb, except ankle and foot, sequela
T25.011S	Burn of unspecified degree of right ankle, sequela
T25.012S	Burn of unspecified degree of left ankle, sequela
T25.019S	Burn of unspecified degree of unspecified ankle, sequela
T25.021S	Burn of unspecified degree of right foot, sequela
T25.022S	Burn of unspecified degree of left foot, sequela
T25.029S	Burn of unspecified degree of unspecified foot, sequela

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Code	Description
T25.031S	Burn of unspecified degree of right toe(s) (nail), sequela
T25.032S	Burn of unspecified degree of left toe(s) (nail), sequela
T25.039S	Burn of unspecified degree of unspecified toe(s) (nail), sequela
T25.091S	Burn of unspecified degree of multiple sites of right ankle and foot, sequela
T25.092S	Burn of unspecified degree of multiple sites of left ankle and foot, sequela
T25.099S	Burn of unspecified degree of multiple sites of unspecified ankle and foot, sequela
T25.111S	Burn of first degree of right ankle, sequela
T25.112S	Burn of first degree of left ankle, sequela
T25.119S	Burn of first degree of unspecified ankle, sequela
T25.121S	Burn of first degree of right foot, sequela
T25.122S	Burn of first degree of left foot, sequela
T25.129S	Burn of first degree of unspecified foot, sequela
T25.131S	Burn of first degree of right toe(s) (nail), sequela
T25.132S	Burn of first degree of left toe(s) (nail), sequela
T25.139S	Burn of first degree of unspecified toe(s) (nail), sequela
T25.191S	Burn of first degree of multiple sites of right ankle and foot, sequela
T25.192S	Burn of first degree of multiple sites of left ankle and foot, sequela
T25.199S	Burn of first degree of multiple sites of unspecified ankle and foot, sequela
T25.211S	Burn of second degree of right ankle, sequela
T25.212S	Burn of second degree of left ankle, sequela
T25.219S	Burn of second degree of unspecified ankle, sequela
T25.221S	Burn of second degree of right foot, sequela
T25.222S	Burn of second degree of left foot, sequela
T25.229S	Burn of second degree of unspecified foot, sequela
T25.231S	Burn of second degree of right toe(s) (nail), sequela
T25.232S	Burn of second degree of left toe(s) (nail), sequela
T25.239S	Burn of second degree of unspecified toe(s) (nail), sequela
T25.291S	Burn of second degree of multiple sites of right ankle and foot, sequela
T25.292S	Burn of second degree of multiple sites of left ankle and foot, sequela
T25.299S	Burn of second degree of multiple sites of unspecified ankle and foot, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T25.311S	Burn of third degree of right ankle, sequela
T25.312S	Burn of third degree of left ankle, sequela
T25.319S	Burn of third degree of unspecified ankle, sequela
T25.321S	Burn of third degree of right foot, sequela
T25.322S	Burn of third degree of left foot, sequela
T25.329S	Burn of third degree of unspecified foot, sequela
T25.331S	Burn of third degree of right toe(s) (nail), sequela
T25.332S	Burn of third degree of left toe(s) (nail), sequela
T25.339S	Burn of third degree of unspecified toe(s) (nail), sequela
T25.391S	Burn of third degree of multiple sites of right ankle and foot, sequela
T25.392S	Burn of third degree of multiple sites of left ankle and foot, sequela
T25.399S	Burn of third degree of multiple sites of unspecified ankle and foot, sequela
T25.411S	Corrosion of unspecified degree of right ankle, sequela
T25.412S	Corrosion of unspecified degree of left ankle, sequela
T25.419S	Corrosion of unspecified degree of unspecified ankle, sequela
T25.421S	Corrosion of unspecified degree of right foot, sequela
T25.422S	Corrosion of unspecified degree of left foot, sequela
T25.429S	Corrosion of unspecified degree of unspecified foot, sequela
T25.431S	Corrosion of unspecified degree of right toe(s) (nail), sequela
T25.432S	Corrosion of unspecified degree of left toe(s) (nail), sequela
T25.439S	Corrosion of unspecified degree of unspecified toe(s) (nail), sequela
T25.491S	Corrosion of unspecified degree of multiple sites of right ankle and foot, sequela
T25.492S	Corrosion of unspecified degree of multiple sites of left ankle and foot, sequela
T25.499S	Corrosion of unspecified degree of multiple sites of unspecified ankle and foot, sequela
T25.511S	Corrosion of first degree of right ankle, sequela
T25.512S	Corrosion of first degree of left ankle, sequela
T25.519S	Corrosion of first degree of unspecified ankle, sequela
T25.521S	Corrosion of first degree of right foot, sequela
T25.522S	Corrosion of first degree of left foot, sequela
T25.529S	Corrosion of first degree of unspecified foot, sequela



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Code	Description
T25.531S	Corrosion of first degree of right toe(s) (nail), sequela
T25.532S	Corrosion of first degree of left toe(s) (nail), sequela
T25.539S	Corrosion of first degree of unspecified toe(s) (nail), sequela
T25.591S	Corrosion of first degree of multiple sites of right ankle and foot, sequela
T25.592S	Corrosion of first degree of multiple sites of left ankle and foot, sequela
T25.599S	Corrosion of first degree of multiple sites of unspecified ankle and foot, sequela
T25.611S	Corrosion of second degree of right ankle, sequela
T25.612S	Corrosion of second degree of left ankle, sequela
T25.619S	Corrosion of second degree of unspecified ankle, sequela
T25.621S	Corrosion of second degree of right foot, sequela
T25.622S	Corrosion of second degree of left foot, sequela
T25.629S	Corrosion of second degree of unspecified foot, sequela
T25.631S	Corrosion of second degree of right toe(s) (nail), sequela
T25.632S	Corrosion of second degree of left toe(s) (nail), sequela
T25.639S	Corrosion of second degree of unspecified toe(s) (nail), sequela
T25.691S	Corrosion of second degree of right ankle and foot, sequela
T25.692S	Corrosion of second degree of left ankle and foot, sequela
T25.699S	Corrosion of second degree of unspecified ankle and foot, sequela
T25.711S	Corrosion of third degree of right ankle, sequela
T25.712S	Corrosion of third degree of left ankle, sequela
T25.719S	Corrosion of third degree of unspecified ankle, sequela
T25.721S	Corrosion of third degree of right foot, sequela
T25.722S	Corrosion of third degree of left foot, sequela
T25.729S	Corrosion of third degree of unspecified foot, sequela
T25.731S	Corrosion of third degree of right toe(s) (nail), sequela
T25.732S	Corrosion of third degree of left toe(s) (nail), sequela
T25.739S	Corrosion of third degree of unspecified toe(s) (nail), sequela
T25.791S	Corrosion of third degree of multiple sites of right ankle and foot, sequela
T25.792S	Corrosion of third degree of multiple sites of left ankle and foot, sequela
T25.799S	Corrosion of third degree of multiple sites of unspecified ankle and foot, sequela



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Code	Description
T26.00XS	Burn of unspecified eyelid and periocular area, sequela
T26.01XS	Burn of right eyelid and periocular area, sequela
T26.02XS	Burn of left eyelid and periocular area, sequela
T26.10XS	Burn of cornea and conjunctival sac, unspecified eye, sequela
T26.11XS	Burn of cornea and conjunctival sac, right eye, sequela
T26.12XS	Burn of cornea and conjunctival sac, left eye, sequela
T26.20XS	Burn with resulting rupture and destruction of unspecified eyeball, sequela
T26.21XS	Burn with resulting rupture and destruction of right eyeball, sequela
T26.22XS	Burn with resulting rupture and destruction of left eyeball, sequela
T26.30XS	Burns of other specified parts of unspecified eye and adnexa, sequela
T26.31XS	Burns of other specified parts of right eye and adnexa, sequela
T26.32XS	Burns of other specified parts of left eye and adnexa, sequela
T26.40XS	Burn of unspecified eye and adnexa, part unspecified, sequela
T26.41XS	Burn of right eye and adnexa, part unspecified, sequela
T26.42XS	Burn of left eye and adnexa, part unspecified, sequela
T26.50XS	Corrosion of unspecified eyelid and periocular area, sequela
T26.51XS	Corrosion of right eyelid and periocular area, sequela
T26.52XS	Corrosion of left eyelid and periocular area, sequela
T26.60XS	Corrosion of cornea and conjunctival sac, unspecified eye, sequela
T26.61XS	Corrosion of cornea and conjunctival sac, right eye, sequela
T26.62XS	Corrosion of cornea and conjunctival sac, left eye, sequela
T26.70XS	Corrosion with resulting rupture and destruction of unspecified eyeball, sequela
T26.71XS	Corrosion with resulting rupture and destruction of right eyeball, sequela
T26.72XS	Corrosion with resulting rupture and destruction of left eyeball, sequela
T26.80XS	Corrosions of other specified parts of unspecified eye and adnexa, sequela
T26.81XS	Corrosions of other specified parts of right eye and adnexa, sequela
T26.82XS	Corrosions of other specified parts of left eye and adnexa, sequela
T26.90XS	Corrosion of unspecified eye and adnexa, part unspecified, sequela
T26.91XS	Corrosion of right eye and adnexa, part unspecified, sequela
T26.92XS	Corrosion of left eye and adnexa, part unspecified, sequela



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Code	Description
T27.0XXS	Burn of larynx and trachea, sequela
T27.1XXS	Burn involving larynx and trachea with lung, sequela
T27.2XXS	Burn of other parts of respiratory tract, sequela
T27.3XXS	Burn of respiratory tract, part unspecified, sequela
T27.4XXS	Corrosion of larynx and trachea, sequela
T27.5XXS	Corrosion involving larynx and trachea with lung, sequela
T27.6XXS	Corrosion of other parts of respiratory tract, sequela
T27.7XXS	Corrosion of respiratory tract, part unspecified, sequela
T28.0XXS	Burn of mouth and pharynx, sequela
T28.1XXS	Burn of esophagus, sequela
T28.2XXS	Burn of other parts of alimentary tract, sequela
T28.3XXS	Burn of internal genitourinary organs, sequela
T28.40XS	Burn of unspecified internal organ, sequela
T28.411S	Burn of right ear drum, sequela
T28.412S	Burn of left ear drum, sequela
T28.419S	Burn of unspecified ear drum, sequela
T28.49XS	Burn of other internal organ, sequela
T28.5XXS	Corrosion of mouth and pharynx, sequela
T28.6XXS	Corrosion of esophagus, sequela
T28.7XXS	Corrosion of other parts of alimentary tract, sequela
T28.8XXS	Corrosion of internal genitourinary organs, sequela
T28.90XS	Corrosions of unspecified internal organs, sequela
T28.911S	Corrosions of right ear drum, sequela
T28.912S	Corrosions of left ear drum, sequela
T28.919S	Corrosions of unspecified ear drum, sequela
T28.99XS	Corrosions of other internal organs, sequela
T33.011S	Superficial frostbite of right ear, sequela
T33.012S	Superficial frostbite of left ear, sequela
T33.019S	Superficial frostbite of unspecified ear, sequela
T33.02XS	Superficial frostbite of nose, sequela

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Code	Description
T33.09XS	Superficial frostbite of other part of head, sequela
T33.1XXS	Superficial frostbite of neck, sequela
T33.2XXS	Superficial frostbite of thorax, sequela
T33.3XXS	Superficial frostbite of abdominal wall, lower back and pelvis, sequela
T33.40XS	Superficial frostbite of unspecified arm, sequela
T33.41XS	Superficial frostbite of right arm, sequela
T33.42XS	Superficial frostbite of left arm, sequela
T33.511S	Superficial frostbite of right wrist, sequela
T33.512S	Superficial frostbite of left wrist, sequela
T33.519S	Superficial frostbite of unspecified wrist, sequela
T33.521S	Superficial frostbite of right hand, sequela
T33.522S	Superficial frostbite of left hand, sequela
T33.529S	Superficial frostbite of unspecified hand, sequela
T33.531S	Superficial frostbite of right finger(s), sequela
T33.532S	Superficial frostbite of left finger(s), sequela
T33.539S	Superficial frostbite of unspecified finger(s), sequela
T33.60XS	Superficial frostbite of unspecified hip and thigh, sequela
T33.61XS	Superficial frostbite of right hip and thigh, sequela
T33.62XS	Superficial frostbite of left hip and thigh, sequela
T33.70XS	Superficial frostbite of unspecified knee and lower leg, sequela
T33.71XS	Superficial frostbite of right knee and lower leg, sequela
T33.72XS	Superficial frostbite of left knee and lower leg, sequela
T33.811S	Superficial frostbite of right ankle, sequela
T33.812S	Superficial frostbite of left ankle, sequela
T33.819S	Superficial frostbite of unspecified ankle, sequela
T33.821S	Superficial frostbite of right foot, sequela
T33.822S	Superficial frostbite of left foot, sequela
T33.829S	Superficial frostbite of unspecified foot, sequela
T33.831S	Superficial frostbite of right toe(s), sequela
T33.832S	Superficial frostbite of left toe(s), sequela

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Code	Description
T33.839S	Superficial frostbite of unspecified toe(s), sequela
T33.90XS	Superficial frostbite of unspecified sites, sequela
T33.99XS	Superficial frostbite of other sites, sequela
T34.011S	Frostbite with tissue necrosis of right ear, sequela
T34.012S	Frostbite with tissue necrosis of left ear, sequela
T34.019S	Frostbite with tissue necrosis of unspecified ear, sequela
T34.02XS	Frostbite with tissue necrosis of nose, sequela
T34.09XS	Frostbite with tissue necrosis of other part of head, sequela
T34.1XXS	Frostbite with tissue necrosis of neck, sequela
T34.2XXS	Frostbite with tissue necrosis of thorax, sequela
T34.3XXS	Frostbite with tissue necrosis of abdominal wall, lower back and pelvis, sequela
T34.40XS	Frostbite with tissue necrosis of unspecified arm, sequela
T34.41XS	Frostbite with tissue necrosis of right arm, sequela
T34.42XS	Frostbite with tissue necrosis of left arm, sequela
T34.511S	Frostbite with tissue necrosis of right wrist, sequela
T34.512S	Frostbite with tissue necrosis of left wrist, sequela
T34.519S	Frostbite with tissue necrosis of unspecified wrist, sequela
T34.521S	Frostbite with tissue necrosis of right hand, sequela
T34.522S	Frostbite with tissue necrosis of left hand, sequela
T34.529S	Frostbite with tissue necrosis of unspecified hand, sequela
T34.531S	Frostbite with tissue necrosis of right finger(s), sequela
T34.532S	Frostbite with tissue necrosis of left finger(s), sequela
T34.539S	Frostbite with tissue necrosis of unspecified finger(s), sequela
T34.60XS	Frostbite with tissue necrosis of unspecified hip and thigh, sequela
T34.61XS	Frostbite with tissue necrosis of right hip and thigh, sequela
T34.62XS	Frostbite with tissue necrosis of left hip and thigh, sequela
T34.70XS	Frostbite with tissue necrosis of unspecified knee and lower leg, sequela
T34.71XS	Frostbite with tissue necrosis of right knee and lower leg, sequela
T34.72XS	Frostbite with tissue necrosis of left knee and lower leg, sequela
T34.811S	Frostbite with tissue necrosis of right ankle, sequela



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Code	Description
T34.812S	Frostbite with tissue necrosis of left ankle, sequela
T34.819S	Frostbite with tissue necrosis of unspecified ankle, sequela
T34.821S	Frostbite with tissue necrosis of right foot, sequela
T34.822S	Frostbite with tissue necrosis of left foot, sequela
T34.829S	Frostbite with tissue necrosis of unspecified foot, sequela
T34.831S	Frostbite with tissue necrosis of right toe(s), sequela
T34.832S	Frostbite with tissue necrosis of left toe(s), sequela
T34.839S	Frostbite with tissue necrosis of unspecified toe(s), sequela
T34.90XS	Frostbite with tissue necrosis of unspecified sites, sequela
T34.99XS	Frostbite with tissue necrosis of other sites, sequela
T36.0X1S	Poisoning by penicillins, accidental (unintentional), sequela
T36.0X2S	Poisoning by penicillins, intentional self-harm, sequela
T36.0X3S	Poisoning by penicillins, assault, sequela
T36.0X4S	Poisoning by penicillins, undetermined, sequela
T36.0X5S	Adverse effect of penicillins, sequela
T36.0X6A	Underdosing of penicillins, initial encounter
T36.0X6D	Underdosing of penicillins, subsequent encounter
T36.0X6S	Underdosing of penicillins, sequela
T36.1X1S	Poisoning by cephalosporins and other beta-lactam antibiotics, accidental (unintentional), sequela
T36.1X2S	Poisoning by cephalosporins and other beta-lactam antibiotics, intentional self-harm, sequela
T36.1X3S	Poisoning by cephalosporins and other beta-lactam antibiotics, assault, sequela
T36.1X4S	Poisoning by cephalosporins and other beta-lactam antibiotics, undetermined, sequela
T36.1X5S	Adverse effect of cephalosporins and other beta-lactam antibiotics, sequela
T36.1X6A	Underdosing of cephalosporins and other beta-lactam antibiotics, initial encounter
T36.1X6D	Underdosing of cephalosporins and other beta-lactam antibiotics, subsequent encounter
T36.1X6S	Underdosing of cephalosporins and other beta-lactam antibiotics, sequela
T36.2X1S	Poisoning by chloramphenicol group, accidental (unintentional), sequela
T36.2X2S	Poisoning by chloramphenicol group, intentional self-harm, sequela
T36.2X3S	Poisoning by chloramphenicol group, assault, sequela

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Code	Description
T36.2X4S	Poisoning by chloramphenicol group, undetermined, sequela
T36.2X5S	Adverse effect of chloramphenicol group, sequela
T36.2X6A	Underdosing of chloramphenicol group, initial encounter
T36.2X6D	Underdosing of chloramphenicol group, subsequent encounter
T36.2X6S	Underdosing of chloramphenicol group, sequela
T36.3X1S	Poisoning by macrolides, accidental (unintentional), sequela
T36.3X2S	Poisoning by macrolides, intentional self-harm, sequela
T36.3X3S	Poisoning by macrolides, assault, sequela
T36.3X4S	Poisoning by macrolides, undetermined, sequela
T36.3X5S	Adverse effect of macrolides, sequela
T36.3X6A	Underdosing of macrolides, initial encounter
T36.3X6D	Underdosing of macrolides, subsequent encounter
T36.3X6S	Underdosing of macrolides, sequela
T36.4X1S	Poisoning by tetracyclines, accidental (unintentional), sequela
T36.4X2S	Poisoning by tetracyclines, intentional self-harm, sequela
T36.4X3S	Poisoning by tetracyclines, assault, sequela
T36.4X4S	Poisoning by tetracyclines, undetermined, sequela
T36.4X5S	Adverse effect of tetracyclines, sequela
T36.4X6A	Underdosing of tetracyclines, initial encounter
T36.4X6D	Underdosing of tetracyclines, subsequent encounter
T36.4X6S	Underdosing of tetracyclines, sequela
T36.5X1S	Poisoning by aminoglycosides, accidental (unintentional), sequela
T36.5X2S	Poisoning by aminoglycosides, intentional self-harm, sequela
T36.5X3S	Poisoning by aminoglycosides, assault, sequela
T36.5X4S	Poisoning by aminoglycosides, undetermined, sequela
T36.5X5S	Adverse effect of aminoglycosides, sequela
T36.5X6A	Underdosing of aminoglycosides, initial encounter
T36.5X6D	Underdosing of aminoglycosides, subsequent encounter
T36.5X6S	Underdosing of aminoglycosides, sequela
T36.6X1S	Poisoning by rifampicins, accidental (unintentional), sequela



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Code	Description
T36.6X2S	Poisoning by rifampicins, intentional self-harm, sequela
T36.6X3S	Poisoning by rifampicins, assault, sequela
T36.6X4S	Poisoning by rifampicins, undetermined, sequela
T36.6X5S	Adverse effect of rifampicins, sequela
T36.6X6A	Underdosing of rifampicins, initial encounter
T36.6X6D	Underdosing of rifampicins, subsequent encounter
T36.6X6S	Underdosing of rifampicins, sequela
T36.7X1S	Poisoning by antifungal antibiotics, systemically used, accidental (unintentional), sequela
T36.7X2S	Poisoning by antifungal antibiotics, systemically used, intentional self-harm, sequela
T36.7X3S	Poisoning by antifungal antibiotics, systemically used, assault, sequela
T36.7X4S	Poisoning by antifungal antibiotics, systemically used, undetermined, sequela
T36.7X5S	Adverse effect of antifungal antibiotics, systemically used, sequela
T36.7X6A	Underdosing of antifungal antibiotics, systemically used, initial encounter
T36.7X6D	Underdosing of antifungal antibiotics, systemically used, subsequent encounter
T36.7X6S	Underdosing of antifungal antibiotics, systemically used, sequela
T36.8X1S	Poisoning by other systemic antibiotics, accidental (unintentional), sequela
T36.8X2S	Poisoning by other systemic antibiotics, intentional self-harm, sequela
T36.8X3S	Poisoning by other systemic antibiotics, assault, sequela
T36.8X4S	Poisoning by other systemic antibiotics, undetermined, sequela
T36.8X5S	Adverse effect of other systemic antibiotics, sequela
T36.8X6A	Underdosing of other systemic antibiotics, initial encounter
T36.8X6D	Underdosing of other systemic antibiotics, subsequent encounter
T36.8X6S	Underdosing of other systemic antibiotics, sequela
T36.91XS	Poisoning by unspecified systemic antibiotic, accidental (unintentional), sequela
T36.92XS	Poisoning by unspecified systemic antibiotic, intentional self-harm, sequela
T36.93XS	Poisoning by unspecified systemic antibiotic, assault, sequela
T36.94XS	Poisoning by unspecified systemic antibiotic, undetermined, sequela
T36.95XS	Adverse effect of unspecified systemic antibiotic, sequela
T36.96XA	Underdosing of unspecified systemic antibiotic, initial encounter
T36.96XD	Underdosing of unspecified systemic antibiotic, subsequent encounter



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Code	Description
T36.96XS	Underdosing of unspecified systemic antibiotic, sequela
T37.0X1S	Poisoning by sulfonamides, accidental (unintentional), sequela
T37.0X2S	Poisoning by sulfonamides, intentional self-harm, sequela
T37.0X3S	Poisoning by sulfonamides, assault, sequela
T37.0X4S	Poisoning by sulfonamides, undetermined, sequela
T37.0X5S	Adverse effect of sulfonamides, sequela
T37.0X6A	Underdosing of sulfonamides, initial encounter
T37.0X6D	Underdosing of sulfonamides, subsequent encounter
T37.0X6S	Underdosing of sulfonamides, sequela
T37.1X1S	Poisoning by antimycobacterial drugs, accidental (unintentional), sequela
T37.1X2S	Poisoning by antimycobacterial drugs, intentional self-harm, sequela
T37.1X3S	Poisoning by antimycobacterial drugs, assault, sequela
T37.1X4S	Poisoning by antimycobacterial drugs, undetermined, sequela
T37.1X5S	Adverse effect of antimycobacterial drugs, sequela
T37.1X6A	Underdosing of antimycobacterial drugs, initial encounter
T37.1X6D	Underdosing of antimycobacterial drugs, subsequent encounter
T37.1X6S	Underdosing of antimycobacterial drugs, sequela
T37.2X1S	Poisoning by antimalarials and drugs acting on other blood protozoa, accidental (unintentional), sequela
T37.2X2S	Poisoning by antimalarials and drugs acting on other blood protozoa, intentional self-harm, sequela
T37.2X3S	Poisoning by antimalarials and drugs acting on other blood protozoa, assault, sequela
T37.2X4S	Poisoning by antimalarials and drugs acting on other blood protozoa, undetermined, sequela
T37.2X5S	Adverse effect of antimalarials and drugs acting on other blood protozoa, sequela
T37.2X6A	Underdosing of antimalarials and drugs acting on other blood protozoa, initial encounter
T37.2X6D	Underdosing of antimalarials and drugs acting on other blood protozoa, subsequent encounter
T37.2X6S	Underdosing of antimalarials and drugs acting on other blood protozoa, sequela
T37.3X1S	Poisoning by other antiprotozoal drugs, accidental (unintentional), sequela
T37.3X2S	Poisoning by other antiprotozoal drugs, intentional self-harm, sequela
T37.3X3S	Poisoning by other antiprotozoal drugs, assault, sequela

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Code	Description
T37.3X4S	Poisoning by other antiprotozoal drugs, undetermined, sequela
T37.3X5S	Adverse effect of other antiprotozoal drugs, sequela
T37.3X6A	Underdosing of other antiprotozoal drugs, initial encounter
T37.3X6D	Underdosing of other antiprotozoal drugs, subsequent encounter
T37.3X6S	Underdosing of other antiprotozoal drugs, sequela
T37.4X1S	Poisoning by anthelmintics, accidental (unintentional), sequela
T37.4X2S	Poisoning by anthelmintics, intentional self-harm, sequela
T37.4X3S	Poisoning by anthelmintics, assault, sequela
T37.4X4S	Poisoning by anthelmintics, undetermined, sequela
T37.4X5S	Adverse effect of anthelmintics, sequela
T37.4X6A	Underdosing of anthelmintics, initial encounter
T37.4X6D	Underdosing of anthelmintics, subsequent encounter
T37.4X6S	Underdosing of anthelmintics, sequela
T37.5X1S	Poisoning by antiviral drugs, accidental (unintentional), sequela
T37.5X2S	Poisoning by antiviral drugs, intentional self-harm, sequela
T37.5X3S	Poisoning by antiviral drugs, assault, sequela
T37.5X4S	Poisoning by antiviral drugs, undetermined, sequela
T37.5X5S	Adverse effect of antiviral drugs, sequela
T37.5X6A	Underdosing of antiviral drugs, initial encounter
T37.5X6D	Underdosing of antiviral drugs, subsequent encounter
T37.5X6S	Underdosing of antiviral drugs, sequela
T37.8X1S	Poisoning by other specified systemic anti-infectives and antiparasitics, accidental (unintentional), sequela
T37.8X2S	Poisoning by other specified systemic anti-infectives and antiparasitics, intentional self-harm, sequela
T37.8X3S	Poisoning by other specified systemic anti-infectives and antiparasitics, assault, sequela
T37.8X4S	Poisoning by other specified systemic anti-infectives and antiparasitics, undetermined, sequela
T37.8X5S	Adverse effect of other specified systemic anti-infectives and antiparasitics, sequela
T37.8X6A	Underdosing of other specified systemic anti-infectives and antiparasitics, initial encounter
T37.8X6D	Underdosing of other specified systemic anti-infectives and antiparasitics, subsequent encounter

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Code	Description
T37.8X6S	Underdosing of other specified systemic anti-infectives and antiparasitics, sequela
T37.91XS	Poisoning by unspecified systemic anti-infective and antiparasitics, accidental (unintentional), sequela
T37.92XS	Poisoning by unspecified systemic anti-infective and antiparasitics, intentional self-harm, sequela
T37.93XS	Poisoning by unspecified systemic anti-infective and antiparasitics, assault, sequela
T37.94XS	Poisoning by unspecified systemic anti-infective and antiparasitics, undetermined, sequela
T37.95XS	Adverse effect of unspecified systemic anti-infective and antiparasitic, sequela
T37.96XA	Underdosing of unspecified systemic anti-infectives and antiparasitics, initial encounter
T37.96XD	Underdosing of unspecified systemic anti-infectives and antiparasitics, subsequent encounter
T37.96XS	Underdosing of unspecified systemic anti-infectives and antiparasitics, sequela
T38.0X1S	Poisoning by glucocorticoids and synthetic analogues, accidental (unintentional), sequela
T38.0X2S	Poisoning by glucocorticoids and synthetic analogues, intentional self-harm, sequela
T38.0X3S	Poisoning by glucocorticoids and synthetic analogues, assault, sequela
T38.0X4S	Poisoning by glucocorticoids and synthetic analogues, undetermined, sequela
T38.0X5S	Adverse effect of glucocorticoids and synthetic analogues, sequela
T38.0X6A	Underdosing of glucocorticoids and synthetic analogues, initial encounter
T38.0X6D	Underdosing of glucocorticoids and synthetic analogues, subsequent encounter
T38.0X6S	Underdosing of glucocorticoids and synthetic analogues, sequela
T38.1X1S	Poisoning by thyroid hormones and substitutes, accidental (unintentional), sequela
T38.1X2S	Poisoning by thyroid hormones and substitutes, intentional self-harm, sequela
T38.1X3S	Poisoning by thyroid hormones and substitutes, assault, sequela
T38.1X4S	Poisoning by thyroid hormones and substitutes, undetermined, sequela
T38.1X5S	Adverse effect of thyroid hormones and substitutes, sequela
T38.1X6A	Underdosing of thyroid hormones and substitutes, initial encounter
T38.1X6D	Underdosing of thyroid hormones and substitutes, subsequent encounter
T38.1X6S	Underdosing of thyroid hormones and substitutes, sequela
T38.2X1S	Poisoning by antithyroid drugs, accidental (unintentional), sequela
T38.2X2S	Poisoning by antithyroid drugs, intentional self-harm, sequela
T38.2X3S	Poisoning by antithyroid drugs, assault, sequela



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Code	Description
T38.2X4S	Poisoning by antithyroid drugs, undetermined, sequela
T38.2X5S	Adverse effect of antithyroid drugs, sequela
T38.2X6A	Underdosing of antithyroid drugs, initial encounter
T38.2X6D	Underdosing of antithyroid drugs, subsequent encounter
T38.2X6S	Underdosing of antithyroid drugs, sequela
T38.3X1S	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, accidental (unintentional), sequela
T38.3X2S	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, intentional self-harm, sequela
T38.3X3S	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, assault, sequela
T38.3X4S	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, undetermined, sequela
T38.3X5S	Adverse effect of insulin and oral hypoglycemic [antidiabetic] drugs, sequela
T38.3X6A	Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs, initial encounter
T38.3X6D	Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs, subsequent encounter
T38.3X6S	Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs, sequela
T38.4X1S	Poisoning by oral contraceptives, accidental (unintentional), sequela
T38.4X2S	Poisoning by oral contraceptives, intentional self-harm, sequela
T38.4X3S	Poisoning by oral contraceptives, assault, sequela
T38.4X4S	Poisoning by oral contraceptives, undetermined, sequela
T38.4X5S	Adverse effect of oral contraceptives, sequela
T38.4X6A	Underdosing of oral contraceptives, initial encounter
T38.4X6D	Underdosing of oral contraceptives, subsequent encounter
T38.4X6S	Underdosing of oral contraceptives, sequela
T38.5X1S	Poisoning by other estrogens and progestogens, accidental (unintentional), sequela
T38.5X2S	Poisoning by other estrogens and progestogens, intentional self-harm, sequela
T38.5X3S	Poisoning by other estrogens and progestogens, assault, sequela
T38.5X4S	Poisoning by other estrogens and progestogens, undetermined, sequela
T38.5X5S	Adverse effect of other estrogens and progestogens, sequela
T38.5X6A	Underdosing of other estrogens and progestogens, initial encounter
T38.5X6D	Underdosing of other estrogens and progestogens, subsequent encounter
T38.5X6S	Underdosing of other estrogens and progestogens, sequela

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Code	Description
T38.6X1S	Poisoning by antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, accidental (unintentional), sequela
T38.6X2S	Poisoning by antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, intentional self-harm, sequela
T38.6X3S	Poisoning by antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, assault, sequela
T38.6X4S	Poisoning by antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, undetermined, sequela
T38.6X5S	Adverse effect of antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, sequela
T38.6X6A	Underdosing of antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, initial encounter
T38.6X6D	Underdosing of antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, subsequent encounter
T38.6X6S	Underdosing of antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, sequela
T38.7X1S	Poisoning by androgens and anabolic congeners, accidental (unintentional), sequela
T38.7X2S	Poisoning by androgens and anabolic congeners, intentional self-harm, sequela
T38.7X3S	Poisoning by androgens and anabolic congeners, assault, sequela
T38.7X4S	Poisoning by androgens and anabolic congeners, undetermined, sequela
T38.7X5S	Adverse effect of androgens and anabolic congeners, sequela
T38.7X6A	Underdosing of androgens and anabolic congeners, initial encounter
T38.7X6D	Underdosing of androgens and anabolic congeners, subsequent encounter
T38.7X6S	Underdosing of androgens and anabolic congeners, sequela
T38.801S	Poisoning by unspecified hormones and synthetic substitutes, accidental (unintentional), sequela
T38.802S	Poisoning by unspecified hormones and synthetic substitutes, intentional self-harm, sequela
T38.803S	Poisoning by unspecified hormones and synthetic substitutes, assault, sequela
T38.804S	Poisoning by unspecified hormones and synthetic substitutes, undetermined, sequela
T38.805S	Adverse effect of unspecified hormones and synthetic substitutes, sequela
T38.806A	Underdosing of unspecified hormones and synthetic substitutes, initial encounter
T38.806D	Underdosing of unspecified hormones and synthetic substitutes, subsequent encounter
T38.806S	Underdosing of unspecified hormones and synthetic substitutes, sequela

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Code	Description
T38.811S	Poisoning by anterior pituitary [adenohypophyseal] hormones, accidental (unintentional), sequela
T38.812S	Poisoning by anterior pituitary [adenohypophyseal] hormones, intentional self-harm, sequela
T38.813S	Poisoning by anterior pituitary [adenohypophyseal] hormones, assault, sequela
T38.814S	Poisoning by anterior pituitary [adenohypophyseal] hormones, undetermined, sequela
T38.815S	Adverse effect of anterior pituitary [adenohypophyseal] hormones, sequela
T38.816A	Underdosing of anterior pituitary [adenohypophyseal] hormones, initial encounter
T38.816D	Underdosing of anterior pituitary [adenohypophyseal] hormones, subsequent encounter
T38.816S	Underdosing of anterior pituitary [adenohypophyseal] hormones, sequela
T38.891S	Poisoning by other hormones and synthetic substitutes, accidental (unintentional), sequela
T38.892S	Poisoning by other hormones and synthetic substitutes, intentional self-harm, sequela
T38.893S	Poisoning by other hormones and synthetic substitutes, assault, sequela
T38.894S	Poisoning by other hormones and synthetic substitutes, undetermined, sequela
T38.895S	Adverse effect of other hormones and synthetic substitutes, sequela
T38.896A	Underdosing of other hormones and synthetic substitutes, initial encounter
T38.896D	Underdosing of other hormones and synthetic substitutes, subsequent encounter
T38.896S	Underdosing of other hormones and synthetic substitutes, sequela
T38.901S	Poisoning by unspecified hormone antagonists, accidental (unintentional), sequela
T38.902S	Poisoning by unspecified hormone antagonists, intentional self-harm, sequela
T38.903S	Poisoning by unspecified hormone antagonists, assault, sequela
T38.904S	Poisoning by unspecified hormone antagonists, undetermined, sequela
T38.905S	Adverse effect of unspecified hormone antagonists, sequela
T38.906A	Underdosing of unspecified hormone antagonists, initial encounter
T38.906D	Underdosing of unspecified hormone antagonists, subsequent encounter
T38.906S	Underdosing of unspecified hormone antagonists, sequela
T38.991S	Poisoning by other hormone antagonists, accidental (unintentional), sequela
T38.992S	Poisoning by other hormone antagonists, intentional self-harm, sequela
T38.993S	Poisoning by other hormone antagonists, assault, sequela
T38.994S	Poisoning by other hormone antagonists, undetermined, sequela
T38.995S	Adverse effect of other hormone antagonists, sequela

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Code	Description
T38.996A	Underdosing of other hormone antagonists, initial encounter
T38.996D	Underdosing of other hormone antagonists, subsequent encounter
T38.996S	Underdosing of other hormone antagonists, sequela
T39.011S	Poisoning by aspirin, accidental (unintentional), sequela
T39.012S	Poisoning by aspirin, intentional self-harm, sequela
T39.013S	Poisoning by aspirin, assault, sequela
T39.014S	Poisoning by aspirin, undetermined, sequela
T39.015S	Adverse effect of aspirin, sequela
T39.016A	Underdosing of aspirin, initial encounter
T39.016D	Underdosing of aspirin, subsequent encounter
T39.016S	Underdosing of aspirin, sequela
T39.091S	Poisoning by salicylates, accidental (unintentional), sequela
T39.092S	Poisoning by salicylates, intentional self-harm, sequela
T39.093S	Poisoning by salicylates, assault, sequela
T39.094S	Poisoning by salicylates, undetermined, sequela
T39.095S	Adverse effect of salicylates, sequela
T39.096A	Underdosing of salicylates, initial encounter
T39.096D	Underdosing of salicylates, subsequent encounter
T39.096S	Underdosing of salicylates, sequela
T39.1X1S	Poisoning by 4-Aminophenol derivatives, accidental (unintentional), sequela
T39.1X2S	Poisoning by 4-Aminophenol derivatives, intentional self-harm, sequela
T39.1X3S	Poisoning by 4-Aminophenol derivatives, assault, sequela
T39.1X4S	Poisoning by 4-Aminophenol derivatives, undetermined, sequela
T39.1X5S	Adverse effect of 4-Aminophenol derivatives, sequela
T39.1X6A	Underdosing of 4-Aminophenol derivatives, initial encounter
T39.1X6D	Underdosing of 4-Aminophenol derivatives, subsequent encounter
T39.1X6S	Underdosing of 4-Aminophenol derivatives, sequela
T39.2X1S	Poisoning by pyrazolone derivatives, accidental (unintentional), sequela
T39.2X2S	Poisoning by pyrazolone derivatives, intentional self-harm, sequela
T39.2X3S	Poisoning by pyrazolone derivatives, assault, sequela



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Code	Description
T39.2X4S	Poisoning by pyrazolone derivatives, undetermined, sequela
T39.2X5S	Adverse effect of pyrazolone derivatives, sequela
T39.2X6A	Underdosing of pyrazolone derivatives, initial encounter
T39.2X6D	Underdosing of pyrazolone derivatives, subsequent encounter
T39.2X6S	Underdosing of pyrazolone derivatives, sequela
T39.311S	Poisoning by propionic acid derivatives, accidental (unintentional), sequela
T39.312S	Poisoning by propionic acid derivatives, intentional self-harm, sequela
T39.313S	Poisoning by propionic acid derivatives, assault, sequela
T39.314S	Poisoning by propionic acid derivatives, undetermined, sequela
T39.315S	Adverse effect of propionic acid derivatives, sequela
T39.316A	Underdosing of propionic acid derivatives, initial encounter
T39.316D	Underdosing of propionic acid derivatives, subsequent encounter
T39.316S	Underdosing of propionic acid derivatives, sequela
T39.391S	Poisoning by other nonsteroidal anti-inflammatory drugs [NSAID], accidental (unintentional), sequela
T39.392S	Poisoning by other nonsteroidal anti-inflammatory drugs [NSAID], intentional self-harm, sequela
T39.393S	Poisoning by other nonsteroidal anti-inflammatory drugs [NSAID], assault, sequela
T39.394S	Poisoning by other nonsteroidal anti-inflammatory drugs [NSAID], undetermined, sequela
T39.395S	Adverse effect of other nonsteroidal anti-inflammatory drugs [NSAID], sequela
T39.396A	Underdosing of other nonsteroidal anti-inflammatory drugs [NSAID], initial encounter
T39.396D	Underdosing of other nonsteroidal anti-inflammatory drugs [NSAID], subsequent encounter
T39.396S	Underdosing of other nonsteroidal anti-inflammatory drugs [NSAID], sequela
T39.4X1S	Poisoning by antirheumatics, not elsewhere classified, accidental (unintentional), sequela
T39.4X2S	Poisoning by antirheumatics, not elsewhere classified, intentional self-harm, sequela
T39.4X3S	Poisoning by antirheumatics, not elsewhere classified, assault, sequela
T39.4X4S	Poisoning by antirheumatics, not elsewhere classified, undetermined, sequela
T39.4X5S	Adverse effect of antirheumatics, not elsewhere classified, sequela
T39.4X6A	Underdosing of antirheumatics, not elsewhere classified, initial encounter
T39.4X6D	Underdosing of antirheumatics, not elsewhere classified, subsequent encounter
T39.4X6S	Underdosing of antirheumatics, not elsewhere classified, sequela

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Code	Description
T39.8X1S	Poisoning by other nonopioid analgesics and antipyretics, not elsewhere classified, accidental (unintentional), sequela
T39.8X2S	Poisoning by other nonopioid analgesics and antipyretics, not elsewhere classified, intentional self-harm, sequela
T39.8X3S	Poisoning by other nonopioid analgesics and antipyretics, not elsewhere classified, assault, sequela
T39.8X4S	Poisoning by other nonopioid analgesics and antipyretics, not elsewhere classified, undetermined, sequela
T39.8X5S	Adverse effect of other nonopioid analgesics and antipyretics, not elsewhere classified, sequela
T39.8X6A	Underdosing of other nonopioid analgesics and antipyretics, not elsewhere classified, initial encounter
T39.8X6D	Underdosing of other nonopioid analgesics and antipyretics, not elsewhere classified, subsequent encounter
T39.8X6S	Underdosing of other nonopioid analgesics and antipyretics, not elsewhere classified, sequela
T39.91XS	Poisoning by unspecified nonopioid analgesic, antipyretic and antirheumatic, accidental (unintentional), sequela
T39.92XS	Poisoning by unspecified nonopioid analgesic, antipyretic and antirheumatic, intentional self-harm, sequela
T39.93XS	Poisoning by unspecified nonopioid analgesic, antipyretic and antirheumatic, assault, sequela
T39.94XS	Poisoning by unspecified nonopioid analgesic, antipyretic and antirheumatic, undetermined, sequela
T39.95XS	Adverse effect of unspecified nonopioid analgesic, antipyretic and antirheumatic, sequela
T39.96XA	Underdosing of unspecified nonopioid analgesic, antipyretic and antirheumatic, initial encounter
T39.96XD	Underdosing of unspecified nonopioid analgesic, antipyretic and antirheumatic, subsequent encounter
T39.96XS	Underdosing of unspecified nonopioid analgesic, antipyretic and antirheumatic, sequela
T40.0X1S	Poisoning by opium, accidental (unintentional), sequela
T40.0X2S	Poisoning by opium, intentional self-harm, sequela
T40.0X3S	Poisoning by opium, assault, sequela
T40.0X4S	Poisoning by opium, undetermined, sequela
T40.0X5S	Adverse effect of opium, sequela

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Code	Description
T40.0X6A	Underdosing of opium, initial encounter
T40.0X6D	Underdosing of opium, subsequent encounter
T40.0X6S	Underdosing of opium, sequela
T40.1X1S	Poisoning by heroin, accidental (unintentional), sequela
T40.1X2S	Poisoning by heroin, intentional self-harm, sequela
T40.1X3S	Poisoning by heroin, assault, sequela
T40.1X4S	Poisoning by heroin, undetermined, sequela
T40.2X1S	Poisoning by other opioids, accidental (unintentional), sequela
T40.2X2S	Poisoning by other opioids, intentional self-harm, sequela
T40.2X3S	Poisoning by other opioids, assault, sequela
T40.2X4S	Poisoning by other opioids, undetermined, sequela
T40.2X5S	Adverse effect of other opioids, sequela
T40.2X6A	Underdosing of other opioids, initial encounter
T40.2X6D	Underdosing of other opioids, subsequent encounter
T40.2X6S	Underdosing of other opioids, sequela
T40.3X1S	Poisoning by methadone, accidental (unintentional), sequela
T40.3X2S	Poisoning by methadone, intentional self-harm, sequela
T40.3X3S	Poisoning by methadone, assault, sequela
T40.3X4S	Poisoning by methadone, undetermined, sequela
T40.3X5S	Adverse effect of methadone, sequela
T40.3X6A	Underdosing of methadone, initial encounter
T40.3X6D	Underdosing of methadone, subsequent encounter
T40.3X6S	Underdosing of methadone, sequela
T40.4X1S	Poisoning by other synthetic narcotics, accidental (unintentional), sequela
T40.4X2S	Poisoning by other synthetic narcotics, intentional self-harm, sequela
T40.4X3S	Poisoning by other synthetic narcotics, assault, sequela
T40.4X4S	Poisoning by other synthetic narcotics, undetermined, sequela
T40.4X5S	Adverse effect of other synthetic narcotics, sequela
T40.4X6A	Underdosing of other synthetic narcotics, initial encounter
T40.4X6D	Underdosing of other synthetic narcotics, subsequent encounter

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Code	Description
T40.4X6S	Underdosing of other synthetic narcotics, sequela
T40.5X1S	Poisoning by cocaine, accidental (unintentional), sequela
T40.5X2S	Poisoning by cocaine, intentional self-harm, sequela
T40.5X3S	Poisoning by cocaine, assault, sequela
T40.5X4S	Poisoning by cocaine, undetermined, sequela
T40.5X5S	Adverse effect of cocaine, sequela
T40.5X6A	Underdosing of cocaine, initial encounter
T40.5X6D	Underdosing of cocaine, subsequent encounter
T40.5X6S	Underdosing of cocaine, sequela
T40.601S	Poisoning by unspecified narcotics, accidental (unintentional), sequela
T40.602S	Poisoning by unspecified narcotics, intentional self-harm, sequela
T40.603S	Poisoning by unspecified narcotics, assault, sequela
T40.604S	Poisoning by unspecified narcotics, undetermined, sequela
T40.605S	Adverse effect of unspecified narcotics, sequela
T40.606A	Underdosing of unspecified narcotics, initial encounter
T40.606D	Underdosing of unspecified narcotics, subsequent encounter
T40.606S	Underdosing of unspecified narcotics, sequela
T40.691S	Poisoning by other narcotics, accidental (unintentional), sequela
T40.692S	Poisoning by other narcotics, intentional self-harm, sequela
T40.693S	Poisoning by other narcotics, assault, sequela
T40.694S	Poisoning by other narcotics, undetermined, sequela
T40.695S	Adverse effect of other narcotics, sequela
T40.696A	Underdosing of other narcotics, initial encounter
T40.696D	Underdosing of other narcotics, subsequent encounter
T40.696S	Underdosing of other narcotics, sequela
T40.7X1S	Poisoning by cannabis (derivatives), accidental (unintentional), sequela
T40.7X2S	Poisoning by cannabis (derivatives), intentional self-harm, sequela
T40.7X3S	Poisoning by cannabis (derivatives), assault, sequela
T40.7X4S	Poisoning by cannabis (derivatives), undetermined, sequela
T40.7X5S	Adverse effect of cannabis (derivatives), sequela

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Code	Description
T40.7X6A	Underdosing of cannabis (derivatives), initial encounter
T40.7X6D	Underdosing of cannabis (derivatives), subsequent encounter
T40.7X6S	Underdosing of cannabis (derivatives), sequela
T40.8X1S	Poisoning by lysergide [LSD], accidental (unintentional), sequela
T40.8X2S	Poisoning by lysergide [LSD], intentional self-harm, sequela
T40.8X3S	Poisoning by lysergide [LSD], assault, sequela
T40.8X4S	Poisoning by lysergide [LSD], undetermined, sequela
T40.901S	Poisoning by unspecified psychodysleptics [hallucinogens], accidental (unintentional), sequela
T40.902S	Poisoning by unspecified psychodysleptics [hallucinogens], intentional self-harm, sequela
T40.903S	Poisoning by unspecified psychodysleptics [hallucinogens], assault, sequela
T40.904S	Poisoning by unspecified psychodysleptics [hallucinogens], undetermined, sequela
T40.905S	Adverse effect of unspecified psychodysleptics [hallucinogens], sequela
T40.906A	Underdosing of unspecified psychodysleptics, initial encounter
T40.906D	Underdosing of unspecified psychodysleptics, subsequent encounter
T40.906S	Underdosing of unspecified psychodysleptics, sequela
T40.991S	Poisoning by other psychodysleptics [hallucinogens], accidental (unintentional), sequela
T40.992S	Poisoning by other psychodysleptics [hallucinogens], intentional self-harm, sequela
T40.993S	Poisoning by other psychodysleptics [hallucinogens], assault, sequela
T40.994S	Poisoning by other psychodysleptics [hallucinogens], undetermined, sequela
T40.995S	Adverse effect of other psychodysleptics [hallucinogens], sequela
T40.996A	Underdosing of other psychodysleptics, initial encounter
T40.996D	Underdosing of other psychodysleptics, subsequent encounter
T40.996S	Underdosing of other psychodysleptics, sequela
T41.0X1S	Poisoning by inhaled anesthetics, accidental (unintentional), sequela
T41.0X2S	Poisoning by inhaled anesthetics, intentional self-harm, sequela
T41.0X3S	Poisoning by inhaled anesthetics, assault, sequela
T41.0X4S	Poisoning by inhaled anesthetics, undetermined, sequela
T41.0X5S	Adverse effect of inhaled anesthetics, sequela
T41.0X6A	Underdosing of inhaled anesthetics, initial encounter
T41.0X6D	Underdosing of inhaled anesthetics, subsequent encounter

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Code	Description
T41.0X6S	Underdosing of inhaled anesthetics, sequela
T41.1X1S	Poisoning by intravenous anesthetics, accidental (unintentional), sequela
T41.1X2S	Poisoning by intravenous anesthetics, intentional self-harm, sequela
T41.1X3S	Poisoning by intravenous anesthetics, assault, sequela
T41.1X4S	Poisoning by intravenous anesthetics, undetermined, sequela
T41.1X5S	Adverse effect of intravenous anesthetics, sequela
T41.1X6A	Underdosing of intravenous anesthetics, initial encounter
T41.1X6D	Underdosing of intravenous anesthetics, subsequent encounter
T41.1X6S	Underdosing of intravenous anesthetics, sequela
T41.201S	Poisoning by unspecified general anesthetics, accidental (unintentional), sequela
T41.202S	Poisoning by unspecified general anesthetics, intentional self-harm, sequela
T41.203S	Poisoning by unspecified general anesthetics, assault, sequela
T41.204S	Poisoning by unspecified general anesthetics, undetermined, sequela
T41.205S	Adverse effect of unspecified general anesthetics, sequela
T41.206A	Underdosing of unspecified general anesthetics, initial encounter
T41.206D	Underdosing of unspecified general anesthetics, subsequent encounter
T41.206S	Underdosing of unspecified general anesthetics, sequela
T41.291S	Poisoning by other general anesthetics, accidental (unintentional), sequela
T41.292S	Poisoning by other general anesthetics, intentional self-harm, sequela
T41.293S	Poisoning by other general anesthetics, assault, sequela
T41.294S	Poisoning by other general anesthetics, undetermined, sequela
T41.295S	Adverse effect of other general anesthetics, sequela
T41.296A	Underdosing of other general anesthetics, initial encounter
T41.296D	Underdosing of other general anesthetics, subsequent encounter
T41.296S	Underdosing of other general anesthetics, sequela
T41.3X1S	Poisoning by local anesthetics, accidental (unintentional), sequela
T41.3X2S	Poisoning by local anesthetics, intentional self-harm, sequela
T41.3X3S	Poisoning by local anesthetics, assault, sequela
T41.3X4S	Poisoning by local anesthetics, undetermined, sequela
T41.3X5S	Adverse effect of local anesthetics, sequela

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Code	Description
T41.3X6A	Underdosing of local anesthetics, initial encounter
T41.3X6D	Underdosing of local anesthetics, subsequent encounter
T41.3X6S	Underdosing of local anesthetics, sequela
T41.41XS	Poisoning by unspecified anesthetic, accidental (unintentional), sequela
T41.42XS	Poisoning by unspecified anesthetic, intentional self-harm, sequela
T41.43XS	Poisoning by unspecified anesthetic, assault, sequela
T41.44XS	Poisoning by unspecified anesthetic, undetermined, sequela
T41.45XS	Adverse effect of unspecified anesthetic, sequela
T41.46XA	Underdosing of unspecified anesthetics, initial encounter
T41.46XD	Underdosing of unspecified anesthetics, subsequent encounter
T41.46XS	Underdosing of unspecified anesthetics, sequela
T41.5X1S	Poisoning by therapeutic gases, accidental (unintentional), sequela
T41.5X2S	Poisoning by therapeutic gases, intentional self-harm, sequela
T41.5X3S	Poisoning by therapeutic gases, assault, sequela
T41.5X4S	Poisoning by therapeutic gases, undetermined, sequela
T41.5X5S	Adverse effect of therapeutic gases, sequela
T41.5X6A	Underdosing of therapeutic gases, initial encounter
T41.5X6D	Underdosing of therapeutic gases, subsequent encounter
T41.5X6S	Underdosing of therapeutic gases, sequela
T42.0X1S	Poisoning by hydantoin derivatives, accidental (unintentional), sequela
T42.0X2S	Poisoning by hydantoin derivatives, intentional self-harm, sequela
T42.0X3S	Poisoning by hydantoin derivatives, assault, sequela
T42.0X4S	Poisoning by hydantoin derivatives, undetermined, sequela
T42.0X5S	Adverse effect of hydantoin derivatives, sequela
T42.0X6A	Underdosing of hydantoin derivatives, initial encounter
T42.0X6D	Underdosing of hydantoin derivatives, subsequent encounter
T42.0X6S	Underdosing of hydantoin derivatives, sequela
T42.1X2S	Poisoning by iminostilbenes, intentional self-harm, sequela
T42.1X3S	Poisoning by iminostilbenes, assault, sequela
T42.1X4S	Poisoning by iminostilbenes, undetermined, sequela

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Code	Description
T42.1X5S	Adverse effect of iminostilbenes, sequela
T42.1X6A	Underdosing of iminostilbenes, initial encounter
T42.1X6D	Underdosing of iminostilbenes, subsequent encounter
T42.1X6S	Underdosing of iminostilbenes, sequela
T42.2X1S	Poisoning by succinimides and oxazolidinediones, accidental (unintentional), sequela
T42.2X2S	Poisoning by succinimides and oxazolidinediones, intentional self-harm, sequela
T42.2X3S	Poisoning by succinimides and oxazolidinediones, assault, sequela
T42.2X4S	Poisoning by succinimides and oxazolidinediones, undetermined, sequela
T42.2X5S	Adverse effect of succinimides and oxazolidinediones, sequela
T42.2X6A	Underdosing of succinimides and oxazolidinediones, initial encounter
T42.2X6D	Underdosing of succinimides and oxazolidinediones, subsequent encounter
T42.2X6S	Underdosing of succinimides and oxazolidinediones, sequela
T42.3X1S	Poisoning by barbiturates, accidental (unintentional), sequela
T42.3X2S	Poisoning by barbiturates, intentional self-harm, sequela
T42.3X3S	Poisoning by barbiturates, assault, sequela
T42.3X4S	Poisoning by barbiturates, undetermined, sequela
T42.3X5S	Adverse effect of barbiturates, sequela
T42.3X6A	Underdosing of barbiturates, initial encounter
T42.3X6D	Underdosing of barbiturates, subsequent encounter
T42.3X6S	Underdosing of barbiturates, sequela
T42.4X1S	Poisoning by benzodiazepines, accidental (unintentional), sequela
T42.4X2S	Poisoning by benzodiazepines, intentional self-harm, sequela
T42.4X3S	Poisoning by benzodiazepines, assault, sequela
T42.4X4S	Poisoning by benzodiazepines, undetermined, sequela
T42.4X5S	Adverse effect of benzodiazepines, sequela
T42.4X6A	Underdosing of benzodiazepines, initial encounter
T42.4X6D	Underdosing of benzodiazepines, subsequent encounter
T42.4X6S	Underdosing of benzodiazepines, sequela
T42.5X1S	Poisoning by mixed antiepileptics, accidental (unintentional), sequela
T42.5X2S	Poisoning by mixed antiepileptics, intentional self-harm, sequela



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T42.5X3S	Poisoning by mixed antiepileptics, assault, sequela
T42.5X4S	Poisoning by mixed antiepileptics, undetermined, sequela
T42.5X5S	Adverse effect of mixed antiepileptics, sequela
T42.5X6A	Underdosing of mixed antiepileptics, initial encounter
T42.5X6D	Underdosing of mixed antiepileptics, subsequent encounter
T42.5X6S	Underdosing of mixed antiepileptics, sequela
T42.6X1S	Poisoning by other antiepileptic and sedative-hypnotic drugs, accidental (unintentional), sequela
T42.6X2S	Poisoning by other antiepileptic and sedative-hypnotic drugs, intentional self-harm, sequela
T42.6X3S	Poisoning by other antiepileptic and sedative-hypnotic drugs, assault, sequela
T42.6X4S	Poisoning by other antiepileptic and sedative-hypnotic drugs, undetermined, sequela
T42.6X5S	Adverse effect of other antiepileptic and sedative-hypnotic drugs, sequela
T42.6X6A	Underdosing of other antiepileptic and sedative-hypnotic drugs, initial encounter
T42.6X6D	Underdosing of other antiepileptic and sedative-hypnotic drugs, subsequent encounter
T42.6X6S	Underdosing of other antiepileptic and sedative-hypnotic drugs, sequela
T42.71XS	Poisoning by unspecified antiepileptic and sedative-hypnotic drugs, accidental (unintentional), sequela
T42.72XS	Poisoning by unspecified antiepileptic and sedative-hypnotic drugs, intentional self-harm, sequela
T42.73XS	Poisoning by unspecified antiepileptic and sedative-hypnotic drugs, assault, sequela
T42.74XS	Poisoning by unspecified antiepileptic and sedative-hypnotic drugs, undetermined, sequela
T42.75XS	Adverse effect of unspecified antiepileptic and sedative-hypnotic drugs, sequela
T42.76XA	Underdosing of unspecified antiepileptic and sedative-hypnotic drugs, initial encounter
T42.76XD	Underdosing of unspecified antiepileptic and sedative-hypnotic drugs, subsequent encounter
T42.76XS	Underdosing of unspecified antiepileptic and sedative-hypnotic drugs, sequela
T42.8X1S	Poisoning by antiparkinsonism drugs and other central muscle-tone depressants, accidental (unintentional), sequela
T42.8X2S	Poisoning by antiparkinsonism drugs and other central muscle-tone depressants, intentional self-harm, sequela
T42.8X3S	Poisoning by antiparkinsonism drugs and other central muscle-tone depressants, assault, sequela



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T42.8X4S	Poisoning by antiparkinsonism drugs and other central muscle-tone depressants, undetermined, sequela
T42.8X5S	Adverse effect of antiparkinsonism drugs and other central muscle-tone depressants, sequela
T42.8X6A	Underdosing of antiparkinsonism drugs and other central muscle-tone depressants, initial encounter
T42.8X6D	Underdosing of antiparkinsonism drugs and other central muscle-tone depressants, subsequent encounter
T42.8X6S	Underdosing of antiparkinsonism drugs and other central muscle-tone depressants, sequela
T43.011S	Poisoning by tricyclic antidepressants, accidental (unintentional), sequela
T43.012S	Poisoning by tricyclic antidepressants, intentional self-harm, sequela
T43.013S	Poisoning by tricyclic antidepressants, assault, sequela
T43.014S	Poisoning by tricyclic antidepressants, undetermined, sequela
T43.015S	Adverse effect of tricyclic antidepressants, sequela
T43.016A	Underdosing of tricyclic antidepressants, initial encounter
T43.016D	Underdosing of tricyclic antidepressants, subsequent encounter
T43.016S	Underdosing of tricyclic antidepressants, sequela
T43.021S	Poisoning by tetracyclic antidepressants, accidental (unintentional), sequela
T43.022S	Poisoning by tetracyclic antidepressants, intentional self-harm, sequela
T43.023S	Poisoning by tetracyclic antidepressants, assault, sequela
T43.024S	Poisoning by tetracyclic antidepressants, undetermined, sequela
T43.025S	Adverse effect of tetracyclic antidepressants, sequela
T43.026A	Underdosing of tetracyclic antidepressants, initial encounter
T43.026D	Underdosing of tetracyclic antidepressants, subsequent encounter
T43.026S	Underdosing of tetracyclic antidepressants, sequela
T43.1X1S	Poisoning by monoamine-oxidase-inhibitor antidepressants, accidental (unintentional), sequela
T43.1X2S	Poisoning by monoamine-oxidase-inhibitor antidepressants, intentional self-harm, sequela
T43.1X3S	Poisoning by monoamine-oxidase-inhibitor antidepressants, assault, sequela
T43.1X4S	Poisoning by monoamine-oxidase-inhibitor antidepressants, undetermined, sequela
T43.1X5S	Adverse effect of monoamine-oxidase-inhibitor antidepressants, sequela



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Code	Description
T43.1X6A	Underdosing of monoamine-oxidase-inhibitor antidepressants, initial encounter
T43.1X6D	Underdosing of monoamine-oxidase-inhibitor antidepressants, subsequent encounter
T43.1X6S	Underdosing of monoamine-oxidase-inhibitor antidepressants, sequela
T43.201S	Poisoning by unspecified antidepressants, accidental (unintentional), sequela
T43.202S	Poisoning by unspecified antidepressants, intentional self-harm, sequela
T43.203S	Poisoning by unspecified antidepressants, assault, sequela
T43.204S	Poisoning by unspecified antidepressants, undetermined, sequela
T43.205S	Adverse effect of unspecified antidepressants, sequela
T43.206A	Underdosing of unspecified antidepressants, initial encounter
T43.206D	Underdosing of unspecified antidepressants, subsequent encounter
T43.206S	Underdosing of unspecified antidepressants, sequela
T43.211S	Poisoning by selective serotonin and norepinephrine reuptake inhibitors, accidental (unintentional), sequela
T43.212S	Poisoning by selective serotonin and norepinephrine reuptake inhibitors, intentional self-harm, sequela
T43.213S	Poisoning by selective serotonin and norepinephrine reuptake inhibitors, assault, sequela
T43.214S	Poisoning by selective serotonin and norepinephrine reuptake inhibitors, undetermined, sequela
T43.215S	Adverse effect of selective serotonin and norepinephrine reuptake inhibitors, sequela
T43.216A	Underdosing of selective serotonin and norepinephrine reuptake inhibitors, initial encounter
T43.216D	Underdosing of selective serotonin and norepinephrine reuptake inhibitors, subsequent encounter
T43.216S	Underdosing of selective serotonin and norepinephrine reuptake inhibitors, sequela
T43.221S	Poisoning by selective serotonin reuptake inhibitors, accidental (unintentional), sequela
T43.222S	Poisoning by selective serotonin reuptake inhibitors, intentional self-harm, sequela
T43.223S	Poisoning by selective serotonin reuptake inhibitors, assault, sequela
T43.224S	Poisoning by selective serotonin reuptake inhibitors, undetermined, sequela
T43.225S	Adverse effect of selective serotonin reuptake inhibitors, sequela
T43.226A	Underdosing of selective serotonin reuptake inhibitors, initial encounter
T43.226D	Underdosing of selective serotonin reuptake inhibitors, subsequent encounter
T43.226S	Underdosing of selective serotonin reuptake inhibitors, sequela

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Code	Description
T43.291S	Poisoning by other antidepressants, accidental (unintentional), sequela
T43.292S	Poisoning by other antidepressants, intentional self-harm, sequela
T43.293S	Poisoning by other antidepressants, assault, sequela
T43.294S	Poisoning by other antidepressants, undetermined, sequela
T43.295S	Adverse effect of other antidepressants, sequela
T43.296A	Underdosing of other antidepressants, initial encounter
T43.296D	Underdosing of other antidepressants, subsequent encounter
T43.296S	Underdosing of other antidepressants, sequela
T43.3X1S	Poisoning by phenothiazine antipsychotics and neuroleptics, accidental (unintentional), sequela
T43.3X2S	Poisoning by phenothiazine antipsychotics and neuroleptics, intentional self-harm, sequela
T43.3X3S	Poisoning by phenothiazine antipsychotics and neuroleptics, assault, sequela
T43.3X4S	Poisoning by phenothiazine antipsychotics and neuroleptics, undetermined, sequela
T43.3X5S	Adverse effect of phenothiazine antipsychotics and neuroleptics, sequela
T43.3X6A	Underdosing of phenothiazine antipsychotics and neuroleptics, initial encounter
T43.3X6D	Underdosing of phenothiazine antipsychotics and neuroleptics, subsequent encounter
T43.3X6S	Underdosing of phenothiazine antipsychotics and neuroleptics, sequela
T43.4X1S	Poisoning by butyrophenone and thiothixene neuroleptics, accidental (unintentional), sequela
T43.4X2S	Poisoning by butyrophenone and thiothixene neuroleptics, intentional self-harm, sequela
T43.4X3S	Poisoning by butyrophenone and thiothixene neuroleptics, assault, sequela
T43.4X4S	Poisoning by butyrophenone and thiothixene neuroleptics, undetermined, sequela
T43.4X5S	Adverse effect of butyrophenone and thiothixene neuroleptics, sequela
T43.4X6A	Underdosing of butyrophenone and thiothixene neuroleptics, initial encounter
T43.4X6D	Underdosing of butyrophenone and thiothixene neuroleptics, subsequent encounter
T43.4X6S	Underdosing of butyrophenone and thiothixene neuroleptics, sequela
T43.501S	Poisoning by unspecified antipsychotics and neuroleptics, accidental (unintentional), sequela
T43.502S	Poisoning by unspecified antipsychotics and neuroleptics, intentional self-harm, sequela
T43.503S	Poisoning by unspecified antipsychotics and neuroleptics, assault, sequela
T43.504S	Poisoning by unspecified antipsychotics and neuroleptics, undetermined, sequela



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Code	Description
T43.505S	Adverse effect of unspecified antipsychotics and neuroleptics, sequela
T43.506A	Underdosing of unspecified antipsychotics and neuroleptics, initial encounter
T43.506D	Underdosing of unspecified antipsychotics and neuroleptics, subsequent encounter
T43.506S	Underdosing of unspecified antipsychotics and neuroleptics, sequela
T43.591S	Poisoning by other antipsychotics and neuroleptics, accidental (unintentional), sequela
T43.592S	Poisoning by other antipsychotics and neuroleptics, intentional self-harm, sequela
T43.593S	Poisoning by other antipsychotics and neuroleptics, assault, sequela
T43.594S	Poisoning by other antipsychotics and neuroleptics, undetermined, sequela
T43.595S	Adverse effect of other antipsychotics and neuroleptics, sequela
T43.596A	Underdosing of other antipsychotics and neuroleptics, initial encounter
T43.596D	Underdosing of other antipsychotics and neuroleptics, subsequent encounter
T43.596S	Underdosing of other antipsychotics and neuroleptics, sequela
T43.601S	Poisoning by unspecified psychostimulants, accidental (unintentional), sequela
T43.602S	Poisoning by unspecified psychostimulants, intentional self-harm, sequela
T43.603S	Poisoning by unspecified psychostimulants, assault, sequela
T43.604S	Poisoning by unspecified psychostimulants, undetermined, sequela
T43.605S	Adverse effect of unspecified psychostimulants, sequela
T43.606A	Underdosing of unspecified psychostimulants, initial encounter
T43.606D	Underdosing of unspecified psychostimulants, subsequent encounter
T43.606S	Underdosing of unspecified psychostimulants, sequela
T43.611S	Poisoning by caffeine, accidental (unintentional), sequela
T43.612S	Poisoning by caffeine, intentional self-harm, sequela
T43.613S	Poisoning by caffeine, assault, sequela
T43.614S	Poisoning by caffeine, undetermined, sequela
T43.615S	Adverse effect of caffeine, sequela
T43.616A	Underdosing of caffeine, initial encounter
T43.616D	Underdosing of caffeine, subsequent encounter
T43.616S	Underdosing of caffeine, sequela
T43.621S	Poisoning by amphetamines, accidental (unintentional), sequela
T43.622S	Poisoning by amphetamines, intentional self-harm, sequela



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Code	Description
T43.623S	Poisoning by amphetamines, assault, sequela
T43.624S	Poisoning by amphetamines, undetermined, sequela
T43.625S	Adverse effect of amphetamines, sequela
T43.626A	Underdosing of amphetamines, initial encounter
T43.626D	Underdosing of amphetamines, subsequent encounter
T43.626S	Underdosing of amphetamines, sequela
T43.631S	Poisoning by methylphenidate, accidental (unintentional), sequela
T43.632S	Poisoning by methylphenidate, intentional self-harm, sequela
T43.633S	Poisoning by methylphenidate, assault, sequela
T43.634S	Poisoning by methylphenidate, undetermined, sequela
T43.635S	Adverse effect of methylphenidate, sequela
T43.636A	Underdosing of methylphenidate, initial encounter
T43.636D	Underdosing of methylphenidate, subsequent encounter
T43.636S	Underdosing of methylphenidate, sequela
T43.691S	Poisoning by other psychostimulants, accidental (unintentional), sequela
T43.692S	Poisoning by other psychostimulants, intentional self-harm, sequela
T43.693S	Poisoning by other psychostimulants, assault, sequela
T43.694S	Poisoning by other psychostimulants, undetermined, sequela
T43.695S	Adverse effect of other psychostimulants, sequela
T43.696A	Underdosing of other psychostimulants, initial encounter
T43.696D	Underdosing of other psychostimulants, subsequent encounter
T43.696S	Underdosing of other psychostimulants, sequela
T43.8X1S	Poisoning by other psychotropic drugs, accidental (unintentional), sequela
T43.8X2S	Poisoning by other psychotropic drugs, intentional self-harm, sequela
T43.8X3S	Poisoning by other psychotropic drugs, assault, sequela
T43.8X4S	Poisoning by other psychotropic drugs, undetermined, sequela
T43.8X5S	Adverse effect of other psychotropic drugs, sequela
T43.8X6A	Underdosing of other psychotropic drugs, initial encounter
T43.8X6D	Underdosing of other psychotropic drugs, subsequent encounter
T43.8X6S	Underdosing of other psychotropic drugs, sequela

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Code	Description
T43.91XS	Poisoning by unspecified psychotropic drug, accidental (unintentional), sequela
T43.92XS	Poisoning by unspecified psychotropic drug, intentional self-harm, sequela
T43.93XS	Poisoning by unspecified psychotropic drug, assault, sequela
T43.94XS	Poisoning by unspecified psychotropic drug, undetermined, sequela
T43.95XS	Adverse effect of unspecified psychotropic drug, sequela
T43.96XA	Underdosing of unspecified psychotropic drug, initial encounter
T43.96XD	Underdosing of unspecified psychotropic drug, subsequent encounter
T43.96XS	Underdosing of unspecified psychotropic drug, sequela
T44.0X1S	Poisoning by anticholinesterase agents, accidental (unintentional), sequela
T44.0X2S	Poisoning by anticholinesterase agents, intentional self-harm, sequela
T44.0X3S	Poisoning by anticholinesterase agents, assault, sequela
T44.0X4S	Poisoning by anticholinesterase agents, undetermined, sequela
T44.0X5S	Adverse effect of anticholinesterase agents, sequela
T44.0X6A	Underdosing of anticholinesterase agents, initial encounter
T44.0X6D	Underdosing of anticholinesterase agents, subsequent encounter
T44.0X6S	Underdosing of anticholinesterase agents, sequela
T44.1X1S	Poisoning by other parasympathomimetics [cholinergics], accidental (unintentional), sequela
T44.1X2S	Poisoning by other parasympathomimetics [cholinergics], intentional self-harm, sequela
T44.1X3S	Poisoning by other parasympathomimetics [cholinergics], assault, sequela
T44.1X4S	Poisoning by other parasympathomimetics [cholinergics], undetermined, sequela
T44.1X5S	Adverse effect of other parasympathomimetics [cholinergics], sequela
T44.1X6A	Underdosing of other parasympathomimetics, initial encounter
T44.1X6D	Underdosing of other parasympathomimetics, subsequent encounter
T44.1X6S	Underdosing of other parasympathomimetics, sequela
T44.2X1S	Poisoning by ganglionic blocking drugs, accidental (unintentional), sequela
T44.2X2S	Poisoning by ganglionic blocking drugs, intentional self-harm, sequela
T44.2X3S	Poisoning by ganglionic blocking drugs, assault, sequela
T44.2X4S	Poisoning by ganglionic blocking drugs, undetermined, sequela
T44.2X5S	Adverse effect of ganglionic blocking drugs, sequela
T44.2X6A	Underdosing of ganglionic blocking drugs, initial encounter

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Code	Description
T44.2X6D	Underdosing of ganglionic blocking drugs, subsequent encounter
T44.2X6S	Underdosing of ganglionic blocking drugs, sequela
T44.3X1S	Poisoning by other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, accidental (unintentional), sequela
T44.3X2S	Poisoning by other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, intentional self-harm, sequela
T44.3X3S	Poisoning by other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, assault, sequela
T44.3X4S	Poisoning by other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, undetermined, sequela
T44.3X5S	Adverse effect of other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, sequela
T44.3X6A	Underdosing of other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, initial encounter
T44.3X6D	Underdosing of other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, subsequent encounter
T44.3X6S	Underdosing of other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, sequela
T44.4X1S	Poisoning by predominantly alpha-adrenoreceptor agonists, accidental (unintentional), sequela
T44.4X2S	Poisoning by predominantly alpha-adrenoreceptor agonists, intentional self-harm, sequela
T44.4X3S	Poisoning by predominantly alpha-adrenoreceptor agonists, assault, sequela
T44.4X4S	Poisoning by predominantly alpha-adrenoreceptor agonists, undetermined, sequela
T44.4X5S	Adverse effect of predominantly alpha-adrenoreceptor agonists, sequela
T44.4X6A	Underdosing of predominantly alpha-adrenoreceptor agonists, initial encounter
T44.4X6D	Underdosing of predominantly alpha-adrenoreceptor agonists, subsequent encounter
T44.4X6S	Underdosing of predominantly alpha-adrenoreceptor agonists, sequela
T44.5X1S	Poisoning by predominantly beta-adrenoreceptor agonists, accidental (unintentional), sequela
T44.5X2S	Poisoning by predominantly beta-adrenoreceptor agonists, intentional self-harm, sequela
T44.5X3S	Poisoning by predominantly beta-adrenoreceptor agonists, assault, sequela
T44.5X4S	Poisoning by predominantly beta-adrenoreceptor agonists, undetermined, sequela
T44.5X5S	Adverse effect of predominantly beta-adrenoreceptor agonists, sequela
T44.5X6A	Underdosing of predominantly beta-adrenoreceptor agonists, initial encounter

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Code	Description
T44.5X6D	Underdosing of predominantly beta-adrenoreceptor agonists, subsequent encounter
T44.5X6S	Underdosing of predominantly beta-adrenoreceptor agonists, sequela
T44.6X1S	Poisoning by alpha-adrenoreceptor antagonists, accidental (unintentional), sequela
T44.6X2S	Poisoning by alpha-adrenoreceptor antagonists, intentional self-harm, sequela
T44.6X3S	Poisoning by alpha-adrenoreceptor antagonists, assault, sequela
T44.6X4S	Poisoning by alpha-adrenoreceptor antagonists, undetermined, sequela
T44.6X5S	Adverse effect of alpha-adrenoreceptor antagonists, sequela
T44.6X6A	Underdosing of alpha-adrenoreceptor antagonists, initial encounter
T44.6X6D	Underdosing of alpha-adrenoreceptor antagonists, subsequent encounter
T44.6X6S	Underdosing of alpha-adrenoreceptor antagonists, sequela
T44.7X1S	Poisoning by beta-adrenoreceptor antagonists, accidental (unintentional), sequela
T44.7X2S	Poisoning by beta-adrenoreceptor antagonists, intentional self-harm, sequela
T44.7X3S	Poisoning by beta-adrenoreceptor antagonists, assault, sequela
T44.7X4S	Poisoning by beta-adrenoreceptor antagonists, undetermined, sequela
T44.7X5S	Adverse effect of beta-adrenoreceptor antagonists, sequela
T44.7X6A	Underdosing of beta-adrenoreceptor antagonists, initial encounter
T44.7X6D	Underdosing of beta-adrenoreceptor antagonists, subsequent encounter
T44.7X6S	Underdosing of beta-adrenoreceptor antagonists, sequela
T44.8X1S	Poisoning by centrally-acting and adrenergic-neuron-blocking agents, accidental (unintentional), sequela
T44.8X2S	Poisoning by centrally-acting and adrenergic-neuron-blocking agents, intentional self-harm, sequela
T44.8X3S	Poisoning by centrally-acting and adrenergic-neuron-blocking agents, assault, sequela
T44.8X4S	Poisoning by centrally-acting and adrenergic-neuron-blocking agents, undetermined, sequela
T44.8X5S	Adverse effect of centrally-acting and adrenergic-neuron-blocking agents, sequela
T44.8X6A	Underdosing of centrally-acting and adrenergic-neuron-blocking agents, initial encounter
T44.8X6D	Underdosing of centrally-acting and adrenergic-neuron-blocking agents, subsequent encounter
T44.8X6S	Underdosing of centrally-acting and adrenergic-neuron-blocking agents, sequela
T44.901S	Poisoning by unspecified drugs primarily affecting the autonomic nervous system, accidental (unintentional), sequela



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T44.902S	Poisoning by unspecified drugs primarily affecting the autonomic nervous system, intentional self-harm, sequela
T44.903S	Poisoning by unspecified drugs primarily affecting the autonomic nervous system, assault, sequela
T44.904S	Poisoning by unspecified drugs primarily affecting the autonomic nervous system, undetermined, sequela
T44.905S	Adverse effect of unspecified drugs primarily affecting the autonomic nervous system, sequela
T44.906A	Underdosing of unspecified drugs primarily affecting the autonomic nervous system, initial encounter
T44.906D	Underdosing of unspecified drugs primarily affecting the autonomic nervous system, subsequent encounter
T44.906S	Underdosing of unspecified drugs primarily affecting the autonomic nervous system, sequela
T44.991S	Poisoning by other drug primarily affecting the autonomic nervous system, accidental (unintentional), sequela
T44.992S	Poisoning by other drug primarily affecting the autonomic nervous system, intentional self-harm, sequela
T44.993S	Poisoning by other drug primarily affecting the autonomic nervous system, assault, sequela
T44.994S	Poisoning by other drug primarily affecting the autonomic nervous system, undetermined, sequela
T44.995S	Adverse effect of other drug primarily affecting the autonomic nervous system, sequela
T44.996A	Underdosing of other drug primarily affecting the autonomic nervous system, initial encounter
T44.996D	Underdosing of other drug primarily affecting the autonomic nervous system, subsequent encounter
T44.996S	Underdosing of other drug primarily affecting the autonomic nervous system, sequela
T45.0X1S	Poisoning by antiallergic and antiemetic drugs, accidental (unintentional), sequela
T45.0X2S	Poisoning by antiallergic and antiemetic drugs, intentional self-harm, sequela
T45.0X3S	Poisoning by antiallergic and antiemetic drugs, assault, sequela
T45.0X4S	Poisoning by antiallergic and antiemetic drugs, undetermined, sequela
T45.0X5S	Adverse effect of antiallergic and antiemetic drugs, sequela
T45.0X6A	Underdosing of antiallergic and antiemetic drugs, initial encounter
T45.0X6D	Underdosing of antiallergic and antiemetic drugs, subsequent encounter

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T45.0X6S	Underdosing of antiallergic and antiemetic drugs, sequela
T45.1X1S	Poisoning by antineoplastic and immunosuppressive drugs, accidental (unintentional), sequela
T45.1X2S	Poisoning by antineoplastic and immunosuppressive drugs, intentional self-harm, sequela
T45.1X3S	Poisoning by antineoplastic and immunosuppressive drugs, assault, sequela
T45.1X4S	Poisoning by antineoplastic and immunosuppressive drugs, undetermined, sequela
T45.1X5S	Adverse effect of antineoplastic and immunosuppressive drugs, sequela
T45.1X6A	Underdosing of antineoplastic and immunosuppressive drugs, initial encounter
T45.1X6D	Underdosing of antineoplastic and immunosuppressive drugs, subsequent encounter
T45.1X6S	Underdosing of antineoplastic and immunosuppressive drugs, sequela
T45.2X1S	Poisoning by vitamins, accidental (unintentional), sequela
T45.2X2S	Poisoning by vitamins, intentional self-harm, sequela
T45.2X3S	Poisoning by vitamins, assault, sequela
T45.2X4S	Poisoning by vitamins, undetermined, sequela
T45.2X5S	Adverse effect of vitamins, sequela
T45.2X6A	Underdosing of vitamins, initial encounter
T45.2X6D	Underdosing of vitamins, subsequent encounter
T45.2X6S	Underdosing of vitamins, sequela
T45.3X1S	Poisoning by enzymes, accidental (unintentional), sequela
T45.3X2S	Poisoning by enzymes, intentional self-harm, sequela
T45.3X3S	Poisoning by enzymes, assault, sequela
T45.3X4S	Poisoning by enzymes, undetermined, sequela
T45.3X5S	Adverse effect of enzymes, sequela
T45.3X6A	Underdosing of enzymes, initial encounter
T45.3X6D	Underdosing of enzymes, subsequent encounter
T45.3X6S	Underdosing of enzymes, sequela
T45.4X1S	Poisoning by iron and its compounds, accidental (unintentional), sequela
T45.4X2S	Poisoning by iron and its compounds, intentional self-harm, sequela
T45.4X3S	Poisoning by iron and its compounds, assault, sequela
T45.4X4S	Poisoning by iron and its compounds, undetermined, sequela
T45.4X5S	Adverse effect of iron and its compounds, sequela

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Code	Description
T45.4X6A	Underdosing of iron and its compounds, initial encounter
T45.4X6D	Underdosing of iron and its compounds, subsequent encounter
T45.4X6S	Underdosing of iron and its compounds, sequela
T45.511S	Poisoning by anticoagulants, accidental (unintentional), sequela
T45.512S	Poisoning by anticoagulants, intentional self-harm, sequela
T45.513S	Poisoning by anticoagulants, assault, sequela
T45.514S	Poisoning by anticoagulants, undetermined, sequela
T45.515S	Adverse effect of anticoagulants, sequela
T45.516A	Underdosing of anticoagulants, initial encounter
T45.516D	Underdosing of anticoagulants, subsequent encounter
T45.516S	Underdosing of anticoagulants, sequela
T45.521S	Poisoning by antithrombotic drugs, accidental (unintentional), sequela
T45.522S	Poisoning by antithrombotic drugs, intentional self-harm, sequela
T45.523S	Poisoning by antithrombotic drugs, assault, sequela
T45.524S	Poisoning by antithrombotic drugs, undetermined, sequela
T45.525S	Adverse effect of antithrombotic drugs, sequela
T45.526A	Underdosing of antithrombotic drugs, initial encounter
T45.526D	Underdosing of antithrombotic drugs, subsequent encounter
T45.526S	Underdosing of antithrombotic drugs, sequela
T45.601S	Poisoning by unspecified fibrinolysis-affecting drugs, accidental (unintentional), sequela
T45.602S	Poisoning by unspecified fibrinolysis-affecting drugs, intentional self-harm, sequela
T45.603S	Poisoning by unspecified fibrinolysis-affecting drugs, assault, sequela
T45.604S	Poisoning by unspecified fibrinolysis-affecting drugs, undetermined, sequela
T45.605S	Adverse effect of unspecified fibrinolysis-affecting drugs, sequela
T45.606A	Underdosing of unspecified fibrinolysis-affecting drugs, initial encounter
T45.606D	Underdosing of unspecified fibrinolysis-affecting drugs, subsequent encounter
T45.606S	Underdosing of unspecified fibrinolysis-affecting drugs, sequela
T45.611S	Poisoning by thrombolytic drug, accidental (unintentional), sequela
T45.612S	Poisoning by thrombolytic drug, intentional self-harm, sequela
T45.613S	Poisoning by thrombolytic drug, assault, sequela



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Code	Description
T45.614S	Poisoning by thrombolytic drug, undetermined, sequela
T45.615S	Adverse effect of thrombolytic drugs, sequela
T45.616A	Underdosing of thrombolytic drugs, initial encounter
T45.616D	Underdosing of thrombolytic drugs, subsequent encounter
T45.616S	Underdosing of thrombolytic drugs, sequela
T45.621S	Poisoning by hemostatic drug, accidental (unintentional), sequela
T45.622S	Poisoning by hemostatic drug, intentional self-harm, sequela
T45.623S	Poisoning by hemostatic drug, assault, sequela
T45.624S	Poisoning by hemostatic drug, undetermined, sequela
T45.625S	Adverse effect of hemostatic drug, sequela
T45.626A	Underdosing of hemostatic drugs, initial encounter
T45.626D	Underdosing of hemostatic drugs, subsequent encounter
T45.626S	Underdosing of hemostatic drugs, sequela
T45.691S	Poisoning by other fibrinolysis-affecting drugs, accidental (unintentional), sequela
T45.692S	Poisoning by other fibrinolysis-affecting drugs, intentional self-harm, sequela
T45.693S	Poisoning by other fibrinolysis-affecting drugs, assault, sequela
T45.694S	Poisoning by other fibrinolysis-affecting drugs, undetermined, sequela
T45.695S	Adverse effect of other fibrinolysis-affecting drugs, sequela
T45.696A	Underdosing of other fibrinolysis-affecting drugs, initial encounter
T45.696D	Underdosing of other fibrinolysis-affecting drugs, subsequent encounter
T45.696S	Underdosing of other fibrinolysis-affecting drugs, sequela
T45.7X1S	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, accidental (unintentional), sequela
T45.7X2S	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, intentional self-harm, sequela
T45.7X3S	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, assault, sequela
T45.7X4S	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, undetermined, sequela
T45.7X5S	Adverse effect of anticoagulant antagonists, vitamin K and other coagulants, sequela
T45.7X6A	Underdosing of anticoagulant antagonist, vitamin K and other coagulants, initial encounter
T45.7X6D	Underdosing of anticoagulant antagonist, vitamin K and other coagulants, subsequent encounter

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Code	Description
T45.7X6S	Underdosing of anticoagulant antagonist, vitamin K and other coagulants, sequela
T45.8X1S	Poisoning by other primarily systemic and hematological agents, accidental (unintentional), sequela
T45.8X2S	Poisoning by other primarily systemic and hematological agents, intentional self-harm, sequela
T45.8X3S	Poisoning by other primarily systemic and hematological agents, assault, sequela
T45.8X4S	Poisoning by other primarily systemic and hematological agents, undetermined, sequela
T45.8X5S	Adverse effect of other primarily systemic and hematological agents, sequela
T45.8X6A	Underdosing of other primarily systemic and hematological agents, initial encounter
T45.8X6D	Underdosing of other primarily systemic and hematological agents, subsequent encounter
T45.8X6S	Underdosing of other primarily systemic and hematological agents, sequela
T45.91XS	Poisoning by unspecified primarily systemic and hematological agent, accidental (unintentional), sequela
T45.92XS	Poisoning by unspecified primarily systemic and hematological agent, intentional self-harm, sequela
T45.93XS	Poisoning by unspecified primarily systemic and hematological agent, assault, sequela
T45.94XS	Poisoning by unspecified primarily systemic and hematological agent, undetermined, sequela
T45.95XS	Adverse effect of unspecified primarily systemic and hematological agent, sequela
T45.96XA	Underdosing of unspecified primarily systemic and hematological agent, initial encounter
T45.96XD	Underdosing of unspecified primarily systemic and hematological agent, subsequent encounter
T45.96XS	Underdosing of unspecified primarily systemic and hematological agent, sequela
T46.0X1S	Poisoning by cardiac-stimulant glycosides and drugs of similar action, accidental (unintentional), sequela
T46.0X2S	Poisoning by cardiac-stimulant glycosides and drugs of similar action, intentional self-harm, sequela
T46.0X3S	Poisoning by cardiac-stimulant glycosides and drugs of similar action, assault, sequela
T46.0X4S	Poisoning by cardiac-stimulant glycosides and drugs of similar action, undetermined, sequela
T46.0X5S	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, sequela
T46.0X6A	Underdosing of cardiac-stimulant glycosides and drugs of similar action, initial encounter
T46.0X6D	Underdosing of cardiac-stimulant glycosides and drugs of similar action, subsequent encounter

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Code	Description
T46.0X6S	Underdosing of cardiac-stimulant glycosides and drugs of similar action, sequela
T46.1X1S	Poisoning by calcium-channel blockers, accidental (unintentional), sequela
T46.1X2S	Poisoning by calcium-channel blockers, intentional self-harm, sequela
T46.1X3S	Poisoning by calcium-channel blockers, assault, sequela
T46.1X4S	Poisoning by calcium-channel blockers, undetermined, sequela
T46.1X5S	Adverse effect of calcium-channel blockers, sequela
T46.1X6A	Underdosing of calcium-channel blockers, initial encounter
T46.1X6D	Underdosing of calcium-channel blockers, subsequent encounter
T46.1X6S	Underdosing of calcium-channel blockers, sequela
T46.2X1S	Poisoning by other antidysrhythmic drugs, accidental (unintentional), sequela
T46.2X2S	Poisoning by other antidysrhythmic drugs, intentional self-harm, sequela
T46.2X3S	Poisoning by other antidysrhythmic drugs, assault, sequela
T46.2X4S	Poisoning by other antidysrhythmic drugs, undetermined, sequela
T46.2X5S	Adverse effect of other antidysrhythmic drugs, sequela
T46.2X6A	Underdosing of other antidysrhythmic drugs, initial encounter
T46.2X6D	Underdosing of other antidysrhythmic drugs, subsequent encounter
T46.2X6S	Underdosing of other antidysrhythmic drugs, sequela
T46.3X1S	Poisoning by coronary vasodilators, accidental (unintentional), sequela
T46.3X2S	Poisoning by coronary vasodilators, intentional self-harm, sequela
T46.3X3S	Poisoning by coronary vasodilators, assault, sequela
T46.3X4S	Poisoning by coronary vasodilators, undetermined, sequela
T46.3X5S	Adverse effect of coronary vasodilators, sequela
T46.3X6A	Underdosing of coronary vasodilators, initial encounter
T46.3X6D	Underdosing of coronary vasodilators, subsequent encounter
T46.3X6S	Underdosing of coronary vasodilators, sequela
T46.4X1S	Poisoning by angiotensin-converting-enzyme inhibitors, accidental (unintentional), sequela
T46.4X2S	Poisoning by angiotensin-converting-enzyme inhibitors, intentional self-harm, sequela
T46.4X3S	Poisoning by angiotensin-converting-enzyme inhibitors, assault, sequela
T46.4X4S	Poisoning by angiotensin-converting-enzyme inhibitors, undetermined, sequela
T46.4X5S	Adverse effect of angiotensin-converting-enzyme inhibitors, sequela

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Code	Description
T46.4X6A	Underdosing of angiotensin-converting-enzyme inhibitors, initial encounter
T46.4X6D	Underdosing of angiotensin-converting-enzyme inhibitors, subsequent encounter
T46.4X6S	Underdosing of angiotensin-converting-enzyme inhibitors, sequela
T46.5X1S	Poisoning by other antihypertensive drugs, accidental (unintentional), sequela
T46.5X2S	Poisoning by other antihypertensive drugs, intentional self-harm, sequela
T46.5X3S	Poisoning by other antihypertensive drugs, assault, sequela
T46.5X4S	Poisoning by other antihypertensive drugs, undetermined, sequela
T46.5X5S	Adverse effect of other antihypertensive drugs, sequela
T46.5X6A	Underdosing of other antihypertensive drugs, initial encounter
T46.5X6D	Underdosing of other antihypertensive drugs, subsequent encounter
T46.5X6S	Underdosing of other antihypertensive drugs, sequela
T46.6X1S	Poisoning by antihyperlipidemic and antiarteriosclerotic drugs, accidental (unintentional), sequela
T46.6X2S	Poisoning by antihyperlipidemic and antiarteriosclerotic drugs, intentional self-harm, sequela
T46.6X3S	Poisoning by antihyperlipidemic and antiarteriosclerotic drugs, assault, sequela
T46.6X4S	Poisoning by antihyperlipidemic and antiarteriosclerotic drugs, undetermined, sequela
T46.6X5S	Adverse effect of antihyperlipidemic and antiarteriosclerotic drugs, sequela
T46.6X6A	Underdosing of antihyperlipidemic and antiarteriosclerotic drugs, initial encounter
T46.6X6D	Underdosing of antihyperlipidemic and antiarteriosclerotic drugs, subsequent encounter
T46.6X6S	Underdosing of antihyperlipidemic and antiarteriosclerotic drugs, sequela
T46.7X1S	Poisoning by peripheral vasodilators, accidental (unintentional), sequela
T46.7X2S	Poisoning by peripheral vasodilators, intentional self-harm, sequela
T46.7X3S	Poisoning by peripheral vasodilators, assault, sequela
T46.7X4S	Poisoning by peripheral vasodilators, undetermined, sequela
T46.7X5S	Adverse effect of peripheral vasodilators, sequela
T46.7X6A	Underdosing of peripheral vasodilators, initial encounter
T46.7X6D	Underdosing of peripheral vasodilators, subsequent encounter
T46.7X6S	Underdosing of peripheral vasodilators, sequela
T46.8X1S	Poisoning by antivaricose drugs, including sclerosing agents, accidental (unintentional), sequela



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T46.8X2S	Poisoning by antivaricose drugs, including sclerosing agents, intentional self-harm, sequela
T46.8X3S	Poisoning by antivaricose drugs, including sclerosing agents, assault, sequela
T46.8X4S	Poisoning by antivaricose drugs, including sclerosing agents, undetermined, sequela
T46.8X5S	Adverse effect of antivaricose drugs, including sclerosing agents, sequela
T46.8X6A	Underdosing of antivaricose drugs, including sclerosing agents, initial encounter
T46.8X6D	Underdosing of antivaricose drugs, including sclerosing agents, subsequent encounter
T46.8X6S	Underdosing of antivaricose drugs, including sclerosing agents, sequela
T46.901S	Poisoning by unspecified agents primarily affecting the cardiovascular system, accidental (unintentional), sequela
T46.902S	Poisoning by unspecified agents primarily affecting the cardiovascular system, intentional self-harm, sequela
T46.903S	Poisoning by unspecified agents primarily affecting the cardiovascular system, assault, sequela
T46.904S	Poisoning by unspecified agents primarily affecting the cardiovascular system, undetermined, sequela
T46.905S	Adverse effect of unspecified agents primarily affecting the cardiovascular system, sequela
T46.906A	Underdosing of unspecified agents primarily affecting the cardiovascular system, initial encounter
T46.906D	Underdosing of unspecified agents primarily affecting the cardiovascular system, subsequent encounter
T46.906S	Underdosing of unspecified agents primarily affecting the cardiovascular system, sequela
T46.991S	Poisoning by other agents primarily affecting the cardiovascular system, accidental (unintentional), sequela
T46.992S	Poisoning by other agents primarily affecting the cardiovascular system, intentional self-harm, sequela
T46.993S	Poisoning by other agents primarily affecting the cardiovascular system, assault, sequela
T46.994S	Poisoning by other agents primarily affecting the cardiovascular system, undetermined, sequela
T46.995S	Adverse effect of other agents primarily affecting the cardiovascular system, sequela
T46.996A	Underdosing of other agents primarily affecting the cardiovascular system, initial encounter
T46.996D	Underdosing of other agents primarily affecting the cardiovascular system, subsequent encounter
T46.996S	Underdosing of other agents primarily affecting the cardiovascular system, sequela

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Code	Description
T47.0X1S	Poisoning by histamine H2-receptor blockers, accidental (unintentional), sequela
T47.0X2S	Poisoning by histamine H2-receptor blockers, intentional self-harm, sequela
T47.0X3S	Poisoning by histamine H2-receptor blockers, assault, sequela
T47.0X4S	Poisoning by histamine H2-receptor blockers, undetermined, sequela
T47.0X5S	Adverse effect of histamine H2-receptor blockers, sequela
T47.0X6A	Underdosing of histamine H2-receptor blockers, initial encounter
T47.0X6D	Underdosing of histamine H2-receptor blockers, subsequent encounter
T47.0X6S	Underdosing of histamine H2-receptor blockers, sequela
T47.1X1S	Poisoning by other antacids and anti-gastric-secretion drugs, accidental (unintentional), sequela
T47.1X2S	Poisoning by other antacids and anti-gastric-secretion drugs, intentional self-harm, sequela
T47.1X3S	Poisoning by other antacids and anti-gastric-secretion drugs, assault, sequela
T47.1X4S	Poisoning by other antacids and anti-gastric-secretion drugs, undetermined, sequela
T47.1X5S	Adverse effect of other antacids and anti-gastric-secretion drugs, sequela
T47.1X6A	Underdosing of other antacids and anti-gastric-secretion drugs, initial encounter
T47.1X6D	Underdosing of other antacids and anti-gastric-secretion drugs, subsequent encounter
T47.1X6S	Underdosing of other antacids and anti-gastric-secretion drugs, sequela
T47.2X1S	Poisoning by stimulant laxatives, accidental (unintentional), sequela
T47.2X2S	Poisoning by stimulant laxatives, intentional self-harm, sequela
T47.2X3S	Poisoning by stimulant laxatives, assault, sequela
T47.2X4S	Poisoning by stimulant laxatives, undetermined, sequela
T47.2X5S	Adverse effect of stimulant laxatives, sequela
T47.2X6A	Underdosing of stimulant laxatives, initial encounter
T47.2X6D	Underdosing of stimulant laxatives, subsequent encounter
T47.2X6S	Underdosing of stimulant laxatives, sequela
T47.3X1S	Poisoning by saline and osmotic laxatives, accidental (unintentional), sequela
T47.3X2S	Poisoning by saline and osmotic laxatives, intentional self-harm, sequela
T47.3X3S	Poisoning by saline and osmotic laxatives, assault, sequela
T47.3X4S	Poisoning by saline and osmotic laxatives, undetermined, sequela
T47.3X5S	Adverse effect of saline and osmotic laxatives, sequela
T47.3X6A	Underdosing of saline and osmotic laxatives, initial encounter

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Code	Description
T47.3X6D	Underdosing of saline and osmotic laxatives, subsequent encounter
T47.3X6S	Underdosing of saline and osmotic laxatives, sequela
T47.4X1S	Poisoning by other laxatives, accidental (unintentional), sequela
T47.4X2S	Poisoning by other laxatives, intentional self-harm, sequela
T47.4X3S	Poisoning by other laxatives, assault, sequela
T47.4X4S	Poisoning by other laxatives, undetermined, sequela
T47.4X5S	Adverse effect of other laxatives, sequela
T47.4X6A	Underdosing of other laxatives, initial encounter
T47.4X6D	Underdosing of other laxatives, subsequent encounter
T47.4X6S	Underdosing of other laxatives, sequela
T47.5X1S	Poisoning by digestants, accidental (unintentional), sequela
T47.5X2S	Poisoning by digestants, intentional self-harm, sequela
T47.5X3S	Poisoning by digestants, assault, sequela
T47.5X4S	Poisoning by digestants, undetermined, sequela
T47.5X5S	Adverse effect of digestants, sequela
T47.5X6A	Underdosing of digestants, initial encounter
T47.5X6D	Underdosing of digestants, subsequent encounter
T47.5X6S	Underdosing of digestants, sequela
T47.6X1S	Poisoning by antidiarrheal drugs, accidental (unintentional), sequela
T47.6X2S	Poisoning by antidiarrheal drugs, intentional self-harm, sequela
T47.6X3S	Poisoning by antidiarrheal drugs, assault, sequela
T47.6X4S	Poisoning by antidiarrheal drugs, undetermined, sequela
T47.6X5S	Adverse effect of antidiarrheal drugs, sequela
T47.6X6A	Underdosing of antidiarrheal drugs, initial encounter
T47.6X6D	Underdosing of antidiarrheal drugs, subsequent encounter
T47.6X6S	Underdosing of antidiarrheal drugs, sequela
T47.7X1S	Poisoning by emetics, accidental (unintentional), sequela
T47.7X2S	Poisoning by emetics, intentional self-harm, sequela
T47.7X3S	Poisoning by emetics, assault, sequela
T47.7X4S	Poisoning by emetics, undetermined, sequela



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T47.7X5S	Adverse effect of emetics, sequela
T47.7X6A	Underdosing of emetics, initial encounter
T47.7X6D	Underdosing of emetics, subsequent encounter
T47.7X6S	Underdosing of emetics, sequela
T47.8X1S	Poisoning by other agents primarily affecting gastrointestinal system, accidental (unintentional), sequela
T47.8X2S	Poisoning by other agents primarily affecting gastrointestinal system, intentional self-harm, sequela
T47.8X3S	Poisoning by other agents primarily affecting gastrointestinal system, assault, sequela
T47.8X4S	Poisoning by other agents primarily affecting gastrointestinal system, undetermined, sequela
T47.8X5S	Adverse effect of other agents primarily affecting gastrointestinal system, sequela
T47.8X6A	Underdosing of other agents primarily affecting gastrointestinal system, initial encounter
T47.8X6D	Underdosing of other agents primarily affecting gastrointestinal system, subsequent encounter
T47.8X6S	Underdosing of other agents primarily affecting gastrointestinal system, sequela
T47.91XS	Poisoning by unspecified agents primarily affecting the gastrointestinal system, accidental (unintentional), sequela
T47.92XS	Poisoning by unspecified agents primarily affecting the gastrointestinal system, intentional self-harm, sequela
T47.93XS	Poisoning by unspecified agents primarily affecting the gastrointestinal system, assault, sequela
T47.94XS	Poisoning by unspecified agents primarily affecting the gastrointestinal system, undetermined, sequela
T47.95XS	Adverse effect of unspecified agents primarily affecting the gastrointestinal system, sequela
T47.96XA	Underdosing of unspecified agents primarily affecting the gastrointestinal system, initial encounter
T47.96XD	Underdosing of unspecified agents primarily affecting the gastrointestinal system, subsequent encounter
T47.96XS	Underdosing of unspecified agents primarily affecting the gastrointestinal system, sequela
T48.0X1S	Poisoning by oxytocic drugs, accidental (unintentional), sequela
T48.0X2S	Poisoning by oxytocic drugs, intentional self-harm, sequela
T48.0X3S	Poisoning by oxytocic drugs, assault, sequela



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Code	Description
T48.0X4S	Poisoning by oxytocic drugs, undetermined, sequela
T48.0X5S	Adverse effect of oxytocic drugs, sequela
T48.0X6A	Underdosing of oxytocic drugs, initial encounter
T48.0X6D	Underdosing of oxytocic drugs, subsequent encounter
T48.0X6S	Underdosing of oxytocic drugs, sequela
T48.1X1S	Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], accidental (unintentional), sequela
T48.1X2S	Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], intentional self-harm, sequela
T48.1X3S	Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], assault, sequela
T48.1X4S	Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], undetermined, sequela
T48.1X5S	Adverse effect of skeletal muscle relaxants [neuromuscular blocking agents], sequela
T48.1X6A	Underdosing of skeletal muscle relaxants [neuromuscular blocking agents], initial encounter
T48.1X6D	Underdosing of skeletal muscle relaxants [neuromuscular blocking agents], subsequent encounter
T48.1X6S	Underdosing of skeletal muscle relaxants [neuromuscular blocking agents], sequela
T48.201S	Poisoning by unspecified drugs acting on muscles, accidental (unintentional), sequela
T48.202S	Poisoning by unspecified drugs acting on muscles, intentional self-harm, sequela
T48.203S	Poisoning by unspecified drugs acting on muscles, assault, sequela
T48.204S	Poisoning by unspecified drugs acting on muscles, undetermined, sequela
T48.205S	Adverse effect of unspecified drugs acting on muscles, sequela
T48.206A	Underdosing of unspecified drugs acting on muscles, initial encounter
T48.206D	Underdosing of unspecified drugs acting on muscles, subsequent encounter
T48.206S	Underdosing of unspecified drugs acting on muscles, sequela
T48.291S	Poisoning by other drugs acting on muscles, accidental (unintentional), sequela
T48.292S	Poisoning by other drugs acting on muscles, intentional self-harm, sequela
T48.293S	Poisoning by other drugs acting on muscles, assault, sequela
T48.294S	Poisoning by other drugs acting on muscles, undetermined, sequela
T48.295S	Adverse effect of other drugs acting on muscles, sequela
T48.296A	Underdosing of other drugs acting on muscles, initial encounter

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Code	Description
T48.296D	Underdosing of other drugs acting on muscles, subsequent encounter
T48.296S	Underdosing of other drugs acting on muscles, sequela
T48.3X1S	Poisoning by antitussives, accidental (unintentional), sequela
T48.3X2S	Poisoning by antitussives, intentional self-harm, sequela
T48.3X3S	Poisoning by antitussives, assault, sequela
T48.3X4S	Poisoning by antitussives, undetermined, sequela
T48.3X5S	Adverse effect of antitussives, sequela
T48.3X6A	Underdosing of antitussives, initial encounter
T48.3X6D	Underdosing of antitussives, subsequent encounter
T48.3X6S	Underdosing of antitussives, sequela
T48.4X1S	Poisoning by expectorants, accidental (unintentional), sequela
T48.4X2S	Poisoning by expectorants, intentional self-harm, sequela
T48.4X3S	Poisoning by expectorants, assault, sequela
T48.4X4S	Poisoning by expectorants, undetermined, sequela
T48.4X5S	Adverse effect of expectorants, sequela
T48.4X6A	Underdosing of expectorants, initial encounter
T48.4X6D	Underdosing of expectorants, subsequent encounter
T48.4X6S	Underdosing of expectorants, sequela
T48.5X1S	Poisoning by other anti-common-cold drugs, accidental (unintentional), sequela
T48.5X2S	Poisoning by other anti-common-cold drugs, intentional self-harm, sequela
T48.5X3S	Poisoning by other anti-common-cold drugs, assault, sequela
T48.5X4S	Poisoning by other anti-common-cold drugs, undetermined, sequela
T48.5X5S	Adverse effect of other anti-common-cold drugs, sequela
T48.5X6A	Underdosing of other anti-common-cold drugs, initial encounter
T48.5X6D	Underdosing of other anti-common-cold drugs, subsequent encounter
T48.5X6S	Underdosing of other anti-common-cold drugs, sequela
T48.6X1S	Poisoning by antiasthmatics, accidental (unintentional), sequela
T48.6X2S	Poisoning by antiasthmatics, intentional self-harm, sequela
T48.6X3S	Poisoning by antiasthmatics, assault, sequela
T48.6X4S	Poisoning by antiasthmatics, undetermined, sequela

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Code	Description
T48.6X5S	Adverse effect of antiasthmatics, sequela
T48.6X6A	Underdosing of antiasthmatics, initial encounter
T48.6X6D	Underdosing of antiasthmatics, subsequent encounter
T48.6X6S	Underdosing of antiasthmatics, sequela
T48.901S	Poisoning by unspecified agents primarily acting on the respiratory system, accidental (unintentional), sequela
T48.902S	Poisoning by unspecified agents primarily acting on the respiratory system, intentional self-harm, sequela
T48.903S	Poisoning by unspecified agents primarily acting on the respiratory system, assault, sequela
T48.904S	Poisoning by unspecified agents primarily acting on the respiratory system, undetermined, sequela
T48.905S	Adverse effect of unspecified agents primarily acting on the respiratory system, sequela
T48.906A	Underdosing of unspecified agents primarily acting on the respiratory system, initial encounter
T48.906D	Underdosing of unspecified agents primarily acting on the respiratory system, subsequent encounter
T48.906S	Underdosing of unspecified agents primarily acting on the respiratory system, sequela
T48.991S	Poisoning by other agents primarily acting on the respiratory system, accidental (unintentional), sequela
T48.992S	Poisoning by other agents primarily acting on the respiratory system, intentional self-harm, sequela
T48.993S	Poisoning by other agents primarily acting on the respiratory system, assault, sequela
T48.994S	Poisoning by other agents primarily acting on the respiratory system, undetermined, sequela
T48.995S	Adverse effect of other agents primarily acting on the respiratory system, sequela
T48.996A	Underdosing of other agents primarily acting on the respiratory system, initial encounter
T48.996D	Underdosing of other agents primarily acting on the respiratory system, subsequent encounter
T48.996S	Underdosing of other agents primarily acting on the respiratory system, sequela
T49.0X1S	Poisoning by local antifungal, anti-infective and anti-inflammatory drugs, accidental (unintentional), sequela
T49.0X2S	Poisoning by local antifungal, anti-infective and anti-inflammatory drugs, intentional self-harm, sequela

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Code	Description
T49.0X3S	Poisoning by local antifungal, anti-infective and anti-inflammatory drugs, assault, sequela
T49.0X4S	Poisoning by local antifungal, anti-infective and anti-inflammatory drugs, undetermined, sequela
T49.0X5S	Adverse effect of local antifungal, anti-infective and anti-inflammatory drugs, sequela
T49.0X6A	Underdosing of local antifungal, anti-infective and anti-inflammatory drugs, initial encounter
T49.0X6D	Underdosing of local antifungal, anti-infective and anti-inflammatory drugs, subsequent encounter
T49.0X6S	Underdosing of local antifungal, anti-infective and anti-inflammatory drugs, sequela
T49.1X1S	Poisoning by antipruritics, accidental (unintentional), sequela
T49.1X2S	Poisoning by antipruritics, intentional self-harm, sequela
T49.1X3S	Poisoning by antipruritics, assault, sequela
T49.1X4S	Poisoning by antipruritics, undetermined, sequela
T49.1X5S	Adverse effect of antipruritics, sequela
T49.1X6A	Underdosing of antipruritics, initial encounter
T49.1X6D	Underdosing of antipruritics, subsequent encounter
T49.1X6S	Underdosing of antipruritics, sequela
T49.2X1S	Poisoning by local astringents and local detergents, accidental (unintentional), sequela
T49.2X2S	Poisoning by local astringents and local detergents, intentional self-harm, sequela
T49.2X3S	Poisoning by local astringents and local detergents, assault, sequela
T49.2X4S	Poisoning by local astringents and local detergents, undetermined, sequela
T49.2X5S	Adverse effect of local astringents and local detergents, sequela
T49.2X6A	Underdosing of local astringents and local detergents, initial encounter
T49.2X6D	Underdosing of local astringents and local detergents, subsequent encounter
T49.2X6S	Underdosing of local astringents and local detergents, sequela
T49.3X1S	Poisoning by emollients, demulcents and protectants, accidental (unintentional), sequela
T49.3X2S	Poisoning by emollients, demulcents and protectants, intentional self-harm, sequela
T49.3X3S	Poisoning by emollients, demulcents and protectants, assault, sequela
T49.3X4S	Poisoning by emollients, demulcents and protectants, undetermined, sequela
T49.3X5S	Adverse effect of emollients, demulcents and protectants, sequela
T49.3X6A	Underdosing of emollients, demulcents and protectants, initial encounter
T49.3X6D	Underdosing of emollients, demulcents and protectants, subsequent encounter

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Code	Description
T49.3X6S	Underdosing of emollients, demulcents and protectants, sequela
T49.4X1S	Poisoning by keratolytics, keratoplastics, and other hair treatment drugs and preparations, accidental (unintentional), sequela
T49.4X2S	Poisoning by keratolytics, keratoplastics, and other hair treatment drugs and preparations, intentional self-harm, sequela
T49.4X3S	Poisoning by keratolytics, keratoplastics, and other hair treatment drugs and preparations, assault, sequela
T49.4X4S	Poisoning by keratolytics, keratoplastics, and other hair treatment drugs and preparations, undetermined, sequela
T49.4X5S	Adverse effect of keratolytics, keratoplastics, and other hair treatment drugs and preparations, sequela
T49.4X6A	Underdosing of keratolytics, keratoplastics, and other hair treatment drugs and preparations, initial encounter
T49.4X6D	Underdosing of keratolytics, keratoplastics, and other hair treatment drugs and preparations, subsequent encounter
T49.4X6S	Underdosing of keratolytics, keratoplastics, and other hair treatment drugs and preparations, sequela
T49.5X1S	Poisoning by ophthalmological drugs and preparations, accidental (unintentional), sequela
T49.5X2S	Poisoning by ophthalmological drugs and preparations, intentional self-harm, sequela
T49.5X3S	Poisoning by ophthalmological drugs and preparations, assault, sequela
T49.5X4S	Poisoning by ophthalmological drugs and preparations, undetermined, sequela
T49.5X5S	Adverse effect of ophthalmological drugs and preparations, sequela
T49.5X6A	Underdosing of ophthalmological drugs and preparations, initial encounter
T49.5X6D	Underdosing of ophthalmological drugs and preparations, subsequent encounter
T49.5X6S	Underdosing of ophthalmological drugs and preparations, sequela
T49.6X1S	Poisoning by otorhinolaryngological drugs and preparations, accidental (unintentional), sequela
T49.6X2S	Poisoning by otorhinolaryngological drugs and preparations, intentional self-harm, sequela
T49.6X3S	Poisoning by otorhinolaryngological drugs and preparations, assault, sequela
T49.6X4S	Poisoning by otorhinolaryngological drugs and preparations, undetermined, sequela
T49.6X5S	Adverse effect of otorhinolaryngological drugs and preparations, sequela
T49.6X6A	Underdosing of otorhinolaryngological drugs and preparations, initial encounter
T49.6X6D	Underdosing of otorhinolaryngological drugs and preparations, subsequent encounter

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Code	Description
T49.6X6S	Underdosing of otorhinolaryngological drugs and preparations, sequela
T49.7X1S	Poisoning by dental drugs, topically applied, accidental (unintentional), sequela
T49.7X2S	Poisoning by dental drugs, topically applied, intentional self-harm, sequela
T49.7X3S	Poisoning by dental drugs, topically applied, assault, sequela
T49.7X4S	Poisoning by dental drugs, topically applied, undetermined, sequela
T49.7X5S	Adverse effect of dental drugs, topically applied, sequela
T49.7X6A	Underdosing of dental drugs, topically applied, initial encounter
T49.7X6D	Underdosing of dental drugs, topically applied, subsequent encounter
T49.7X6S	Underdosing of dental drugs, topically applied, sequela
T49.8X1S	Poisoning by other topical agents, accidental (unintentional), sequela
T49.8X2S	Poisoning by other topical agents, intentional self-harm, sequela
T49.8X3S	Poisoning by other topical agents, assault, sequela
T49.8X4S	Poisoning by other topical agents, undetermined, sequela
T49.8X5S	Adverse effect of other topical agents, sequela
T49.8X6A	Underdosing of other topical agents, initial encounter
T49.8X6D	Underdosing of other topical agents, subsequent encounter
T49.8X6S	Underdosing of other topical agents, sequela
T49.91XS	Poisoning by unspecified topical agent, accidental (unintentional), sequela
T49.92XS	Poisoning by unspecified topical agent, intentional self-harm, sequela
T49.93XS	Poisoning by unspecified topical agent, assault, sequela
T49.94XS	Poisoning by unspecified topical agent, undetermined, sequela
T49.95XS	Adverse effect of unspecified topical agent, sequela
T49.96XA	Underdosing of unspecified topical agent, initial encounter
T49.96XD	Underdosing of unspecified topical agent, subsequent encounter
T49.96XS	Underdosing of unspecified topical agent, sequela
T50.0X1S	Poisoning by mineralocorticoids and their antagonists, accidental (unintentional), sequela
T50.0X2S	Poisoning by mineralocorticoids and their antagonists, intentional self-harm, sequela
T50.0X3S	Poisoning by mineralocorticoids and their antagonists, assault, sequela
T50.0X4S	Poisoning by mineralocorticoids and their antagonists, undetermined, sequela
T50.0X5S	Adverse effect of mineralocorticoids and their antagonists, sequela

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Code	Description
T50.0X6A	Underdosing of mineralocorticoids and their antagonists, initial encounter
T50.0X6D	Underdosing of mineralocorticoids and their antagonists, subsequent encounter
T50.0X6S	Underdosing of mineralocorticoids and their antagonists, sequela
T50.1X1S	Poisoning by loop [high-ceiling] diuretics, accidental (unintentional), sequela
T50.1X2S	Poisoning by loop [high-ceiling] diuretics, intentional self-harm, sequela
T50.1X3S	Poisoning by loop [high-ceiling] diuretics, assault, sequela
T50.1X4S	Poisoning by loop [high-ceiling] diuretics, undetermined, sequela
T50.1X5S	Adverse effect of loop [high-ceiling] diuretics, sequela
T50.1X6A	Underdosing of loop [high-ceiling] diuretics, initial encounter
T50.1X6D	Underdosing of loop [high-ceiling] diuretics, subsequent encounter
T50.1X6S	Underdosing of loop [high-ceiling] diuretics, sequela
T50.2X1S	Poisoning by carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, accidental (unintentional), sequela
T50.2X2S	Poisoning by carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, intentional self-harm, sequela
T50.2X3S	Poisoning by carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, assault, sequela
T50.2X4S	Poisoning by carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, undetermined, sequela
T50.2X5S	Adverse effect of carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, sequela
T50.2X6A	Underdosing of carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, initial encounter
T50.2X6D	Underdosing of carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, subsequent encounter
T50.2X6S	Underdosing of carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, sequela
T50.3X1S	Poisoning by electrolytic, caloric and water-balance agents, accidental (unintentional), sequela
T50.3X2S	Poisoning by electrolytic, caloric and water-balance agents, intentional self-harm, sequela
T50.3X3S	Poisoning by electrolytic, caloric and water-balance agents, assault, sequela
T50.3X4S	Poisoning by electrolytic, caloric and water-balance agents, undetermined, sequela
T50.3X5S	Adverse effect of electrolytic, caloric and water-balance agents, sequela

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Code	Description
T50.3X6A	Underdosing of electrolytic, caloric and water-balance agents, initial encounter
T50.3X6D	Underdosing of electrolytic, caloric and water-balance agents, subsequent encounter
T50.3X6S	Underdosing of electrolytic, caloric and water-balance agents, sequela
T50.4X1S	Poisoning by drugs affecting uric acid metabolism, accidental (unintentional), sequela
T50.4X2S	Poisoning by drugs affecting uric acid metabolism, intentional self-harm, sequela
T50.4X3S	Poisoning by drugs affecting uric acid metabolism, assault, sequela
T50.4X4S	Poisoning by drugs affecting uric acid metabolism, undetermined, sequela
T50.4X5S	Adverse effect of drugs affecting uric acid metabolism, sequela
T50.4X6A	Underdosing of drugs affecting uric acid metabolism, initial encounter
T50.4X6D	Underdosing of drugs affecting uric acid metabolism, subsequent encounter
T50.4X6S	Underdosing of drugs affecting uric acid metabolism, sequela
T50.5X1S	Poisoning by appetite depressants, accidental (unintentional), sequela
T50.5X2S	Poisoning by appetite depressants, intentional self-harm, sequela
T50.5X3S	Poisoning by appetite depressants, assault, sequela
T50.5X4S	Poisoning by appetite depressants, undetermined, sequela
T50.5X5S	Adverse effect of appetite depressants, sequela
T50.5X6A	Underdosing of appetite depressants, initial encounter
T50.5X6D	Underdosing of appetite depressants, subsequent encounter
T50.5X6S	Underdosing of appetite depressants, sequela
T50.6X1S	Poisoning by antidotes and chelating agents, accidental (unintentional), sequela
T50.6X2S	Poisoning by antidotes and chelating agents, intentional self-harm, sequela
T50.6X3S	Poisoning by antidotes and chelating agents, assault, sequela
T50.6X4S	Poisoning by antidotes and chelating agents, undetermined, sequela
T50.6X5S	Adverse effect of antidotes and chelating agents, sequela
T50.6X6A	Underdosing of antidotes and chelating agents, initial encounter
T50.6X6D	Underdosing of antidotes and chelating agents, subsequent encounter
T50.6X6S	Underdosing of antidotes and chelating agents, sequela
T50.7X1S	Poisoning by analeptics and opioid receptor antagonists, accidental (unintentional), sequela
T50.7X2S	Poisoning by analeptics and opioid receptor antagonists, intentional self-harm, sequela
T50.7X3S	Poisoning by analeptics and opioid receptor antagonists, assault, sequela

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Code	Description
T50.7X4S	Poisoning by analeptics and opioid receptor antagonists, undetermined, sequela
T50.7X5S	Adverse effect of analeptics and opioid receptor antagonists, sequela
T50.7X6A	Underdosing of analeptics and opioid receptor antagonists, initial encounter
T50.7X6D	Underdosing of analeptics and opioid receptor antagonists, subsequent encounter
T50.7X6S	Underdosing of analeptics and opioid receptor antagonists, sequela
T50.8X1S	Poisoning by diagnostic agents, accidental (unintentional), sequela
T50.8X2S	Poisoning by diagnostic agents, intentional self-harm, sequela
T50.8X3S	Poisoning by diagnostic agents, assault, sequela
T50.8X4S	Poisoning by diagnostic agents, undetermined, sequela
T50.8X5S	Adverse effect of diagnostic agents, sequela
T50.8X6A	Underdosing of diagnostic agents, initial encounter
T50.8X6D	Underdosing of diagnostic agents, subsequent encounter
T50.8X6S	Underdosing of diagnostic agents, sequela
T50.901S	Poisoning by unspecified drugs, medicaments and biological substances, accidental (unintentional), sequela
T50.902S	Poisoning by unspecified drugs, medicaments and biological substances, intentional self-harm, sequela
T50.903S	Poisoning by unspecified drugs, medicaments and biological substances, assault, sequela
T50.904S	Poisoning by unspecified drugs, medicaments and biological substances, undetermined, sequela
T50.905S	Adverse effect of unspecified drugs, medicaments and biological substances, sequela
T50.906A	Underdosing of unspecified drugs, medicaments and biological substances, initial encounter
T50.906D	Underdosing of unspecified drugs, medicaments and biological substances, subsequent encounter
T50.906S	Underdosing of unspecified drugs, medicaments and biological substances, sequela
T50.991S	Poisoning by other drugs, medicaments and biological substances, accidental (unintentional), sequela
T50.992S	Poisoning by other drugs, medicaments and biological substances, intentional self-harm, sequela
T50.993S	Poisoning by other drugs, medicaments and biological substances, assault, sequela
T50.994S	Poisoning by other drugs, medicaments and biological substances, undetermined, sequela
T50.995S	Adverse effect of other drugs, medicaments and biological substances, sequela

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Code	Description
T50.996A	Underdosing of other drugs, medicaments and biological substances, initial encounter
T50.996D	Underdosing of other drugs, medicaments and biological substances, subsequent encounter
T50.996S	Underdosing of other drugs, medicaments and biological substances, sequela
T50.A11S	Poisoning by pertussis vaccine, including combinations with a pertussis component, accidental (unintentional), sequela
T50.A12S	Poisoning by pertussis vaccine, including combinations with a pertussis component, intentional self-harm, sequela
T50.A13S	Poisoning by pertussis vaccine, including combinations with a pertussis component, assault, sequela
T50.A14S	Poisoning by pertussis vaccine, including combinations with a pertussis component, undetermined, sequela
T50.A15S	Adverse effect of pertussis vaccine, including combinations with a pertussis component, sequela
T50.A16A	Underdosing of pertussis vaccine, including combinations with a pertussis component, initial encounter
T50.A16D	Underdosing of pertussis vaccine, including combinations with a pertussis component, subsequent encounter
T50.A16S	Underdosing of pertussis vaccine, including combinations with a pertussis component, sequela
T50.A21S	Poisoning by mixed bacterial vaccines without a pertussis component, accidental (unintentional), sequela
T50.A22S	Poisoning by mixed bacterial vaccines without a pertussis component, intentional self-harm, sequela
T50.A23S	Poisoning by mixed bacterial vaccines without a pertussis component, assault, sequela
T50.A24S	Poisoning by mixed bacterial vaccines without a pertussis component, undetermined, sequela
T50.A25S	Adverse effect of mixed bacterial vaccines without a pertussis component, sequela
T50.A26A	Underdosing of mixed bacterial vaccines without a pertussis component, initial encounter
T50.A26D	Underdosing of mixed bacterial vaccines without a pertussis component, subsequent encounter
T50.A26S	Underdosing of mixed bacterial vaccines without a pertussis component, sequela
T50.A91S	Poisoning by other bacterial vaccines, accidental (unintentional), sequela
T50.A92S	Poisoning by other bacterial vaccines, intentional self-harm, sequela
T50.A93S	Poisoning by other bacterial vaccines, assault, sequela

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Code	Description
T50.A94S	Poisoning by other bacterial vaccines, undetermined, sequela
T50.A95S	Adverse effect of other bacterial vaccines, sequela
T50.A96A	Underdosing of other bacterial vaccines, initial encounter
T50.A96D	Underdosing of other bacterial vaccines, subsequent encounter
T50.A96S	Underdosing of other bacterial vaccines, sequela
T50.B11S	Poisoning by smallpox vaccines, accidental (unintentional), sequela
T50.B12S	Poisoning by smallpox vaccines, intentional self-harm, sequela
T50.B13S	Poisoning by smallpox vaccines, assault, sequela
T50.B14S	Poisoning by smallpox vaccines, undetermined, sequela
T50.B15S	Adverse effect of smallpox vaccines, sequela
T50.B16A	Underdosing of smallpox vaccines, initial encounter
T50.B16D	Underdosing of smallpox vaccines, subsequent encounter
T50.B16S	Underdosing of smallpox vaccines, sequela
T50.B91S	Poisoning by other viral vaccines, accidental (unintentional), sequela
T50.B92S	Poisoning by other viral vaccines, intentional self-harm, sequela
T50.B93S	Poisoning by other viral vaccines, assault, sequela
T50.B94S	Poisoning by other viral vaccines, undetermined, sequela
T50.B95S	Adverse effect of other viral vaccines, sequela
T50.B96A	Underdosing of other viral vaccines, initial encounter
T50.B96D	Underdosing of other viral vaccines, subsequent encounter
T50.B96S	Underdosing of other viral vaccines, sequela
T50.Z11S	Poisoning by immunoglobulin, accidental (unintentional), sequela
T50.Z12S	Poisoning by immunoglobulin, intentional self-harm, sequela
T50.Z13S	Poisoning by immunoglobulin, assault, sequela
T50.Z14S	Poisoning by immunoglobulin, undetermined, sequela
T50.Z15S	Adverse effect of immunoglobulin, sequela
T50.Z16A	Underdosing of immunoglobulin, initial encounter
T50.Z16D	Underdosing of immunoglobulin, subsequent encounter
T50.Z16S	Underdosing of immunoglobulin, sequela
T50.Z91S	Poisoning by other vaccines and biological substances, accidental (unintentional), sequela



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T50.Z92S	Poisoning by other vaccines and biological substances, intentional self-harm, sequela
T50.Z93S	Poisoning by other vaccines and biological substances, assault, sequela
T50.Z94S	Poisoning by other vaccines and biological substances, undetermined, sequela
T50.Z95S	Adverse effect of other vaccines and biological substances, sequela
T50.Z96A	Underdosing of other vaccines and biological substances, initial encounter
T50.Z96D	Underdosing of other vaccines and biological substances, subsequent encounter
T50.Z96S	Underdosing of other vaccines and biological substances, sequela
T51.0X1S	Toxic effect of ethanol, accidental (unintentional), sequela
T51.0X2S	Toxic effect of ethanol, intentional self-harm, sequela
T51.0X3S	Toxic effect of ethanol, assault, sequela
T51.0X4S	Toxic effect of ethanol, undetermined, sequela
T51.1X1S	Toxic effect of methanol, accidental (unintentional), sequela
T51.1X2S	Toxic effect of methanol, intentional self-harm, sequela
T51.1X3S	Toxic effect of methanol, assault, sequela
T51.1X4S	Toxic effect of methanol, undetermined, sequela
T51.2X1S	Toxic effect of 2-Propanol, accidental (unintentional), sequela
T51.2X2S	Toxic effect of 2-Propanol, intentional self-harm, sequela
T51.2X3S	Toxic effect of 2-Propanol, assault, sequela
T51.2X4S	Toxic effect of 2-Propanol, undetermined, sequela
T51.3X1S	Toxic effect of fusel oil, accidental (unintentional), sequela
T51.3X2S	Toxic effect of fusel oil, intentional self-harm, sequela
T51.3X3S	Toxic effect of fusel oil, assault, sequela
T51.3X4S	Toxic effect of fusel oil, undetermined, sequela
T51.8X1S	Toxic effect of other alcohols, accidental (unintentional), sequela
T51.8X2S	Toxic effect of other alcohols, intentional self-harm, sequela
T51.8X3S	Toxic effect of other alcohols, assault, sequela
T51.8X4S	Toxic effect of other alcohols, undetermined, sequela
T51.91XS	Toxic effect of unspecified alcohol, accidental (unintentional), sequela
T51.92XS	Toxic effect of unspecified alcohol, intentional self-harm, sequela
T51.93XS	Toxic effect of unspecified alcohol, assault, sequela



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Code	Description
T51.94XS	Toxic effect of unspecified alcohol, undetermined, sequela
T52.0X1S	Toxic effect of petroleum products, accidental (unintentional), sequela
T52.0X2S	Toxic effect of petroleum products, intentional self-harm, sequela
T52.0X3S	Toxic effect of petroleum products, assault, sequela
T52.0X4S	Toxic effect of petroleum products, undetermined, sequela
T52.1X1S	Toxic effect of benzene, accidental (unintentional), sequela
T52.1X2S	Toxic effect of benzene, intentional self-harm, sequela
T52.1X3S	Toxic effect of benzene, assault, sequela
T52.1X4S	Toxic effect of benzene, undetermined, sequela
T52.2X1S	Toxic effect of homologues of benzene, accidental (unintentional), sequela
T52.2X2S	Toxic effect of homologues of benzene, intentional self-harm, sequela
T52.2X3S	Toxic effect of homologues of benzene, assault, sequela
T52.2X4S	Toxic effect of homologues of benzene, undetermined, sequela
T52.3X1S	Toxic effect of glycols, accidental (unintentional), sequela
T52.3X2S	Toxic effect of glycols, intentional self-harm, sequela
T52.3X3S	Toxic effect of glycols, assault, sequela
T52.3X4S	Toxic effect of glycols, undetermined, sequela
T52.4X1S	Toxic effect of ketones, accidental (unintentional), sequela
T52.4X2S	Toxic effect of ketones, intentional self-harm, sequela
T52.4X3S	Toxic effect of ketones, assault, sequela
T52.4X4S	Toxic effect of ketones, undetermined, sequela
T52.8X1S	Toxic effect of other organic solvents, accidental (unintentional), sequela
T52.8X2S	Toxic effect of other organic solvents, intentional self-harm, sequela
T52.8X3S	Toxic effect of other organic solvents, assault, sequela
T52.8X4S	Toxic effect of other organic solvents, undetermined, sequela
T52.91XS	Toxic effect of unspecified organic solvent, accidental (unintentional), sequela
T52.92XS	Toxic effect of unspecified organic solvent, intentional self-harm, sequela
T52.93XS	Toxic effect of unspecified organic solvent, assault, sequela
T52.94XS	Toxic effect of unspecified organic solvent, undetermined, sequela
T53.0X1S	Toxic effect of carbon tetrachloride, accidental (unintentional), sequela

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T53.0X2S	Toxic effect of carbon tetrachloride, intentional self-harm, sequela
T53.0X3S	Toxic effect of carbon tetrachloride, assault, sequela
T53.0X4S	Toxic effect of carbon tetrachloride, undetermined, sequela
T53.1X1S	Toxic effect of chloroform, accidental (unintentional), sequela
T53.1X2S	Toxic effect of chloroform, intentional self-harm, sequela
T53.1X3S	Toxic effect of chloroform, assault, sequela
T53.1X4S	Toxic effect of chloroform, undetermined, sequela
T53.2X1S	Toxic effect of trichloroethylene, accidental (unintentional), sequela
T53.2X2S	Toxic effect of trichloroethylene, intentional self-harm, sequela
T53.2X3S	Toxic effect of trichloroethylene, assault, sequela
T53.2X4S	Toxic effect of trichloroethylene, undetermined, sequela
T53.3X1S	Toxic effect of tetrachloroethylene, accidental (unintentional), sequela
T53.3X2S	Toxic effect of tetrachloroethylene, intentional self-harm, sequela
T53.3X3S	Toxic effect of tetrachloroethylene, assault, sequela
T53.3X4S	Toxic effect of tetrachloroethylene, undetermined, sequela
T53.4X1S	Toxic effect of dichloromethane, accidental (unintentional), sequela
T53.4X2S	Toxic effect of dichloromethane, intentional self-harm, sequela
T53.4X3S	Toxic effect of dichloromethane, assault, sequela
T53.4X4S	Toxic effect of dichloromethane, undetermined, sequela
T53.5X1S	Toxic effect of chlorofluorocarbons, accidental (unintentional), sequela
T53.5X2S	Toxic effect of chlorofluorocarbons, intentional self-harm, sequela
T53.5X3S	Toxic effect of chlorofluorocarbons, assault, sequela
T53.5X4S	Toxic effect of chlorofluorocarbons, undetermined, sequela
T53.6X1S	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, accidental (unintentional), sequela
T53.6X2S	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, intentional self-harm, sequela
T53.6X3S	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, assault, sequela
T53.6X4S	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, undetermined, sequela
T53.7X1S	Toxic effect of other halogen derivatives of aromatic hydrocarbons, accidental (unintentional), sequela



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T53.7X2S	Toxic effect of other halogen derivatives of aromatic hydrocarbons, intentional self-harm, sequela
T53.7X3S	Toxic effect of other halogen derivatives of aromatic hydrocarbons, assault, sequela
T53.7X4S	Toxic effect of other halogen derivatives of aromatic hydrocarbons, undetermined, sequela
T53.91XS	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, accidental (unintentional), sequela
T53.92XS	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, intentional self-harm, sequela
T53.93XS	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, assault, sequela
T53.94XS	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, undetermined, sequela
T54.0X1S	Toxic effect of phenol and phenol homologues, accidental (unintentional), sequela
T54.0X2S	Toxic effect of phenol and phenol homologues, intentional self-harm, sequela
T54.0X3S	Toxic effect of phenol and phenol homologues, assault, sequela
T54.0X4S	Toxic effect of phenol and phenol homologues, undetermined, sequela
T54.1X1S	Toxic effect of other corrosive organic compounds, accidental (unintentional), sequela
T54.1X2S	Toxic effect of other corrosive organic compounds, intentional self-harm, sequela
T54.1X3S	Toxic effect of other corrosive organic compounds, assault, sequela
T54.1X4S	Toxic effect of other corrosive organic compounds, undetermined, sequela
T54.2X1S	Toxic effect of corrosive acids and acid-like substances, accidental (unintentional), sequela
T54.2X2S	Toxic effect of corrosive acids and acid-like substances, intentional self-harm, sequela
T54.2X3S	Toxic effect of corrosive acids and acid-like substances, assault, sequela
T54.2X4S	Toxic effect of corrosive acids and acid-like substances, undetermined, sequela
T54.3X1S	Toxic effect of corrosive alkalis and alkali-like substances, accidental (unintentional), sequela
T54.3X2S	Toxic effect of corrosive alkalis and alkali-like substances, intentional self-harm, sequela
T54.3X3S	Toxic effect of corrosive alkalis and alkali-like substances, assault, sequela
T54.3X4S	Toxic effect of corrosive alkalis and alkali-like substances, undetermined, sequela
T54.91XS	Toxic effect of unspecified corrosive substance, accidental (unintentional), sequela
T54.92XS	Toxic effect of unspecified corrosive substance, intentional self-harm, sequela
T54.93XS	Toxic effect of unspecified corrosive substance, assault, sequela



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T54.94XS	Toxic effect of unspecified corrosive substance, undetermined, sequela
T55.0X1S	Toxic effect of soaps, accidental (unintentional), sequela
T55.0X2S	Toxic effect of soaps, intentional self-harm, sequela
T55.0X3S	Toxic effect of soaps, assault, sequela
T55.0X4S	Toxic effect of soaps, undetermined, sequela
T55.1X1S	Toxic effect of detergents, accidental (unintentional), sequela
T55.1X2S	Toxic effect of detergents, intentional self-harm, sequela
T55.1X3S	Toxic effect of detergents, assault, sequela
T55.1X4S	Toxic effect of detergents, undetermined, sequela
T56.0X1S	Toxic effect of lead and its compounds, accidental (unintentional), sequela
T56.0X2S	Toxic effect of lead and its compounds, intentional self-harm, sequela
T56.0X3S	Toxic effect of lead and its compounds, assault, sequela
T56.0X4S	Toxic effect of lead and its compounds, undetermined, sequela
T56.1X1S	Toxic effect of mercury and its compounds, accidental (unintentional), sequela
T56.1X2S	Toxic effect of mercury and its compounds, intentional self-harm, sequela
T56.1X3S	Toxic effect of mercury and its compounds, assault, sequela
T56.1X4S	Toxic effect of mercury and its compounds, undetermined, sequela
T56.2X1S	Toxic effect of chromium and its compounds, accidental (unintentional), sequela
T56.2X2S	Toxic effect of chromium and its compounds, intentional self-harm, sequela
T56.2X3S	Toxic effect of chromium and its compounds, assault, sequela
T56.2X4S	Toxic effect of chromium and its compounds, undetermined, sequela
T56.3X1S	Toxic effect of cadmium and its compounds, accidental (unintentional), sequela
T56.3X2S	Toxic effect of cadmium and its compounds, intentional self-harm, sequela
T56.3X3S	Toxic effect of cadmium and its compounds, assault, sequela
T56.3X4S	Toxic effect of cadmium and its compounds, undetermined, sequela
T56.4X1S	Toxic effect of copper and its compounds, accidental (unintentional), sequela
T56.4X2S	Toxic effect of copper and its compounds, intentional self-harm, sequela
T56.4X3S	Toxic effect of copper and its compounds, assault, sequela
T56.4X4S	Toxic effect of copper and its compounds, undetermined, sequela
T56.5X1S	Toxic effect of zinc and its compounds, accidental (unintentional), sequela

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Code	Description
T56.5X2S	Toxic effect of zinc and its compounds, intentional self-harm, sequela
T56.5X3S	Toxic effect of zinc and its compounds, assault, sequela
T56.5X4S	Toxic effect of zinc and its compounds, undetermined, sequela
T56.6X1S	Toxic effect of tin and its compounds, accidental (unintentional), sequela
T56.6X2S	Toxic effect of tin and its compounds, intentional self-harm, sequela
T56.6X3S	Toxic effect of tin and its compounds, assault, sequela
T56.6X4S	Toxic effect of tin and its compounds, undetermined, sequela
T56.7X1S	Toxic effect of beryllium and its compounds, accidental (unintentional), sequela
T56.7X2S	Toxic effect of beryllium and its compounds, intentional self-harm, sequela
T56.7X3S	Toxic effect of beryllium and its compounds, assault, sequela
T56.7X4S	Toxic effect of beryllium and its compounds, undetermined, sequela
T56.811S	Toxic effect of thallium, accidental (unintentional), sequela
T56.812S	Toxic effect of thallium, intentional self-harm, sequela
T56.813S	Toxic effect of thallium, assault, sequela
T56.814S	Toxic effect of thallium, undetermined, sequela
T56.891S	Toxic effect of other metals, accidental (unintentional), sequela
T56.892S	Toxic effect of other metals, intentional self-harm, sequela
T56.893S	Toxic effect of other metals, assault, sequela
T56.894S	Toxic effect of other metals, undetermined, sequela
T56.91XS	Toxic effect of unspecified metal, accidental (unintentional), sequela
T56.92XS	Toxic effect of unspecified metal, intentional self-harm, sequela
T56.93XS	Toxic effect of unspecified metal, assault, sequela
T56.94XS	Toxic effect of unspecified metal, undetermined, sequela
T57.0X1S	Toxic effect of arsenic and its compounds, accidental (unintentional), sequela
T57.0X2S	Toxic effect of arsenic and its compounds, intentional self-harm, sequela
T57.0X3S	Toxic effect of arsenic and its compounds, assault, sequela
T57.0X4S	Toxic effect of arsenic and its compounds, undetermined, sequela
T57.1X1S	Toxic effect of phosphorus and its compounds, accidental (unintentional), sequela
T57.1X2S	Toxic effect of phosphorus and its compounds, intentional self-harm, sequela
T57.1X3S	Toxic effect of phosphorus and its compounds, assault, sequela

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Code	Description
T57.1X4S	Toxic effect of phosphorus and its compounds, undetermined, sequela
T57.2X1S	Toxic effect of manganese and its compounds, accidental (unintentional), sequela
T57.2X2S	Toxic effect of manganese and its compounds, intentional self-harm, sequela
T57.2X3S	Toxic effect of manganese and its compounds, assault, sequela
T57.2X4S	Toxic effect of manganese and its compounds, undetermined, sequela
T57.3X1S	Toxic effect of hydrogen cyanide, accidental (unintentional), sequela
T57.3X2S	Toxic effect of hydrogen cyanide, intentional self-harm, sequela
T57.3X3S	Toxic effect of hydrogen cyanide, assault, sequela
T57.3X4S	Toxic effect of hydrogen cyanide, undetermined, sequela
T57.8X1S	Toxic effect of other specified inorganic substances, accidental (unintentional), sequela
T57.8X2S	Toxic effect of other specified inorganic substances, intentional self-harm, sequela
T57.8X3S	Toxic effect of other specified inorganic substances, assault, sequela
T57.8X4S	Toxic effect of other specified inorganic substances, undetermined, sequela
T57.91XS	Toxic effect of unspecified inorganic substance, accidental (unintentional), sequela
T57.92XS	Toxic effect of unspecified inorganic substance, intentional self-harm, sequela
T57.93XS	Toxic effect of unspecified inorganic substance, assault, sequela
T57.94XS	Toxic effect of unspecified inorganic substance, undetermined, sequela
T58.01XS	Toxic effect of carbon monoxide from motor vehicle exhaust, accidental (unintentional), sequela
T58.02XS	Toxic effect of carbon monoxide from motor vehicle exhaust, intentional self-harm, sequela
T58.03XS	Toxic effect of carbon monoxide from motor vehicle exhaust, assault, sequela
T58.04XS	Toxic effect of carbon monoxide from motor vehicle exhaust, undetermined, sequela
T58.11XS	Toxic effect of carbon monoxide from utility gas, accidental (unintentional), sequela
T58.12XS	Toxic effect of carbon monoxide from utility gas, intentional self-harm, sequela
T58.13XS	Toxic effect of carbon monoxide from utility gas, assault, sequela
T58.14XS	Toxic effect of carbon monoxide from utility gas, undetermined, sequela
T58.2X1S	Toxic effect of carbon monoxide from incomplete combustion of other domestic fuels, accidental (unintentional), sequela
T58.2X2S	Toxic effect of carbon monoxide from incomplete combustion of other domestic fuels, intentional self-harm, sequela
T58.2X3S	Toxic effect of carbon monoxide from incomplete combustion of other domestic fuels, assault, sequela

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T58.2X4S	Toxic effect of carbon monoxide from incomplete combustion of other domestic fuels, undetermined, sequela
T58.8X1S	Toxic effect of carbon monoxide from other source, accidental (unintentional), sequela
T58.8X2S	Toxic effect of carbon monoxide from other source, intentional self-harm, sequela
T58.8X3S	Toxic effect of carbon monoxide from other source, assault, sequela
T58.8X4S	Toxic effect of carbon monoxide from other source, undetermined, sequela
T58.91XS	Toxic effect of carbon monoxide from unspecified source, accidental (unintentional), sequela
T58.92XS	Toxic effect of carbon monoxide from unspecified source, intentional self-harm, sequela
T58.93XS	Toxic effect of carbon monoxide from unspecified source, assault, sequela
T58.94XS	Toxic effect of carbon monoxide from unspecified source, undetermined, sequela
T59.0X1S	Toxic effect of nitrogen oxides, accidental (unintentional), sequela
T59.0X2S	Toxic effect of nitrogen oxides, intentional self-harm, sequela
T59.0X3S	Toxic effect of nitrogen oxides, assault, sequela
T59.0X4S	Toxic effect of nitrogen oxides, undetermined, sequela
T59.1X1S	Toxic effect of sulfur dioxide, accidental (unintentional), sequela
T59.1X2S	Toxic effect of sulfur dioxide, intentional self-harm, sequela
T59.1X3S	Toxic effect of sulfur dioxide, assault, sequela
T59.1X4S	Toxic effect of sulfur dioxide, undetermined, sequela
T59.2X1S	Toxic effect of formaldehyde, accidental (unintentional), sequela
T59.2X2S	Toxic effect of formaldehyde, intentional self-harm, sequela
T59.2X3S	Toxic effect of formaldehyde, assault, sequela
T59.2X4S	Toxic effect of formaldehyde, undetermined, sequela
T59.3X1S	Toxic effect of lacrimogenic gas, accidental (unintentional), sequela
T59.3X2S	Toxic effect of lacrimogenic gas, intentional self-harm, sequela
T59.3X3S	Toxic effect of lacrimogenic gas, assault, sequela
T59.3X4S	Toxic effect of lacrimogenic gas, undetermined, sequela
T59.4X1S	Toxic effect of chlorine gas, accidental (unintentional), sequela
T59.4X2S	Toxic effect of chlorine gas, intentional self-harm, sequela
T59.4X3S	Toxic effect of chlorine gas, assault, sequela
T59.4X4S	Toxic effect of chlorine gas, undetermined, sequela

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Code	Description
T59.5X1S	Toxic effect of fluorine gas and hydrogen fluoride, accidental (unintentional), sequela
T59.5X2S	Toxic effect of fluorine gas and hydrogen fluoride, intentional self-harm, sequela
T59.5X3S	Toxic effect of fluorine gas and hydrogen fluoride, assault, sequela
T59.5X4S	Toxic effect of fluorine gas and hydrogen fluoride, undetermined, sequela
T59.6X1S	Toxic effect of hydrogen sulfide, accidental (unintentional), sequela
T59.6X2S	Toxic effect of hydrogen sulfide, intentional self-harm, sequela
T59.6X3S	Toxic effect of hydrogen sulfide, assault, sequela
T59.6X4S	Toxic effect of hydrogen sulfide, undetermined, sequela
T59.7X1S	Toxic effect of carbon dioxide, accidental (unintentional), sequela
T59.7X2S	Toxic effect of carbon dioxide, intentional self-harm, sequela
T59.7X3S	Toxic effect of carbon dioxide, assault, sequela
T59.7X4S	Toxic effect of carbon dioxide, undetermined, sequela
T59.811S	Toxic effect of smoke, accidental (unintentional), sequela
T59.812S	Toxic effect of smoke, intentional self-harm, sequela
T59.813S	Toxic effect of smoke, assault, sequela
T59.814S	Toxic effect of smoke, undetermined, sequela
T59.891S	Toxic effect of other specified gases, fumes and vapors, accidental (unintentional), sequela
T59.892S	Toxic effect of other specified gases, fumes and vapors, intentional self-harm, sequela
T59.893S	Toxic effect of other specified gases, fumes and vapors, assault, sequela
T59.894S	Toxic effect of other specified gases, fumes and vapors, undetermined, sequela
T59.91XS	Toxic effect of unspecified gases, fumes and vapors, accidental (unintentional), sequela
T59.92XS	Toxic effect of unspecified gases, fumes and vapors, intentional self-harm, sequela
T59.93XS	Toxic effect of unspecified gases, fumes and vapors, assault, sequela
T59.94XS	Toxic effect of unspecified gases, fumes and vapors, undetermined, sequela
T60.0X1S	Toxic effect of organophosphate and carbamate insecticides, accidental (unintentional), sequela
T60.0X2S	Toxic effect of organophosphate and carbamate insecticides, intentional self-harm, sequela
T60.0X3S	Toxic effect of organophosphate and carbamate insecticides, assault, sequela
T60.0X4S	Toxic effect of organophosphate and carbamate insecticides, undetermined, sequela
T60.1X1S	Toxic effect of halogenated insecticides, accidental (unintentional), sequela

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Code	Description
T60.1X2S	Toxic effect of halogenated insecticides, intentional self-harm, sequela
T60.1X3S	Toxic effect of halogenated insecticides, assault, sequela
T60.1X4S	Toxic effect of halogenated insecticides, undetermined, sequela
T60.2X1S	Toxic effect of other insecticides, accidental (unintentional), sequela
T60.2X2S	Toxic effect of other insecticides, intentional self-harm, sequela
T60.2X3S	Toxic effect of other insecticides, assault, sequela
T60.2X4S	Toxic effect of other insecticides, undetermined, sequela
T60.3X1S	Toxic effect of herbicides and fungicides, accidental (unintentional), sequela
T60.3X2S	Toxic effect of herbicides and fungicides, intentional self-harm, sequela
T60.3X3S	Toxic effect of herbicides and fungicides, assault, sequela
T60.3X4S	Toxic effect of herbicides and fungicides, undetermined, sequela
T60.4X1S	Toxic effect of rodenticides, accidental (unintentional), sequela
T60.4X2S	Toxic effect of rodenticides, intentional self-harm, sequela
T60.4X3S	Toxic effect of rodenticides, assault, sequela
T60.4X4S	Toxic effect of rodenticides, undetermined, sequela
T60.8X1S	Toxic effect of other pesticides, accidental (unintentional), sequela
T60.8X2S	Toxic effect of other pesticides, intentional self-harm, sequela
T60.8X3S	Toxic effect of other pesticides, assault, sequela
T60.8X4S	Toxic effect of other pesticides, undetermined, sequela
T60.91XS	Toxic effect of unspecified pesticide, accidental (unintentional), sequela
T60.92XS	Toxic effect of unspecified pesticide, intentional self-harm, sequela
T60.93XS	Toxic effect of unspecified pesticide, assault, sequela
T60.94XS	Toxic effect of unspecified pesticide, undetermined, sequela
T61.01XS	Ciguatera fish poisoning, accidental (unintentional), sequela
T61.02XS	Ciguatera fish poisoning, intentional self-harm, sequela
T61.03XS	Ciguatera fish poisoning, assault, sequela
T61.04XS	Ciguatera fish poisoning, undetermined, sequela
T61.11XS	Scombroid fish poisoning, accidental (unintentional), sequela
T61.12XS	Scombroid fish poisoning, intentional self-harm, sequela
T61.13XS	Scombroid fish poisoning, assault, sequela

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Code	Description
T61.14XS	Scombroid fish poisoning, undetermined, sequela
T61.771S	Other fish poisoning, accidental (unintentional), sequela
T61.772S	Other fish poisoning, intentional self-harm, sequela
T61.773S	Other fish poisoning, assault, sequela
T61.774S	Other fish poisoning, undetermined, sequela
T61.781S	Other shellfish poisoning, accidental (unintentional), sequela
T61.782S	Other shellfish poisoning, intentional self-harm, sequela
T61.783S	Other shellfish poisoning, assault, sequela
T61.784S	Other shellfish poisoning, undetermined, sequela
T61.8X1S	Toxic effect of other seafood, accidental (unintentional), sequela
T61.8X2S	Toxic effect of other seafood, intentional self-harm, sequela
T61.8X3S	Toxic effect of other seafood, assault, sequela
T61.8X4S	Toxic effect of other seafood, undetermined, sequela
T61.91XS	Toxic effect of unspecified seafood, accidental (unintentional), sequela
T61.92XS	Toxic effect of unspecified seafood, intentional self-harm, sequela
T61.93XS	Toxic effect of unspecified seafood, assault, sequela
T61.94XS	Toxic effect of unspecified seafood, undetermined, sequela
T62.0X1S	Toxic effect of ingested mushrooms, accidental (unintentional), sequela
T62.0X2S	Toxic effect of ingested mushrooms, intentional self-harm, sequela
T62.0X3S	Toxic effect of ingested mushrooms, assault, sequela
T62.0X4S	Toxic effect of ingested mushrooms, undetermined, sequela
T62.1X1S	Toxic effect of ingested berries, accidental (unintentional), sequela
T62.1X2S	Toxic effect of ingested berries, intentional self-harm, sequela
T62.1X3S	Toxic effect of ingested berries, assault, sequela
T62.1X4S	Toxic effect of ingested berries, undetermined, sequela
T62.2X1S	Toxic effect of other ingested (parts of) plant(s), accidental (unintentional), sequela
T62.2X2S	Toxic effect of other ingested (parts of) plant(s), intentional self-harm, sequela
T62.2X3S	Toxic effect of other ingested (parts of) plant(s), assault, sequela
T62.2X4S	Toxic effect of other ingested (parts of) plant(s), undetermined, sequela
T62.8X1S	Toxic effect of other specified noxious substances eaten as food, accidental (unintentional), sequela

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Code	Description
T62.8X2S	Toxic effect of other specified noxious substances eaten as food, intentional self-harm, sequela
T62.8X3S	Toxic effect of other specified noxious substances eaten as food, assault, sequela
T62.8X4S	Toxic effect of other specified noxious substances eaten as food, undetermined, sequela
T62.91XS	Toxic effect of unspecified noxious substance eaten as food, accidental (unintentional), sequela
T62.92XS	Toxic effect of unspecified noxious substance eaten as food, intentional self-harm, sequela
T62.93XS	Toxic effect of unspecified noxious substance eaten as food, assault, sequela
T62.94XS	Toxic effect of unspecified noxious substance eaten as food, undetermined, sequela
T63.001S	Toxic effect of unspecified snake venom, accidental (unintentional), sequela
T63.002S	Toxic effect of unspecified snake venom, intentional self-harm, sequela
T63.003S	Toxic effect of unspecified snake venom, assault, sequela
T63.004S	Toxic effect of unspecified snake venom, undetermined, sequela
T63.011S	Toxic effect of rattlesnake venom, accidental (unintentional), sequela
T63.012S	Toxic effect of rattlesnake venom, intentional self-harm, sequela
T63.013S	Toxic effect of rattlesnake venom, assault, sequela
T63.014S	Toxic effect of rattlesnake venom, undetermined, sequela
T63.021S	Toxic effect of coral snake venom, accidental (unintentional), sequela
T63.022S	Toxic effect of coral snake venom, intentional self-harm, sequela
T63.023S	Toxic effect of coral snake venom, assault, sequela
T63.024S	Toxic effect of coral snake venom, undetermined, sequela
T63.031S	Toxic effect of taipan venom, accidental (unintentional), sequela
T63.032S	Toxic effect of taipan venom, intentional self-harm, sequela
T63.033S	Toxic effect of taipan venom, assault, sequela
T63.034S	Toxic effect of taipan venom, undetermined, sequela
T63.041S	Toxic effect of cobra venom, accidental (unintentional), sequela
T63.042S	Toxic effect of cobra venom, intentional self-harm, sequela
T63.043S	Toxic effect of cobra venom, assault, sequela
T63.044S	Toxic effect of cobra venom, undetermined, sequela
T63.061S	Toxic effect of venom of other North and South American snake, accidental (unintentional), sequela



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Code	Description
T63.062S	Toxic effect of venom of other North and South American snake, intentional self-harm, sequela
T63.063S	Toxic effect of venom of other North and South American snake, assault, sequela
T63.064S	Toxic effect of venom of other North and South American snake, undetermined, sequela
T63.071S	Toxic effect of venom of other Australian snake, accidental (unintentional), sequela
T63.072S	Toxic effect of venom of other Australian snake, intentional self-harm, sequela
T63.073S	Toxic effect of venom of other Australian snake, assault, sequela
T63.074S	Toxic effect of venom of other Australian snake, undetermined, sequela
T63.081S	Toxic effect of venom of other African and Asian snake, accidental (unintentional), sequela
T63.082S	Toxic effect of venom of other African and Asian snake, intentional self-harm, sequela
T63.083S	Toxic effect of venom of other African and Asian snake, assault, sequela
T63.084S	Toxic effect of venom of other African and Asian snake, undetermined, sequela
T63.091S	Toxic effect of venom of other snake, accidental (unintentional), sequela
T63.092S	Toxic effect of venom of other snake, intentional self-harm, sequela
T63.093S	Toxic effect of venom of other snake, assault, sequela
T63.094S	Toxic effect of venom of other snake, undetermined, sequela
T63.111S	Toxic effect of venom of gila monster, accidental (unintentional), sequela
T63.112S	Toxic effect of venom of gila monster, intentional self-harm, sequela
T63.113S	Toxic effect of venom of gila monster, assault, sequela
T63.114S	Toxic effect of venom of gila monster, undetermined, sequela
T63.121S	Toxic effect of venom of other venomous lizard, accidental (unintentional), sequela
T63.122S	Toxic effect of venom of other venomous lizard, intentional self-harm, sequela
T63.123S	Toxic effect of venom of other venomous lizard, assault, sequela
T63.124S	Toxic effect of venom of other venomous lizard, undetermined, sequela
T63.191S	Toxic effect of venom of other reptiles, accidental (unintentional), sequela
T63.192S	Toxic effect of venom of other reptiles, intentional self-harm, sequela
T63.193S	Toxic effect of venom of other reptiles, assault, sequela
T63.194S	Toxic effect of venom of other reptiles, undetermined, sequela
T63.2X1S	Toxic effect of venom of scorpion, accidental (unintentional), sequela
T63.2X2S	Toxic effect of venom of scorpion, intentional self-harm, sequela
T63.2X3S	Toxic effect of venom of scorpion, assault, sequela

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Code	Description
T63.2X4S	Toxic effect of venom of scorpion, undetermined, sequela
T63.301S	Toxic effect of unspecified spider venom, accidental (unintentional), sequela
T63.302S	Toxic effect of unspecified spider venom, intentional self-harm, sequela
T63.303S	Toxic effect of unspecified spider venom, assault, sequela
T63.304S	Toxic effect of unspecified spider venom, undetermined, sequela
T63.311S	Toxic effect of venom of black widow spider, accidental (unintentional), sequela
T63.312S	Toxic effect of venom of black widow spider, intentional self-harm, sequela
T63.313S	Toxic effect of venom of black widow spider, assault, sequela
T63.314S	Toxic effect of venom of black widow spider, undetermined, sequela
T63.321S	Toxic effect of venom of tarantula, accidental (unintentional), sequela
T63.322S	Toxic effect of venom of tarantula, intentional self-harm, sequela
T63.323S	Toxic effect of venom of tarantula, assault, sequela
T63.324S	Toxic effect of venom of tarantula, undetermined, sequela
T63.331S	Toxic effect of venom of brown recluse spider, accidental (unintentional), sequela
T63.332S	Toxic effect of venom of brown recluse spider, intentional self-harm, sequela
T63.333S	Toxic effect of venom of brown recluse spider, assault, sequela
T63.334S	Toxic effect of venom of brown recluse spider, undetermined, sequela
T63.391S	Toxic effect of venom of other spider, accidental (unintentional), sequela
T63.392S	Toxic effect of venom of other spider, intentional self-harm, sequela
T63.393S	Toxic effect of venom of other spider, assault, sequela
T63.394S	Toxic effect of venom of other spider, undetermined, sequela
T63.411S	Toxic effect of venom of centipedes and venomous millipedes, accidental (unintentional), sequela
T63.412S	Toxic effect of venom of centipedes and venomous millipedes, intentional self-harm, sequela
T63.413S	Toxic effect of venom of centipedes and venomous millipedes, assault, sequela
T63.414S	Toxic effect of venom of centipedes and venomous millipedes, undetermined, sequela
T63.421S	Toxic effect of venom of ants, accidental (unintentional), sequela
T63.422S	Toxic effect of venom of ants, intentional self-harm, sequela
T63.423S	Toxic effect of venom of ants, assault, sequela
T63.424S	Toxic effect of venom of ants, undetermined, sequela

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Code	Description
T63.431S	Toxic effect of venom of caterpillars, accidental (unintentional), sequela
T63.432S	Toxic effect of venom of caterpillars, intentional self-harm, sequela
T63.433S	Toxic effect of venom of caterpillars, assault, sequela
T63.434S	Toxic effect of venom of caterpillars, undetermined, sequela
T63.441S	Toxic effect of venom of bees, accidental (unintentional), sequela
T63.442S	Toxic effect of venom of bees, intentional self-harm, sequela
T63.443S	Toxic effect of venom of bees, assault, sequela
T63.444S	Toxic effect of venom of bees, undetermined, sequela
T63.451S	Toxic effect of venom of hornets, accidental (unintentional), sequela
T63.452S	Toxic effect of venom of hornets, intentional self-harm, sequela
T63.453S	Toxic effect of venom of hornets, assault, sequela
T63.454S	Toxic effect of venom of hornets, undetermined, sequela
T63.461S	Toxic effect of venom of wasps, accidental (unintentional), sequela
T63.462S	Toxic effect of venom of wasps, intentional self-harm, sequela
T63.463S	Toxic effect of venom of wasps, assault, sequela
T63.464S	Toxic effect of venom of wasps, undetermined, sequela
T63.481S	Toxic effect of venom of other arthropod, accidental (unintentional), sequela
T63.482S	Toxic effect of venom of other arthropod, intentional self-harm, sequela
T63.483S	Toxic effect of venom of other arthropod, assault, sequela
T63.484S	Toxic effect of venom of other arthropod, undetermined, sequela
T63.511S	Toxic effect of contact with stingray, accidental (unintentional), sequela
T63.512S	Toxic effect of contact with stingray, intentional self-harm, sequela
T63.513S	Toxic effect of contact with stingray, assault, sequela
T63.514S	Toxic effect of contact with stingray, undetermined, sequela
T63.591S	Toxic effect of contact with other venomous fish, accidental (unintentional), sequela
T63.592S	Toxic effect of contact with other venomous fish, intentional self-harm, sequela
T63.593S	Toxic effect of contact with other venomous fish, assault, sequela
T63.594S	Toxic effect of contact with other venomous fish, undetermined, sequela
T63.611S	Toxic effect of contact with Portugese Man-o-war, accidental (unintentional), sequela
T63.612S	Toxic effect of contact with Portugese Man-o-war, intentional self-harm, sequela



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Code	Description
T63.613S	Toxic effect of contact with Portugese Man-o-war, assault, sequela
T63.614S	Toxic effect of contact with Portugese Man-o-war, undetermined, sequela
T63.621S	Toxic effect of contact with other jellyfish, accidental (unintentional), sequela
T63.622S	Toxic effect of contact with other jellyfish, intentional self-harm, sequela
T63.623S	Toxic effect of contact with other jellyfish, assault, sequela
T63.624S	Toxic effect of contact with other jellyfish, undetermined, sequela
T63.631S	Toxic effect of contact with sea anemone, accidental (unintentional), sequela
T63.632S	Toxic effect of contact with sea anemone, intentional self-harm, sequela
T63.633S	Toxic effect of contact with sea anemone, assault, sequela
T63.634S	Toxic effect of contact with sea anemone, undetermined, sequela
T63.691S	Toxic effect of contact with other venomous marine animals, accidental (unintentional), sequela
T63.692S	Toxic effect of contact with other venomous marine animals, intentional self-harm, sequela
T63.693S	Toxic effect of contact with other venomous marine animals, assault, sequela
T63.694S	Toxic effect of contact with other venomous marine animals, undetermined, sequela
T63.711S	Toxic effect of contact with venomous marine plant, accidental (unintentional), sequela
T63.712S	Toxic effect of contact with venomous marine plant, intentional self-harm, sequela
T63.713S	Toxic effect of contact with venomous marine plant, assault, sequela
T63.714S	Toxic effect of contact with venomous marine plant, undetermined, sequela
T63.791S	Toxic effect of contact with other venomous plant, accidental (unintentional), sequela
T63.792S	Toxic effect of contact with other venomous plant, intentional self-harm, sequela
T63.793S	Toxic effect of contact with other venomous plant, assault, sequela
T63.794S	Toxic effect of contact with other venomous plant, undetermined, sequela
T63.811S	Toxic effect of contact with venomous frog, accidental (unintentional), sequela
T63.812S	Toxic effect of contact with venomous frog, intentional self-harm, sequela
T63.813S	Toxic effect of contact with venomous frog, assault, sequela
T63.814S	Toxic effect of contact with venomous frog, undetermined, sequela
T63.821S	Toxic effect of contact with venomous toad, accidental (unintentional), sequela
T63.822S	Toxic effect of contact with venomous toad, intentional self-harm, sequela
T63.823S	Toxic effect of contact with venomous toad, assault, sequela
T63.824S	Toxic effect of contact with venomous toad, undetermined, sequela

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Code	Description
T63.831S	Toxic effect of contact with other venomous amphibian, accidental (unintentional), sequela
T63.832S	Toxic effect of contact with other venomous amphibian, intentional self-harm, sequela
T63.833S	Toxic effect of contact with other venomous amphibian, assault, sequela
T63.834S	Toxic effect of contact with other venomous amphibian, undetermined, sequela
T63.891S	Toxic effect of contact with other venomous animals, accidental (unintentional), sequela
T63.892S	Toxic effect of contact with other venomous animals, intentional self-harm, sequela
T63.893S	Toxic effect of contact with other venomous animals, assault, sequela
T63.894S	Toxic effect of contact with other venomous animals, undetermined, sequela
T63.91XS	Toxic effect of contact with unspecified venomous animal, accidental (unintentional), sequela
T63.92XS	Toxic effect of contact with unspecified venomous animal, intentional self-harm, sequela
T63.93XS	Toxic effect of contact with unspecified venomous animal, assault, sequela
T63.94XS	Toxic effect of contact with unspecified venomous animal, undetermined, sequela
T64.01XS	Toxic effect of aflatoxin, accidental (unintentional), sequela
T64.02XS	Toxic effect of aflatoxin, intentional self-harm, sequela
T64.03XS	Toxic effect of aflatoxin, assault, sequela
T64.04XS	Toxic effect of aflatoxin, undetermined, sequela
T64.81XS	Toxic effect of other mycotoxin food contaminants, accidental (unintentional), sequela
T64.82XS	Toxic effect of other mycotoxin food contaminants, intentional self-harm, sequela
T64.83XS	Toxic effect of other mycotoxin food contaminants, assault, sequela
T64.84XS	Toxic effect of other mycotoxin food contaminants, undetermined, sequela
T65.0X1S	Toxic effect of cyanides, accidental (unintentional), sequela
T65.0X2S	Toxic effect of cyanides, intentional self-harm, sequela
T65.0X3S	Toxic effect of cyanides, assault, sequela
T65.0X4S	Toxic effect of cyanides, undetermined, sequela
T65.1X1S	Toxic effect of strychnine and its salts, accidental (unintentional), sequela
T65.1X2S	Toxic effect of strychnine and its salts, intentional self-harm, sequela
T65.1X3S	Toxic effect of strychnine and its salts, assault, sequela
T65.1X4S	Toxic effect of strychnine and its salts, undetermined, sequela
T65.211S	Toxic effect of chewing tobacco, accidental (unintentional), sequela
T65.212S	Toxic effect of chewing tobacco, intentional self-harm, sequela

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Code	Description
T65.213S	Toxic effect of chewing tobacco, assault, sequela
T65.214S	Toxic effect of chewing tobacco, undetermined, sequela
T65.221S	Toxic effect of tobacco cigarettes, accidental (unintentional), sequela
T65.222S	Toxic effect of tobacco cigarettes, intentional self-harm, sequela
T65.223S	Toxic effect of tobacco cigarettes, assault, sequela
T65.224S	Toxic effect of tobacco cigarettes, undetermined, sequela
T65.291S	Toxic effect of other tobacco and nicotine, accidental (unintentional), sequela
T65.292S	Toxic effect of other tobacco and nicotine, intentional self-harm, sequela
T65.293S	Toxic effect of other tobacco and nicotine, assault, sequela
T65.294S	Toxic effect of other tobacco and nicotine, undetermined, sequela
T65.3X1S	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, accidental (unintentional), sequela
T65.3X2S	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, intentional self-harm, sequela
T65.3X3S	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, assault, sequela
T65.3X4S	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, undetermined, sequela
T65.4X1S	Toxic effect of carbon disulfide, accidental (unintentional), sequela
T65.4X2S	Toxic effect of carbon disulfide, intentional self-harm, sequela
T65.4X3S	Toxic effect of carbon disulfide, assault, sequela
T65.4X4S	Toxic effect of carbon disulfide, undetermined, sequela
T65.5X1S	Toxic effect of nitroglycerin and other nitric acids and esters, accidental (unintentional), sequela
T65.5X2S	Toxic effect of nitroglycerin and other nitric acids and esters, intentional self-harm, sequela
T65.5X3S	Toxic effect of nitroglycerin and other nitric acids and esters, assault, sequela
T65.5X4S	Toxic effect of nitroglycerin and other nitric acids and esters, undetermined, sequela
T65.6X1S	Toxic effect of paints and dyes, not elsewhere classified, accidental (unintentional), sequela
T65.6X2S	Toxic effect of paints and dyes, not elsewhere classified, intentional self-harm, sequela
T65.6X3S	Toxic effect of paints and dyes, not elsewhere classified, assault, sequela
T65.6X4S	Toxic effect of paints and dyes, not elsewhere classified, undetermined, sequela



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T65.811S	Toxic effect of latex, accidental (unintentional), sequela
T65.812S	Toxic effect of latex, intentional self-harm, sequela
T65.813S	Toxic effect of latex, assault, sequela
T65.814S	Toxic effect of latex, undetermined, sequela
T65.821S	Toxic effect of harmful algae and algae toxins, accidental (unintentional), sequela
T65.822S	Toxic effect of harmful algae and algae toxins, intentional self-harm, sequela
T65.823S	Toxic effect of harmful algae and algae toxins, assault, sequela
T65.824S	Toxic effect of harmful algae and algae toxins, undetermined, sequela
T65.831S	Toxic effect of fiberglass, accidental (unintentional), sequela
T65.832S	Toxic effect of fiberglass, intentional self-harm, sequela
T65.833S	Toxic effect of fiberglass, assault, sequela
T65.834S	Toxic effect of fiberglass, undetermined, sequela
T65.891S	Toxic effect of other specified substances, accidental (unintentional), sequela
T65.892S	Toxic effect of other specified substances, intentional self-harm, sequela
T65.893S	Toxic effect of other specified substances, assault, sequela
T65.894S	Toxic effect of other specified substances, undetermined, sequela
T65.91XS	Toxic effect of unspecified substance, accidental (unintentional), sequela
T65.92XS	Toxic effect of unspecified substance, intentional self-harm, sequela
T65.93XS	Toxic effect of unspecified substance, assault, sequela
T65.94XS	Toxic effect of unspecified substance, undetermined, sequela
T66.XXXS	Radiation sickness, unspecified, sequela
T67.0XXS	Heatstroke and sunstroke, sequela
T67.1XXS	Heat syncope, sequela
T67.2XXS	Heat cramp, sequela
T67.3XXS	Heat exhaustion, anhydrotic, sequela
T67.4XXS	Heat exhaustion due to salt depletion, sequela
T67.5XXS	Heat exhaustion, unspecified, sequela
T67.6XXS	Heat fatigue, transient, sequela
T67.7XXS	Heat edema, sequela
T67.8XXS	Other effects of heat and light, sequela

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Code	Description
T67.9XXS	Effect of heat and light, unspecified, sequela
T68.XXXS	Hypothermia, sequela
T69.011S	Immersion hand, right hand, sequela
T69.012S	Immersion hand, left hand, sequela
T69.019S	Immersion hand, unspecified hand, sequela
T69.021S	Immersion foot, right foot, sequela
T69.022S	Immersion foot, left foot, sequela
T69.029S	Immersion foot, unspecified foot, sequela
T69.1XXS	Chilblains, sequela
T69.8XXS	Other specified effects of reduced temperature, sequela
T69.9XXS	Effect of reduced temperature, unspecified, sequela
T70.0XXS	Otitic barotrauma, sequela
T70.1XXS	Sinus barotrauma, sequela
T70.20XS	Unspecified effects of high altitude, sequela
T70.29XS	Other effects of high altitude, sequela
T70.3XXS	Caisson disease [decompression sickness], sequela
T70.4XXS	Effects of high-pressure fluids, sequela
T70.8XXS	Other effects of air pressure and water pressure, sequela
T70.9XXS	Effect of air pressure and water pressure, unspecified, sequela
T71.111S	Asphyxiation due to smothering under pillow, accidental, sequela
T71.112S	Asphyxiation due to smothering under pillow, intentional self-harm, sequela
T71.113S	Asphyxiation due to smothering under pillow, assault, sequela
T71.114S	Asphyxiation due to smothering under pillow, undetermined, sequela
T71.121S	Asphyxiation due to plastic bag, accidental, sequela
T71.122S	Asphyxiation due to plastic bag, intentional self-harm, sequela
T71.123S	Asphyxiation due to plastic bag, assault, sequela
T71.124S	Asphyxiation due to plastic bag, undetermined, sequela
T71.131S	Asphyxiation due to being trapped in bed linens, accidental, sequela
T71.132S	Asphyxiation due to being trapped in bed linens, intentional self-harm, sequela
T71.133S	Asphyxiation due to being trapped in bed linens, assault, sequela

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Code	Description
T71.134S	Asphyxiation due to being trapped in bed linens, undetermined, sequela
T71.141S	Asphyxiation due to smothering under another person's body (in bed), accidental, sequela
T71.143S	Asphyxiation due to smothering under another person's body (in bed), assault, sequela
T71.144S	Asphyxiation due to smothering under another person's body (in bed), undetermined, sequela
T71.151S	Asphyxiation due to smothering in furniture, accidental, sequela
T71.152S	Asphyxiation due to smothering in furniture, intentional self-harm, sequela
T71.153S	Asphyxiation due to smothering in furniture, assault, sequela
T71.154S	Asphyxiation due to smothering in furniture, undetermined, sequela
T71.161S	Asphyxiation due to hanging, accidental, sequela
T71.162S	Asphyxiation due to hanging, intentional self-harm, sequela
T71.163S	Asphyxiation due to hanging, assault, sequela
T71.164S	Asphyxiation due to hanging, undetermined, sequela
T71.191S	Asphyxiation due to mechanical threat to breathing due to other causes, accidental, sequela
T71.192S	Asphyxiation due to mechanical threat to breathing due to other causes, intentional self-harm, sequela
T71.193S	Asphyxiation due to mechanical threat to breathing due to other causes, assault, sequela
T71.194S	Asphyxiation due to mechanical threat to breathing due to other causes, undetermined, sequela
T71.20XS	Asphyxiation due to systemic oxygen deficiency due to low oxygen content in ambient air due to unspecified cause, sequela
T71.21XS	Asphyxiation due to cave-in or falling earth, sequela
T71.221S	Asphyxiation due to being trapped in a car trunk, accidental, sequela
T71.222S	Asphyxiation due to being trapped in a car trunk, intentional self-harm, sequela
T71.223S	Asphyxiation due to being trapped in a car trunk, assault, sequela
T71.224S	Asphyxiation due to being trapped in a car trunk, undetermined, sequela
T71.231S	Asphyxiation due to being trapped in a (discarded) refrigerator, accidental, sequela
T71.232S	Asphyxiation due to being trapped in a (discarded) refrigerator, intentional self-harm, sequela
T71.233S	Asphyxiation due to being trapped in a (discarded) refrigerator, assault, sequela
T71.234S	Asphyxiation due to being trapped in a (discarded) refrigerator, undetermined, sequela



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Code	Description
T71.29XS	Asphyxiation due to being trapped in other low oxygen environment, sequela
T71.9XXS	Asphyxiation due to unspecified cause, sequela
T73.0XXS	Starvation, sequela
T73.1XXS	Deprivation of water, sequela
T73.2XXS	Exhaustion due to exposure, sequela
T73.3XXS	Exhaustion due to excessive exertion, sequela
T73.8XXS	Other effects of deprivation, sequela
T73.9XXS	Effect of deprivation, unspecified, sequela
T74.01XS	Adult neglect or abandonment, confirmed, sequela
T74.02XS	Child neglect or abandonment, confirmed, sequela
T74.11XS	Adult physical abuse, confirmed, sequela
T74.12XS	Child physical abuse, confirmed, sequela
T74.21XS	Adult sexual abuse, confirmed, sequela
T74.22XS	Child sexual abuse, confirmed, sequela
T74.31XS	Adult psychological abuse, confirmed, sequela
T74.32XS	Child psychological abuse, confirmed, sequela
T74.4XXS	Shaken infant syndrome, sequela
T74.91XS	Unspecified adult maltreatment, confirmed, sequela
T74.92XS	Unspecified child maltreatment, confirmed, sequela
T75.00XS	Unspecified effects of lightning, sequela
T75.01XS	Shock due to being struck by lightning, sequela
T75.09XS	Other effects of lightning, sequela
T75.1XXS	Unspecified effects of drowning and nonfatal submersion, sequela
T75.20XS	Unspecified effects of vibration, sequela
T75.21XS	Pneumatic hammer syndrome, sequela
T75.22XS	Traumatic vasospastic syndrome, sequela
T75.23XS	Vertigo from infrasound, sequela
T75.29XS	Other effects of vibration, sequela
T75.3XXS	Motion sickness, sequela
T75.4XXS	Electrocution, sequela



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Code	Description
T75.81XS	Effects of abnormal gravitation [G] forces, sequela
T75.82XS	Effects of weightlessness, sequela
T75.89XS	Other specified effects of external causes, sequela
T76.01XS	Adult neglect or abandonment, suspected, sequela
T76.02XS	Child neglect or abandonment, suspected, sequela
T76.11XS	Adult physical abuse, suspected, sequela
T76.12XS	Child physical abuse, suspected, sequela
T76.21XS	Adult sexual abuse, suspected, sequela
T76.22XS	Child sexual abuse, suspected, sequela
T76.31XS	Adult psychological abuse, suspected, sequela
T76.32XS	Child psychological abuse, suspected, sequela
T76.91XS	Unspecified adult maltreatment, suspected, sequela
T76.92XS	Unspecified child maltreatment, suspected, sequela
T78.00XS	Anaphylactic reaction due to unspecified food, sequela
T78.01XS	Anaphylactic reaction due to peanuts, sequela
T78.02XS	Anaphylactic reaction due to shellfish (crustaceans), sequela
T78.03XS	Anaphylactic reaction due to other fish, sequela
T78.04XS	Anaphylactic reaction due to fruits and vegetables, sequela
T78.05XS	Anaphylactic reaction due to tree nuts and seeds, sequela
T78.06XS	Anaphylactic reaction due to food additives, sequela
T78.07XS	Anaphylactic reaction due to milk and dairy products, sequela
T78.08XS	Anaphylactic reaction due to eggs, sequela
T78.09XS	Anaphylactic reaction due to other food products, sequela
T78.1XXS	Other adverse food reactions, not elsewhere classified, sequela
T78.2XXS	Anaphylactic shock, unspecified, sequela
T78.3XXS	Angioneurotic edema, sequela
T78.40XS	Allergy, unspecified, sequela
T78.41XS	Arthus phenomenon, sequela
T78.49XS	Other allergy, sequela
T78.8XXS	Other adverse effects, not elsewhere classified, sequela

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Code	Description
T79.0XXS	Air embolism (traumatic), sequela
T79.1XXS	Fat embolism (traumatic), sequela
T79.2XXS	Traumatic secondary and recurrent hemorrhage and seroma, sequela
T79.4XXS	Traumatic shock, sequela
T79.5XXS	Traumatic anuria, sequela
T79.6XXS	Traumatic ischemia of muscle, sequela
T79.7XXS	Traumatic subcutaneous emphysema, sequela
T79.8XXS	Other early complications of trauma, sequela
T79.9XXS	Unspecified early complication of trauma, sequela
T79.A0XS	Compartment syndrome, unspecified, sequela
T79.A11S	Traumatic compartment syndrome of right upper extremity, sequela
T79.A12S	Traumatic compartment syndrome of left upper extremity, sequela
T79.A19S	Traumatic compartment syndrome of unspecified upper extremity, sequela
T79.A21S	Traumatic compartment syndrome of right lower extremity, sequela
T79.A22S	Traumatic compartment syndrome of left lower extremity, sequela
T79.A29S	Traumatic compartment syndrome of unspecified lower extremity, sequela
T79.A3XS	Traumatic compartment syndrome of abdomen, sequela
T79.A9XS	Traumatic compartment syndrome of other sites, sequela
T80.0XXS	Air embolism following infusion, transfusion and therapeutic injection, sequela
T80.1XXS	Vascular complications following infusion, transfusion and therapeutic injection, sequela
T80.211S	Bloodstream infection due to central venous catheter, sequela
T80.212S	Local infection due to central venous catheter, sequela
T80.218S	Other infection due to central venous catheter, sequela
T80.219S	Unspecified infection due to central venous catheter, sequela
T80.22XS	Acute infection following transfusion, infusion, or injection of blood and blood products, sequela
T80.29XS	Infection following other infusion, transfusion and therapeutic injection, sequela
T80.30XS	ABO incompatibility reaction due to transfusion of blood or blood products, unspecified, sequela
T80.310S	ABO incompatibility with acute hemolytic transfusion reaction, sequela
T80.311S	ABO incompatibility with delayed hemolytic transfusion reaction, sequela

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Code	Description
T80.319S	ABO incompatibility with hemolytic transfusion reaction, unspecified, sequela
T80.39XS	Other ABO incompatibility reaction due to transfusion of blood or blood products, sequela
T80.40XS	Rh incompatibility reaction due to transfusion of blood or blood products, unspecified, sequela
T80.410S	Rh incompatibility with acute hemolytic transfusion reaction, sequela
T80.411S	Rh incompatibility with delayed hemolytic transfusion reaction, sequela
T80.419S	Rh incompatibility with hemolytic transfusion reaction, unspecified, sequela
T80.49XS	Other Rh incompatibility reaction due to transfusion of blood or blood products, sequela
T80.51XS	Anaphylactic reaction due to administration of blood and blood products, sequela
T80.52XS	Anaphylactic reaction due to vaccination, sequela
T80.59XS	Anaphylactic reaction due to other serum, sequela
T80.61XS	Other serum reaction due to administration of blood and blood products, sequela
T80.62XS	Other serum reaction due to vaccination, sequela
T80.69XS	Other serum reaction due to other serum, sequela
T80.810S	Extravasation of vesicant antineoplastic chemotherapy, sequela
T80.818S	Extravasation of other vesicant agent, sequela
T80.89XS	Other complications following infusion, transfusion and therapeutic injection, sequela
T80.90XS	Unspecified complication following infusion and therapeutic injection, sequela
T80.910S	Acute hemolytic transfusion reaction, unspecified incompatibility, sequela
T80.911S	Delayed hemolytic transfusion reaction, unspecified incompatibility, sequela
T80.919S	Hemolytic transfusion reaction, unspecified incompatibility, unspecified as acute or delayed, sequela
T80.92XS	Unspecified transfusion reaction, sequela
T80.A0XS	Non-ABO incompatibility reaction due to transfusion of blood or blood products, unspecified, sequela
T80.A10S	Non-ABO incompatibility with acute hemolytic transfusion reaction, sequela
T80.A11S	Non-ABO incompatibility with delayed hemolytic transfusion reaction, sequela
T80.A19S	Non-ABO incompatibility with hemolytic transfusion reaction, unspecified, sequela
T80.A9XS	Other non-ABO incompatibility reaction due to transfusion of blood or blood products, sequela
T81.10XS	Postprocedural shock unspecified, sequela
T81.11XS	Postprocedural cardiogenic shock, sequela

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Code	Description
T81.12XS	Postprocedural septic shock, sequela
T81.19XS	Other postprocedural shock, sequela
T81.30XS	Disruption of wound, unspecified, sequela
T81.31XS	Disruption of external operation (surgical) wound, not elsewhere classified, sequela
T81.32XS	Disruption of internal operation (surgical) wound, not elsewhere classified, sequela
T81.33XS	Disruption of traumatic injury wound repair, sequela
T81.4XXS	Infection following a procedure, sequela
T81.500S	Unspecified complication of foreign body accidentally left in body following surgical operation, sequela
T81.501S	Unspecified complication of foreign body accidentally left in body following infusion or transfusion, sequela
T81.502S	Unspecified complication of foreign body accidentally left in body following kidney dialysis, sequela
T81.503S	Unspecified complication of foreign body accidentally left in body following injection or immunization, sequela
T81.504S	Unspecified complication of foreign body accidentally left in body following endoscopic examination, sequela
T81.505S	Unspecified complication of foreign body accidentally left in body following heart catheterization, sequela
T81.506S	Unspecified complication of foreign body accidentally left in body following aspiration, puncture or other catheterization, sequela
T81.507S	Unspecified complication of foreign body accidentally left in body following removal of catheter or packing, sequela
T81.508S	Unspecified complication of foreign body accidentally left in body following other procedure, sequela
T81.509S	Unspecified complication of foreign body accidentally left in body following unspecified procedure, sequela
T81.510S	Adhesions due to foreign body accidentally left in body following surgical operation, sequela
T81.511S	Adhesions due to foreign body accidentally left in body following infusion or transfusion, sequela
T81.512S	Adhesions due to foreign body accidentally left in body following kidney dialysis, sequela
T81.513S	Adhesions due to foreign body accidentally left in body following injection or immunization, sequela



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Code	Description
T81.514S	Adhesions due to foreign body accidentally left in body following endoscopic examination, sequela
T81.515S	Adhesions due to foreign body accidentally left in body following heart catheterization, sequela
T81.516S	Adhesions due to foreign body accidentally left in body following aspiration, puncture or other catheterization, sequela
T81.517S	Adhesions due to foreign body accidentally left in body following removal of catheter or packing, sequela
T81.518S	Adhesions due to foreign body accidentally left in body following other procedure, sequela
T81.519S	Adhesions due to foreign body accidentally left in body following unspecified procedure, sequela
T81.520S	Obstruction due to foreign body accidentally left in body following surgical operation, sequela
T81.521S	Obstruction due to foreign body accidentally left in body following infusion or transfusion, sequela
T81.522S	Obstruction due to foreign body accidentally left in body following kidney dialysis, sequela
T81.523S	Obstruction due to foreign body accidentally left in body following injection or immunization, sequela
T81.524S	Obstruction due to foreign body accidentally left in body following endoscopic examination, sequela
T81.525S	Obstruction due to foreign body accidentally left in body following heart catheterization, sequela
T81.526S	Obstruction due to foreign body accidentally left in body following aspiration, puncture or other catheterization, sequela
T81.527S	Obstruction due to foreign body accidentally left in body following removal of catheter or packing, sequela
T81.528S	Obstruction due to foreign body accidentally left in body following other procedure, sequela
T81.529S	Obstruction due to foreign body accidentally left in body following unspecified procedure, sequela
T81.530S	Perforation due to foreign body accidentally left in body following surgical operation, sequela
T81.531S	Perforation due to foreign body accidentally left in body following infusion or transfusion, sequela
T81.532S	Perforation due to foreign body accidentally left in body following kidney dialysis, sequela
T81.533S	Perforation due to foreign body accidentally left in body following injection or immunization, sequela

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Code	Description
T81.534S	Perforation due to foreign body accidentally left in body following endoscopic examination, sequela
T81.535S	Perforation due to foreign body accidentally left in body following heart catheterization, sequela
T81.536S	Perforation due to foreign body accidentally left in body following aspiration, puncture or other catheterization, sequela
T81.537S	Perforation due to foreign body accidentally left in body following removal of catheter or packing, sequela
T81.538S	Perforation due to foreign body accidentally left in body following other procedure, sequela
T81.539S	Perforation due to foreign body accidentally left in body following unspecified procedure, sequela
T81.590S	Other complications of foreign body accidentally left in body following surgical operation, sequela
T81.591S	Other complications of foreign body accidentally left in body following infusion or transfusion, sequela
T81.592S	Other complications of foreign body accidentally left in body following kidney dialysis, sequela
T81.593S	Other complications of foreign body accidentally left in body following injection or immunization, sequela
T81.594S	Other complications of foreign body accidentally left in body following endoscopic examination, sequela
T81.595S	Other complications of foreign body accidentally left in body following heart catheterization, sequela
T81.596S	Other complications of foreign body accidentally left in body following aspiration, puncture or other catheterization, sequela
T81.597S	Other complications of foreign body accidentally left in body following removal of catheter or packing, sequela
T81.598S	Other complications of foreign body accidentally left in body following other procedure, sequela
T81.599S	Other complications of foreign body accidentally left in body following unspecified procedure, sequela
T81.60XS	Unspecified acute reaction to foreign substance accidentally left during a procedure, sequela
T81.61XS	Aseptic peritonitis due to foreign substance accidentally left during a procedure, sequela
T81.69XS	Other acute reaction to foreign substance accidentally left during a procedure, sequela
T81.710S	Complication of mesenteric artery following a procedure, not elsewhere classified, sequela

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T81.711S	Complication of renal artery following a procedure, not elsewhere classified, sequela
T81.718S	Complication of other artery following a procedure, not elsewhere classified, sequela
T81.719S	Complication of unspecified artery following a procedure, not elsewhere classified, sequela
T81.72XS	Complication of vein following a procedure, not elsewhere classified, sequela
T81.81XS	Complication of inhalation therapy, sequela
T81.82XS	Emphysema (subcutaneous) resulting from a procedure, sequela
T81.83XS	Persistent postprocedural fistula, sequela
T81.89XS	Other complications of procedures, not elsewhere classified, sequela
T81.9XXS	Unspecified complication of procedure, sequela
T82.01XS	Breakdown (mechanical) of heart valve prosthesis, sequela
T82.02XS	Displacement of heart valve prosthesis, sequela
T82.03XS	Leakage of heart valve prosthesis, sequela
T82.09XS	Other mechanical complication of heart valve prosthesis, sequela
T82.110S	Breakdown (mechanical) of cardiac electrode, sequela
T82.111S	Breakdown (mechanical) of cardiac pulse generator (battery), sequela
T82.118S	Breakdown (mechanical) of other cardiac electronic device, sequela
T82.119S	Breakdown (mechanical) of unspecified cardiac electronic device, sequela
T82.120S	Displacement of cardiac electrode, sequela
T82.121S	Displacement of cardiac pulse generator (battery), sequela
T82.128S	Displacement of other cardiac electronic device, sequela
T82.129S	Displacement of unspecified cardiac electronic device, sequela
T82.190S	Other mechanical complication of cardiac electrode, sequela
T82.191S	Other mechanical complication of cardiac pulse generator (battery), sequela
T82.198S	Other mechanical complication of other cardiac electronic device, sequela
T82.199S	Other mechanical complication of unspecified cardiac device, sequela
T82.211S	Breakdown (mechanical) of coronary artery bypass graft, sequela
T82.212S	Displacement of coronary artery bypass graft, sequela
T82.213S	Leakage of coronary artery bypass graft, sequela
T82.218S	Other mechanical complication of coronary artery bypass graft, sequela
T82.221S	Breakdown (mechanical) of biological heart valve graft, sequela



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Code	Description
T82.222S	Displacement of biological heart valve graft, sequela
T82.223S	Leakage of biological heart valve graft, sequela
T82.228S	Other mechanical complication of biological heart valve graft, sequela
T82.310S	Breakdown (mechanical) of aortic (bifurcation) graft (replacement), sequela
T82.311S	Breakdown (mechanical) of carotid arterial graft (bypass), sequela
T82.312S	Breakdown (mechanical) of femoral arterial graft (bypass), sequela
T82.318S	Breakdown (mechanical) of other vascular grafts, sequela
T82.319S	Breakdown (mechanical) of unspecified vascular grafts, sequela
T82.320S	Displacement of aortic (bifurcation) graft (replacement), sequela
T82.321S	Displacement of carotid arterial graft (bypass), sequela
T82.322S	Displacement of femoral arterial graft (bypass), sequela
T82.328S	Displacement of other vascular grafts, sequela
T82.329S	Displacement of unspecified vascular grafts, sequela
T82.330S	Leakage of aortic (bifurcation) graft (replacement), sequela
T82.331S	Leakage of carotid arterial graft (bypass), sequela
T82.332S	Leakage of femoral arterial graft (bypass), sequela
T82.338S	Leakage of other vascular grafts, sequela
T82.339S	Leakage of unspecified vascular graft, sequela
T82.390S	Other mechanical complication of aortic (bifurcation) graft (replacement), sequela
T82.391S	Other mechanical complication of carotid arterial graft (bypass), sequela
T82.392S	Other mechanical complication of femoral arterial graft (bypass), sequela
T82.398S	Other mechanical complication of other vascular grafts, sequela
T82.399S	Other mechanical complication of unspecified vascular grafts, sequela
T82.41XS	Breakdown (mechanical) of vascular dialysis catheter, sequela
T82.42XS	Displacement of vascular dialysis catheter, sequela
T82.43XS	Leakage of vascular dialysis catheter, sequela
T82.49XS	Other complication of vascular dialysis catheter, sequela
T82.510S	Breakdown (mechanical) of surgically created arteriovenous fistula, sequela
T82.511S	Breakdown (mechanical) of surgically created arteriovenous shunt, sequela
T82.512S	Breakdown (mechanical) of artificial heart, sequela



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Code	Description
T82.513S	Breakdown (mechanical) of balloon (counterpulsation) device, sequela
T82.514S	Breakdown (mechanical) of infusion catheter, sequela
T82.515S	Breakdown (mechanical) of umbrella device, sequela
T82.518S	Breakdown (mechanical) of other cardiac and vascular devices and implants, sequela
T82.519S	Breakdown (mechanical) of unspecified cardiac and vascular devices and implants, sequela
T82.520S	Displacement of surgically created arteriovenous fistula, sequela
T82.521S	Displacement of surgically created arteriovenous shunt, sequela
T82.522S	Displacement of artificial heart, sequela
T82.523S	Displacement of balloon (counterpulsation) device, sequela
T82.524S	Displacement of infusion catheter, sequela
T82.525S	Displacement of umbrella device, sequela
T82.528S	Displacement of other cardiac and vascular devices and implants, sequela
T82.529S	Displacement of unspecified cardiac and vascular devices and implants, sequela
T82.530S	Leakage of surgically created arteriovenous fistula, sequela
T82.531S	Leakage of surgically created arteriovenous shunt, sequela
T82.532S	Leakage of artificial heart, sequela
T82.533S	Leakage of balloon (counterpulsation) device, sequela
T82.534S	Leakage of infusion catheter, sequela
T82.535S	Leakage of umbrella device, sequela
T82.538S	Leakage of other cardiac and vascular devices and implants, sequela
T82.539S	Leakage of unspecified cardiac and vascular devices and implants, sequela
T82.590S	Other mechanical complication of surgically created arteriovenous fistula, sequela
T82.591S	Other mechanical complication of surgically created arteriovenous shunt, sequela
T82.592S	Other mechanical complication of artificial heart, sequela
T82.593S	Other mechanical complication of balloon (counterpulsation) device, sequela
T82.594S	Other mechanical complication of infusion catheter, sequela
T82.595S	Other mechanical complication of umbrella device, sequela
T82.598S	Other mechanical complication of other cardiac and vascular devices and implants, sequela



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Code	Description
T82.599S	Other mechanical complication of unspecified cardiac and vascular devices and implants, sequela
T82.6XXS	Infection and inflammatory reaction due to cardiac valve prosthesis, sequela
T82.7XXS	Infection and inflammatory reaction due to other cardiac and vascular devices, implants and grafts, sequela
T82.817S	Embolism due to cardiac prosthetic devices, implants and grafts, sequela
T82.818S	Embolism due to vascular prosthetic devices, implants and grafts, sequela
T82.827S	Fibrosis due to cardiac prosthetic devices, implants and grafts, sequela
T82.828S	Fibrosis due to vascular prosthetic devices, implants and grafts, sequela
T82.837S	Hemorrhage due to cardiac prosthetic devices, implants and grafts, sequela
T82.838S	Hemorrhage due to vascular prosthetic devices, implants and grafts, sequela
T82.847S	Pain due to cardiac prosthetic devices, implants and grafts, sequela
T82.848S	Pain due to vascular prosthetic devices, implants and grafts, sequela
T82.857S	Stenosis of other cardiac prosthetic devices, implants and grafts, sequela
T82.858S	Stenosis of other vascular prosthetic devices, implants and grafts, sequela
T82.867S	Thrombosis due to cardiac prosthetic devices, implants and grafts, sequela
T82.868S	Thrombosis due to vascular prosthetic devices, implants and grafts, sequela
T82.897S	Other specified complication of cardiac prosthetic devices, implants and grafts, sequela
T82.898S	Other specified complication of vascular prosthetic devices, implants and grafts, sequela
T82.9XXS	Unspecified complication of cardiac and vascular prosthetic device, implant and graft, sequela
T83.010S	Breakdown (mechanical) of cystostomy catheter, sequela
T83.018S	Breakdown (mechanical) of other urinary catheter, sequela
T83.020S	Displacement of cystostomy catheter, sequela
T83.028S	Displacement of other urinary catheter, sequela
T83.030S	Leakage of cystostomy catheter, sequela
T83.038S	Leakage of other urinary catheter, sequela
T83.090S	Other mechanical complication of cystostomy catheter, sequela
T83.098S	Other mechanical complication of other urinary catheter, sequela
T83.110S	Breakdown (mechanical) of urinary electronic stimulator device, sequela
T83.111S	Breakdown (mechanical) of implanted urinary sphincter, sequela



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Code	Description
T83.112S	Breakdown (mechanical) of indwelling ureteral stent, sequela
T83.118S	Breakdown (mechanical) of other urinary devices and implants, sequela
T83.120S	Displacement of urinary electronic stimulator device, sequela
T83.121S	Displacement of implanted urinary sphincter, sequela
T83.122S	Displacement of indwelling ureteral stent, sequela
T83.128S	Displacement of other urinary devices and implants, sequela
T83.190S	Other mechanical complication of urinary electronic stimulator device, sequela
T83.191S	Other mechanical complication of implanted urinary sphincter, sequela
T83.192S	Other mechanical complication of indwelling ureteral stent, sequela
T83.198S	Other mechanical complication of other urinary devices and implants, sequela
T83.21XS	Breakdown (mechanical) of graft of urinary organ, sequela
T83.22XS	Displacement of graft of urinary organ, sequela
T83.23XS	Leakage of graft of urinary organ, sequela
T83.29XS	Other mechanical complication of graft of urinary organ, sequela
T83.31XS	Breakdown (mechanical) of intrauterine contraceptive device, sequela
T83.32XS	Displacement of intrauterine contraceptive device, sequela
T83.39XS	Other mechanical complication of intrauterine contraceptive device, sequela
T83.410S	Breakdown (mechanical) of implanted penile prosthesis, sequela
T83.418S	Breakdown (mechanical) of other prosthetic devices, implants and grafts of genital tract, sequela
T83.420S	Displacement of implanted penile prosthesis, sequela
T83.428S	Displacement of other prosthetic devices, implants and grafts of genital tract, sequela
T83.490S	Other mechanical complication of implanted penile prosthesis, sequela
T83.498S	Other mechanical complication of other prosthetic devices, implants and grafts of genital tract, sequela
T83.711S	Erosion of implanted vaginal mesh to surrounding organ or tissue, sequela
T83.718S	Erosion of other implanted mesh to organ or tissue, sequela
T83.721S	Exposure of implanted vaginal mesh into vagina, sequela
T83.728S	Exposure of other implanted mesh into organ or tissue, sequela
T83.81XS	Embolism due to genitourinary prosthetic devices, implants and grafts, sequela
T83.82XS	Fibrosis due to genitourinary prosthetic devices, implants and grafts, sequela

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Code	Description
T83.83XS	Hemorrhage due to genitourinary prosthetic devices, implants and grafts, sequela
T83.84XS	Pain due to genitourinary prosthetic devices, implants and grafts, sequela
T83.85XS	Stenosis due to genitourinary prosthetic devices, implants and grafts, sequela
T83.86XS	Thrombosis due to genitourinary prosthetic devices, implants and grafts, sequela
T83.89XS	Other specified complication of genitourinary prosthetic devices, implants and grafts, sequela
T83.9XXS	Unspecified complication of genitourinary prosthetic device, implant and graft, sequela
T84.010S	Broken internal right hip prosthesis, sequela
T84.011S	Broken internal left hip prosthesis, sequela
T84.012S	Broken internal right knee prosthesis, sequela
T84.013S	Broken internal left knee prosthesis, sequela
T84.018S	Broken internal joint prosthesis, other site, sequela
T84.019S	Broken internal joint prosthesis, unspecified site, sequela
T84.020S	Dislocation of internal right hip prosthesis, sequela
T84.021S	Dislocation of internal left hip prosthesis, sequela
T84.022S	Instability of internal right knee prosthesis, sequela
T84.023S	Instability of internal left knee prosthesis, sequela
T84.028S	Dislocation of other internal joint prosthesis, sequela
T84.029S	Dislocation of unspecified internal joint prosthesis, sequela
T84.030S	Mechanical loosening of internal right hip prosthetic joint, sequela
T84.031S	Mechanical loosening of internal left hip prosthetic joint, sequela
T84.032S	Mechanical loosening of internal right knee prosthetic joint, sequela
T84.033S	Mechanical loosening of internal left knee prosthetic joint, sequela
T84.038S	Mechanical loosening of other internal prosthetic joint, sequela
T84.039S	Mechanical loosening of unspecified internal prosthetic joint, sequela
T84.050S	Periprosthetic osteolysis of internal prosthetic right hip joint, sequela
T84.051S	Periprosthetic osteolysis of internal prosthetic left hip joint, sequela
T84.052S	Periprosthetic osteolysis of internal prosthetic right knee joint, sequela
T84.053S	Periprosthetic osteolysis of internal prosthetic left knee joint, sequela
T84.058S	Periprosthetic osteolysis of other internal prosthetic joint, sequela
T84.059S	Periprosthetic osteolysis of unspecified internal prosthetic joint, sequela

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Code	Description
T84.060S	Wear of articular bearing surface of internal prosthetic right hip joint, sequela
T84.061S	Wear of articular bearing surface of internal prosthetic left hip joint, sequela
T84.062S	Wear of articular bearing surface of internal prosthetic right knee joint, sequela
T84.063S	Wear of articular bearing surface of internal prosthetic left knee joint, sequela
T84.068S	Wear of articular bearing surface of other internal prosthetic joint, sequela
T84.069S	Wear of articular bearing surface of unspecified internal prosthetic joint, sequela
T84.090S	Other mechanical complication of internal right hip prosthesis, sequela
T84.091S	Other mechanical complication of internal left hip prosthesis, sequela
T84.092S	Other mechanical complication of internal right knee prosthesis, sequela
T84.093S	Other mechanical complication of internal left knee prosthesis, sequela
T84.098S	Other mechanical complication of other internal joint prosthesis, sequela
T84.099S	Other mechanical complication of unspecified internal joint prosthesis, sequela
T84.110S	Breakdown (mechanical) of internal fixation device of right humerus, sequela
T84.111S	Breakdown (mechanical) of internal fixation device of left humerus, sequela
T84.112S	Breakdown (mechanical) of internal fixation device of bone of right forearm, sequela
T84.113S	Breakdown (mechanical) of internal fixation device of bone of left forearm, sequela
T84.114S	Breakdown (mechanical) of internal fixation device of right femur, sequela
T84.115S	Breakdown (mechanical) of internal fixation device of left femur, sequela
T84.116S	Breakdown (mechanical) of internal fixation device of bone of right lower leg, sequela
T84.117S	Breakdown (mechanical) of internal fixation device of bone of left lower leg, sequela
T84.119S	Breakdown (mechanical) of internal fixation device of unspecified bone of limb, sequela
T84.120S	Displacement of internal fixation device of right humerus, sequela
T84.121S	Displacement of internal fixation device of left humerus, sequela
T84.122S	Displacement of internal fixation device of bone of right forearm, sequela
T84.123S	Displacement of internal fixation device of bone of left forearm, sequela
T84.124S	Displacement of internal fixation device of right femur, sequela
T84.125S	Displacement of internal fixation device of left femur, sequela
T84.126S	Displacement of internal fixation device of bone of right lower leg, sequela
T84.127S	Displacement of internal fixation device of bone of left lower leg, sequela
T84.129S	Displacement of internal fixation device of unspecified bone of limb, sequela

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Code	Description
T84.190S	Other mechanical complication of internal fixation device of right humerus, sequela
T84.191S	Other mechanical complication of internal fixation device of left humerus, sequela
T84.192S	Other mechanical complication of internal fixation device of bone of right forearm, sequela
T84.193S	Other mechanical complication of internal fixation device of bone of left forearm, sequela
T84.194S	Other mechanical complication of internal fixation device of right femur, sequela
T84.195S	Other mechanical complication of internal fixation device of left femur, sequela
T84.196S	Other mechanical complication of internal fixation device of bone of right lower leg, sequela
T84.197S	Other mechanical complication of internal fixation device of bone of left lower leg, sequela
T84.199S	Other mechanical complication of internal fixation device of unspecified bone of limb, sequela
T84.210S	Breakdown (mechanical) of internal fixation device of bones of hand and fingers, sequela
T84.213S	Breakdown (mechanical) of internal fixation device of bones of foot and toes, sequela
T84.216S	Breakdown (mechanical) of internal fixation device of vertebrae, sequela
T84.218S	Breakdown (mechanical) of internal fixation device of other bones, sequela
T84.220S	Displacement of internal fixation device of bones of hand and fingers, sequela
T84.223S	Displacement of internal fixation device of bones of foot and toes, sequela
T84.226S	Displacement of internal fixation device of vertebrae, sequela
T84.228S	Displacement of internal fixation device of other bones, sequela
T84.290S	Other mechanical complication of internal fixation device of bones of hand and fingers, sequela
T84.293S	Other mechanical complication of internal fixation device of bones of foot and toes, sequela
T84.296S	Other mechanical complication of internal fixation device of vertebrae, sequela
T84.298S	Other mechanical complication of internal fixation device of other bones, sequela
T84.310S	Breakdown (mechanical) of electronic bone stimulator, sequela
T84.318S	Breakdown (mechanical) of other bone devices, implants and grafts, sequela
T84.320S	Displacement of electronic bone stimulator, sequela
T84.328S	Displacement of other bone devices, implants and grafts, sequela
T84.390S	Other mechanical complication of electronic bone stimulator, sequela
T84.398S	Other mechanical complication of other bone devices, implants and grafts, sequela
T84.410S	Breakdown (mechanical) of muscle and tendon graft, sequela

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Code	Description
T84.418S	Breakdown (mechanical) of other internal orthopedic devices, implants and grafts, sequela
T84.420S	Displacement of muscle and tendon graft, sequela
T84.428S	Displacement of other internal orthopedic devices, implants and grafts, sequela
T84.490S	Other mechanical complication of muscle and tendon graft, sequela
T84.498S	Other mechanical complication of other internal orthopedic devices, implants and grafts, sequela
T84.50XS	Infection and inflammatory reaction due to unspecified internal joint prosthesis, sequela
T84.51XS	Infection and inflammatory reaction due to internal right hip prosthesis, sequela
T84.52XS	Infection and inflammatory reaction due to internal left hip prosthesis, sequela
T84.53XS	Infection and inflammatory reaction due to internal right knee prosthesis, sequela
T84.54XS	Infection and inflammatory reaction due to internal left knee prosthesis, sequela
T84.59XS	Infection and inflammatory reaction due to other internal joint prosthesis, sequela
T84.60XS	Infection and inflammatory reaction due to internal fixation device of unspecified site, sequela
T84.610S	Infection and inflammatory reaction due to internal fixation device of right humerus, sequela
T84.611S	Infection and inflammatory reaction due to internal fixation device of left humerus, sequela
T84.612S	Infection and inflammatory reaction due to internal fixation device of right radius, sequela
T84.613S	Infection and inflammatory reaction due to internal fixation device of left radius, sequela
T84.614S	Infection and inflammatory reaction due to internal fixation device of right ulna, sequela
T84.615S	Infection and inflammatory reaction due to internal fixation device of left ulna, sequela
T84.619S	Infection and inflammatory reaction due to internal fixation device of unspecified bone of arm, sequela
T84.620S	Infection and inflammatory reaction due to internal fixation device of right femur, sequela
T84.621S	Infection and inflammatory reaction due to internal fixation device of left femur, sequela
T84.622S	Infection and inflammatory reaction due to internal fixation device of right tibia, sequela
T84.623S	Infection and inflammatory reaction due to internal fixation device of left tibia, sequela
T84.624S	Infection and inflammatory reaction due to internal fixation device of right fibula, sequela
T84.625S	Infection and inflammatory reaction due to internal fixation device of left fibula, sequela
T84.629S	Infection and inflammatory reaction due to internal fixation device of unspecified bone of leg, sequela
T84.63XS	Infection and inflammatory reaction due to internal fixation device of spine, sequela

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Code	Description
T84.69XS	Infection and inflammatory reaction due to internal fixation device of other site, sequela
T84.7XXS	Infection and inflammatory reaction due to other internal orthopedic prosthetic devices, implants and grafts, sequela
T84.81XS	Embolism due to internal orthopedic prosthetic devices, implants and grafts, sequela
T84.82XS	Fibrosis due to internal orthopedic prosthetic devices, implants and grafts, sequela
T84.83XS	Hemorrhage due to internal orthopedic prosthetic devices, implants and grafts, sequela
T84.84XS	Pain due to internal orthopedic prosthetic devices, implants and grafts, sequela
T84.85XS	Stenosis due to internal orthopedic prosthetic devices, implants and grafts, sequela
T84.86XS	Thrombosis due to internal orthopedic prosthetic devices, implants and grafts, sequela
T84.89XS	Other specified complication of internal orthopedic prosthetic devices, implants and grafts, sequela
T84.9XXS	Unspecified complication of internal orthopedic prosthetic device, implant and graft, sequela
T85.01XS	Breakdown (mechanical) of ventricular intracranial (communicating) shunt, sequela
T85.02XS	Displacement of ventricular intracranial (communicating) shunt, sequela
T85.03XS	Leakage of ventricular intracranial (communicating) shunt, sequela
T85.09XS	Other mechanical complication of ventricular intracranial (communicating) shunt, sequela
T85.110S	Breakdown (mechanical) of implanted electronic neurostimulator of brain electrode (lead), sequela
T85.111S	Breakdown (mechanical) of implanted electronic neurostimulator of peripheral nerve electrode (lead), sequela
T85.112S	Breakdown (mechanical) of implanted electronic neurostimulator of spinal cord electrode (lead), sequela
T85.118S	Breakdown (mechanical) of other implanted electronic stimulator of nervous system, sequela
T85.120S	Displacement of implanted electronic neurostimulator of brain electrode (lead), sequela
T85.121S	Displacement of implanted electronic neurostimulator of peripheral nerve electrode (lead), sequela
T85.122S	Displacement of implanted electronic neurostimulator of spinal cord electrode (lead), sequela
T85.128S	Displacement of other implanted electronic stimulator of nervous system, sequela
T85.190S	Other mechanical complication of implanted electronic neurostimulator of brain electrode (lead), sequela



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Code	Description
T85.191S	Other mechanical complication of implanted electronic neurostimulator of peripheral nerve electrode (lead), sequela
T85.192S	Other mechanical complication of implanted electronic neurostimulator of spinal cord electrode (lead), sequela
T85.199S	Other mechanical complication of other implanted electronic stimulator of nervous system, sequela
T85.21XS	Breakdown (mechanical) of intraocular lens, sequela
T85.22XS	Displacement of intraocular lens, sequela
T85.29XS	Other mechanical complication of intraocular lens, sequela
T85.310S	Breakdown (mechanical) of prosthetic orbit of right eye, sequela
T85.311S	Breakdown (mechanical) of prosthetic orbit of left eye, sequela
T85.318S	Breakdown (mechanical) of other ocular prosthetic devices, implants and grafts, sequela
T85.320S	Displacement of prosthetic orbit of right eye, sequela
T85.321S	Displacement of prosthetic orbit of left eye, sequela
T85.328S	Displacement of other ocular prosthetic devices, implants and grafts, sequela
T85.390S	Other mechanical complication of prosthetic orbit of right eye, sequela
T85.391S	Other mechanical complication of prosthetic orbit of left eye, sequela
T85.398S	Other mechanical complication of other ocular prosthetic devices, implants and grafts, sequela
T85.41XS	Breakdown (mechanical) of breast prosthesis and implant, sequela
T85.42XS	Displacement of breast prosthesis and implant, sequela
T85.43XS	Leakage of breast prosthesis and implant, sequela
T85.44XS	Capsular contracture of breast implant, sequela
T85.49XS	Other mechanical complication of breast prosthesis and implant, sequela
T85.510S	Breakdown (mechanical) of bile duct prosthesis, sequela
T85.511S	Breakdown (mechanical) of esophageal anti-reflux device, sequela
T85.518S	Breakdown (mechanical) of other gastrointestinal prosthetic devices, implants and grafts, sequela
T85.520S	Displacement of bile duct prosthesis, sequela
T85.521S	Displacement of esophageal anti-reflux device, sequela
T85.528S	Displacement of other gastrointestinal prosthetic devices, implants and grafts, sequela
T85.590S	Other mechanical complication of bile duct prosthesis, sequela

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Code	Description
T85.591S	Other mechanical complication of esophageal anti-reflux device, sequela
T85.598S	Other mechanical complication of other gastrointestinal prosthetic devices, implants and grafts, sequela
T85.610S	Breakdown (mechanical) of cranial or spinal infusion catheter, sequela
T85.611S	Breakdown (mechanical) of intraperitoneal dialysis catheter, sequela
T85.612S	Breakdown (mechanical) of permanent sutures, sequela
T85.613S	Breakdown (mechanical) of artificial skin graft and decellularized allodermis, sequela
T85.614S	Breakdown (mechanical) of insulin pump, sequela
T85.618S	Breakdown (mechanical) of other specified internal prosthetic devices, implants and grafts, sequela
T85.620S	Displacement of cranial or spinal infusion catheter, sequela
T85.621S	Displacement of intraperitoneal dialysis catheter, sequela
T85.622S	Displacement of permanent sutures, sequela
T85.623S	Displacement of artificial skin graft and decellularized allodermis, sequela
T85.624S	Displacement of insulin pump, sequela
T85.628S	Displacement of other specified internal prosthetic devices, implants and grafts, sequela
T85.630S	Leakage of cranial or spinal infusion catheter, sequela
T85.631S	Leakage of intraperitoneal dialysis catheter, sequela
T85.633S	Leakage of insulin pump, sequela
T85.638S	Leakage of other specified internal prosthetic devices, implants and grafts, sequela
T85.690S	Other mechanical complication of cranial or spinal infusion catheter, sequela
T85.691S	Other mechanical complication of intraperitoneal dialysis catheter, sequela
T85.692S	Other mechanical complication of permanent sutures, sequela
T85.693S	Other mechanical complication of artificial skin graft and decellularized allodermis, sequela
T85.694S	Other mechanical complication of insulin pump, sequela
T85.698S	Other mechanical complication of other specified internal prosthetic devices, implants and grafts, sequela
T85.71XS	Infection and inflammatory reaction due to peritoneal dialysis catheter, sequela
T85.72XS	Infection and inflammatory reaction due to insulin pump, sequela
T85.79XS	Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts, sequela
T85.9XXS	Unspecified complication of internal prosthetic device, implant and graft, sequela

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Code	Description
T88.0XXS	Infection following immunization, sequela
T88.1XXS	Other complications following immunization, not elsewhere classified, sequela
T88.2XXS	Shock due to anesthesia, sequela
T88.3XXS	Malignant hyperthermia due to anesthesia, sequela
T88.4XXS	Failed or difficult intubation, sequela
T88.51XS	Hypothermia following anesthesia, sequela
T88.52XS	Failed moderate sedation during procedure, sequela
T88.59XS	Other complications of anesthesia, sequela
T88.6XXS	Anaphylactic reaction due to adverse effect of correct drug or medicament properly administered, sequela
T88.7XXS	Unspecified adverse effect of drug or medicament, sequela
T88.8XXS	Other specified complications of surgical and medical care, not elsewhere classified, sequela
T88.9XXS	Complication of surgical and medical care, unspecified, sequela
*V47.0XXA	*Car driver injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.1XXA	*Car passenger injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.3XXA	*Unspecified car occupant injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.5XXA	*Car driver injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.6XXA	*Car passenger injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.9XXA	*Unspecified car occupant injured in collision with fixed or stationary object in traffic accident, initial encounter
Z00.2	Encounter for examination for period of rapid growth in childhood
Z00.3	Encounter for examination for adolescent development state
Z01.00	Encounter for examination of eyes and vision without abnormal findings
Z01.01	Encounter for examination of eyes and vision with abnormal findings
Z01.10	Encounter for examination of ears and hearing without abnormal findings
Z01.110	Encounter for hearing examination following failed hearing screening
Z01.118	Encounter for examination of ears and hearing with other abnormal findings



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Code	Description
Z01.12	Encounter for hearing conservation and treatment
Z01.20	Encounter for dental examination and cleaning without abnormal findings
Z01.21	Encounter for dental examination and cleaning with abnormal findings
Z01.812	Encounter for preprocedural laboratory examination
Z01.82	Encounter for allergy testing
Z01.84	Encounter for antibody response examination
Z01.89	Encounter for other specified special examinations
Z03.89	Encounter for observation for other suspected diseases and conditions ruled out
*Z05.0	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1	*Observation and evaluation of newborn for suspected infectious condition ruled out
*Z05.2	*Observation and evaluation of newborn for suspected neurological condition ruled out
*Z05.3	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41	*Observation and evaluation of newborn for suspected genetic condition ruled out
*Z05.42	*Observation and evaluation of newborn for suspected metabolic condition ruled out
*Z05.43	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
*Z05.6	*Observation and evaluation of newborn for suspected genitourinary condition ruled out
*Z05.71	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
*Z05.73	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9	*Observation and evaluation of newborn for unspecified suspected condition ruled out



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Code	Description
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z12.11	Encounter for screening for malignant neoplasm of colon
Z12.31	Encounter for screening mammogram for malignant neoplasm of breast
Z12.39	Encounter for other screening for malignant neoplasm of breast
Z12.4	Encounter for screening for malignant neoplasm of cervix
Z12.5	Encounter for screening for malignant neoplasm of prostate
Z13.1	Encounter for screening for diabetes mellitus
Z13.6	Encounter for screening for cardiovascular disorders
*Z19.1	*Hormone sensitive malignancy status
*Z19.2	*Hormone resistant malignancy status
Z23	Encounter for immunization
Z30.011	Encounter for initial prescription of contraceptive pills
Z30.012	Encounter for prescription of emergency contraception
Z30.013	Encounter for initial prescription of injectable contraceptive
Z30.014	Encounter for initial prescription of intrauterine contraceptive device
Z30.018	Encounter for initial prescription of other contraceptives
Z30.019	Encounter for initial prescription of contraceptives, unspecified
Z30.02	Counseling and instruction in natural family planning to avoid pregnancy
Z30.09	Encounter for other general counseling and advice on contraception
Z30.2	Encounter for sterilization
Z30.40	Encounter for surveillance of contraceptives, unspecified
Z30.41	Encounter for surveillance of contraceptive pills
Z30.42	Encounter for surveillance of injectable contraceptive
Z30.430	Encounter for insertion of intrauterine contraceptive device
Z30.431	Encounter for routine checking of intrauterine contraceptive device
Z30.432	Encounter for removal of intrauterine contraceptive device
Z30.433	Encounter for removal and reinsertion of intrauterine contraceptive device
Z30.49	Encounter for surveillance of other contraceptives
Z30.8	Encounter for other contraceptive management
Z30.9	Encounter for contraceptive management, unspecified

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Code	Description
Z31.0	Encounter for reversal of previous sterilization
Z31.41	Encounter for fertility testing
Z31.42	Aftercare following sterilization reversal
Z31.430	Encounter of female for testing for genetic disease carrier status for procreative management
Z31.438	Encounter for other genetic testing of female for procreative management
Z31.440	Encounter of male for testing for genetic disease carrier status for procreative management
Z31.441	Encounter for testing of male partner of patient with recurrent pregnancy loss
Z31.448	Encounter for other genetic testing of male for procreative management
Z31.49	Encounter for other procreative investigation and testing
Z31.5	Encounter for genetic counseling
Z31.61	Procreative counseling and advice using natural family planning
Z31.62	Encounter for fertility preservation counseling
Z31.69	Encounter for other general counseling and advice on procreation
Z31.81	Encounter for male factor infertility in female patient
Z31.82	Encounter for Rh incompatibility status
Z31.83	Encounter for assisted reproductive fertility procedure cycle
Z31.84	Encounter for fertility preservation procedure
Z31.89	Encounter for other procreative management
Z31.9	Encounter for procreative management, unspecified
Z32.00	Encounter for pregnancy test, result unknown
Z32.01	Encounter for pregnancy test, result positive
Z32.02	Encounter for pregnancy test, result negative
Z32.2	Encounter for childbirth instruction
Z32.3	Encounter for childcare instruction
Z3A.00	Weeks of gestation of pregnancy not specified
Z3A.01	Less than 8 weeks gestation of pregnancy
Z3A.08	8 weeks gestation of pregnancy
Z3A.09	9 weeks gestation of pregnancy
Z3A.10	10 weeks gestation of pregnancy

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Code	Description
Z3A.11	11 weeks gestation of pregnancy
Z3A.12	12 weeks gestation of pregnancy
Z3A.13	13 weeks gestation of pregnancy
Z3A.14	14 weeks gestation of pregnancy
Z3A.15	15 weeks gestation of pregnancy
Z3A.16	16 weeks gestation of pregnancy
Z3A.17	17 weeks gestation of pregnancy
Z3A.18	18 weeks gestation of pregnancy
Z3A.19	19 weeks gestation of pregnancy
Z3A.20	20 weeks gestation of pregnancy
Z3A.21	21 weeks gestation of pregnancy
Z3A.22	22 weeks gestation of pregnancy
Z3A.23	23 weeks gestation of pregnancy
Z3A.24	24 weeks gestation of pregnancy
Z3A.25	25 weeks gestation of pregnancy
Z3A.26	26 weeks gestation of pregnancy
Z3A.27	27 weeks gestation of pregnancy
Z3A.28	28 weeks gestation of pregnancy
Z3A.29	29 weeks gestation of pregnancy
Z3A.30	30 weeks gestation of pregnancy
Z3A.31	31 weeks gestation of pregnancy
Z3A.32	32 weeks gestation of pregnancy
Z3A.33	33 weeks gestation of pregnancy
Z3A.34	34 weeks gestation of pregnancy
Z3A.35	35 weeks gestation of pregnancy
Z3A.36	36 weeks gestation of pregnancy
Z3A.37	37 weeks gestation of pregnancy
Z3A.38	38 weeks gestation of pregnancy
Z3A.39	39 weeks gestation of pregnancy
Z3A.40	40 weeks gestation of pregnancy



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Code	Description
Z3A.41	41 weeks gestation of pregnancy
Z3A.42	42 weeks gestation of pregnancy
Z3A.49	Greater than 42 weeks gestation of pregnancy
Z42.1	Encounter for breast reconstruction following mastectomy
Z42.8	Encounter for other plastic and reconstructive surgery following medical procedure or healed injury
Z43.0	Encounter for attention to tracheostomy
Z43.1	Encounter for attention to gastrostomy
Z43.2	Encounter for attention to ileostomy
Z43.3	Encounter for attention to colostomy
Z43.4	Encounter for attention to other artificial openings of digestive tract
Z43.5	Encounter for attention to cystostomy
Z43.6	Encounter for attention to other artificial openings of urinary tract
Z43.7	Encounter for attention to artificial vagina
Z43.8	Encounter for attention to other artificial openings
Z43.9	Encounter for attention to unspecified artificial opening
Z44.001	Encounter for fitting and adjustment of unspecified right artificial arm
Z44.002	Encounter for fitting and adjustment of unspecified left artificial arm
Z44.009	Encounter for fitting and adjustment of unspecified artificial arm, unspecified arm
Z44.011	Encounter for fitting and adjustment of complete right artificial arm
Z44.012	Encounter for fitting and adjustment of complete left artificial arm
Z44.019	Encounter for fitting and adjustment of complete artificial arm, unspecified arm
Z44.021	Encounter for fitting and adjustment of partial artificial right arm
Z44.022	Encounter for fitting and adjustment of partial artificial left arm
Z44.029	Encounter for fitting and adjustment of partial artificial arm, unspecified arm
Z44.101	Encounter for fitting and adjustment of unspecified right artificial leg
Z44.102	Encounter for fitting and adjustment of unspecified left artificial leg
Z44.109	Encounter for fitting and adjustment of unspecified artificial leg, unspecified leg
Z44.111	Encounter for fitting and adjustment of complete right artificial leg
Z44.112	Encounter for fitting and adjustment of complete left artificial leg
Z44.119	Encounter for fitting and adjustment of complete artificial leg, unspecified leg

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Code	Description
Z44.121	Encounter for fitting and adjustment of partial artificial right leg
Z44.122	Encounter for fitting and adjustment of partial artificial left leg
Z44.129	Encounter for fitting and adjustment of partial artificial leg, unspecified leg
Z44.20	Encounter for fitting and adjustment of artificial eye, unspecified
Z44.21	Encounter for fitting and adjustment of artificial right eye
Z44.22	Encounter for fitting and adjustment of artificial left eye
Z44.30	Encounter for fitting and adjustment of external breast prosthesis, unspecified breast
Z44.31	Encounter for fitting and adjustment of external right breast prosthesis
Z44.32	Encounter for fitting and adjustment of external left breast prosthesis
Z44.8	Encounter for fitting and adjustment of other external prosthetic devices
Z44.9	Encounter for fitting and adjustment of unspecified external prosthetic device
Z45.010	Encounter for checking and testing of cardiac pacemaker pulse generator [battery]
Z45.018	Encounter for adjustment and management of other part of cardiac pacemaker
Z45.02	Encounter for adjustment and management of automatic implantable cardiac defibrillator
Z45.09	Encounter for adjustment and management of other cardiac device
Z45.31	Encounter for adjustment and management of implanted visual substitution device
Z45.320	Encounter for adjustment and management of bone conduction device
Z45.321	Encounter for adjustment and management of cochlear device
Z45.328	Encounter for adjustment and management of other implanted hearing device
Z45.41	Encounter for adjustment and management of cerebrospinal fluid drainage device
Z45.42	Encounter for adjustment and management of neuropacemaker (brain) (peripheral nerve) (spinal cord)
Z45.49	Encounter for adjustment and management of other implanted nervous system device
Z45.811	Encounter for adjustment or removal of right breast implant
Z45.812	Encounter for adjustment or removal of left breast implant
Z45.819	Encounter for adjustment or removal of unspecified breast implant
Z45.82	Encounter for adjustment or removal of myringotomy device (stent) (tube)
Z45.89	Encounter for adjustment and management of other implanted devices
Z45.9	Encounter for adjustment and management of unspecified implanted device
Z46.0	Encounter for fitting and adjustment of spectacles and contact lenses



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Code	Description
Z46.2	Encounter for fitting and adjustment of other devices related to nervous system and special senses
Z46.3	Encounter for fitting and adjustment of dental prosthetic device
Z46.4	Encounter for fitting and adjustment of orthodontic device
Z46.51	Encounter for fitting and adjustment of gastric lap band
Z46.59	Encounter for fitting and adjustment of other gastrointestinal appliance and device
Z46.6	Encounter for fitting and adjustment of urinary device
Z46.81	Encounter for fitting and adjustment of insulin pump
Z46.89	Encounter for fitting and adjustment of other specified devices
Z46.9	Encounter for fitting and adjustment of unspecified device
Z47.1	Aftercare following joint replacement surgery
Z47.2	Encounter for removal of internal fixation device
Z47.31	Aftercare following explantation of shoulder joint prosthesis
Z47.32	Aftercare following explantation of hip joint prosthesis
Z47.33	Aftercare following explantation of knee joint prosthesis
Z47.81	Encounter for orthopedic aftercare following surgical amputation
Z47.82	Encounter for orthopedic aftercare following scoliosis surgery
Z47.89	Encounter for other orthopedic aftercare
Z51.5	Encounter for palliative care
Z51.89	Encounter for other specified aftercare
Z52.000	Unspecified donor, whole blood
Z52.001	Unspecified donor, stem cells
Z52.008	Unspecified donor, other blood
Z52.010	Autologous donor, whole blood
Z52.011	Autologous donor, stem cells
Z52.018	Autologous donor, other blood
Z52.090	Other blood donor, whole blood
Z52.091	Other blood donor, stem cells
Z52.098	Other blood donor, other blood
Z52.10	Skin donor, unspecified
Z52.11	Skin donor, autologous

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Code	Description
Z52.19	Skin donor, other
Z52.20	Bone donor, unspecified
Z52.21	Bone donor, autologous
Z52.29	Bone donor, other
Z52.3	Bone marrow donor
Z52.4	Kidney donor
Z52.5	Cornea donor
Z52.6	Liver donor
Z52.810	Egg (Oocyte) donor under age 35, anonymous recipient
Z52.811	Egg (Oocyte) donor under age 35, designated recipient
Z52.812	Egg (Oocyte) donor age 35 and over, anonymous recipient
Z52.813	Egg (Oocyte) donor age 35 and over, designated recipient
Z52.819	Egg (Oocyte) donor, unspecified
Z52.89	Donor of other specified organs or tissues
Z52.9	Donor of unspecified organ or tissue
Z53.1	Procedure and treatment not carried out because of patient's decision for reasons of belief and group pressure
Z55.0	Illiteracy and low-level literacy
Z55.1	Schooling unavailable and unattainable
Z55.2	Failed school examinations
Z55.3	Underachievement in school
Z55.4	Educational maladjustment and discord with teachers and classmates
Z55.8	Other problems related to education and literacy
Z55.9	Problems related to education and literacy, unspecified
Z56.1	Change of job
Z60.0	Problems of adjustment to life-cycle transitions
Z60.3	Acculturation difficulty
Z60.4	Social exclusion and rejection
Z60.5	Target of (perceived) adverse discrimination and persecution
Z60.8	Other problems related to social environment
Z60.9	Problem related to social environment, unspecified

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Code	Description
Z62.0	Inadequate parental supervision and control
Z62.1	Parental overprotection
Z62.22	Institutional upbringing
Z62.29	Other upbringing away from parents
Z62.3	Hostility towards and scapegoating of child
Z62.6	Inappropriate (excessive) parental pressure
Z62.810	Personal history of physical and sexual abuse in childhood
Z62.811	Personal history of psychological abuse in childhood
Z62.812	Personal history of neglect in childhood
Z62.819	Personal history of unspecified abuse in childhood
Z62.820	Parent-biological child conflict
Z62.821	Parent-adopted child conflict
Z62.822	Parent-foster child conflict
Z62.890	Parent-child estrangement NEC
Z62.891	Sibling rivalry
Z62.898	Other specified problems related to upbringing
Z62.9	Problem related to upbringing, unspecified
Z63.0	Problems in relationship with spouse or partner
Z63.1	Problems in relationship with in-laws
Z63.31	Absence of family member due to military deployment
Z63.32	Other absence of family member
Z63.4	Disappearance and death of family member
Z63.5	Disruption of family by separation and divorce
Z63.6	Dependent relative needing care at home
Z63.71	Stress on family due to return of family member from military deployment
Z63.72	Alcoholism and drug addiction in family
Z63.79	Other stressful life events affecting family and household
Z63.8	Other specified problems related to primary support group
Z63.9	Problem related to primary support group, unspecified
Z64.0	Problems related to unwanted pregnancy



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Code	Description
Z64.1	Problems related to multiparity
Z64.4	Discord with counselors
Z65.0	Conviction in civil and criminal proceedings without imprisonment
Z65.1	Imprisonment and other incarceration
Z65.2	Problems related to release from prison
Z65.3	Problems related to other legal circumstances
Z65.4	Victim of crime and terrorism
Z65.5	Exposure to disaster, war and other hostilities
Z65.8	Other specified problems related to psychosocial circumstances
Z65.9	Problem related to unspecified psychosocial circumstances
Z66	Do not resuscitate
Z67.10	Type A blood, Rh positive
Z67.11	Type A blood, Rh negative
Z67.20	Type B blood, Rh positive
Z67.21	Type B blood, Rh negative
Z67.30	Type AB blood, Rh positive
Z67.31	Type AB blood, Rh negative
Z67.40	Type O blood, Rh positive
Z67.41	Type O blood, Rh negative
Z67.90	Unspecified blood type, Rh positive
Z67.91	Unspecified blood type, Rh negative
Z69.010	Encounter for mental health services for victim of parental child abuse
Z69.011	Encounter for mental health services for perpetrator of parental child abuse
Z69.020	Encounter for mental health services for victim of non-parental child abuse
Z69.021	Encounter for mental health services for perpetrator of non-parental child abuse
Z69.11	Encounter for mental health services for victim of spousal or partner abuse
Z69.12	Encounter for mental health services for perpetrator of spousal or partner abuse
Z69.81	Encounter for mental health services for victim of other abuse
Z69.82	Encounter for mental health services for perpetrator of other abuse
Z70.0	Counseling related to sexual attitude



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Code	Description
Z70.1	Counseling related to patient's sexual behavior and orientation
Z70.2	Counseling related to sexual behavior and orientation of third party
Z70.3	Counseling related to combined concerns regarding sexual attitude, behavior and orientation
Z70.8	Other sex counseling
Z70.9	Sex counseling, unspecified
Z71.1	Person with feared health complaint in whom no diagnosis is made
Z71.2	Person consulting for explanation of examination or test findings
Z71.3	Dietary counseling and surveillance
Z71.41	Alcohol abuse counseling and surveillance of alcoholic
Z71.42	Counseling for family member of alcoholic
Z71.51	Drug abuse counseling and surveillance of drug abuser
Z71.52	Counseling for family member of drug abuser
Z71.6	Tobacco abuse counseling
Z71.7	Human immunodeficiency virus [HIV] counseling
Z71.81	Spiritual or religious counseling
Z71.89	Other specified counseling
Z71.9	Counseling, unspecified
Z72.6	Gambling and betting
Z72.810	Child and adolescent antisocial behavior
Z72.811	Adult antisocial behavior
Z73.4	Inadequate social skills, not elsewhere classified
Z73.5	Social role conflict, not elsewhere classified
Z73.6	Limitation of activities due to disability
Z73.82	Dual sensory impairment
Z74.01	Bed confinement status
Z74.09	Other reduced mobility
Z76.5	Malingering [conscious simulation]
Z76.82	Awaiting organ transplant status
Z76.89	Persons encountering health services in other specified circumstances
Z78.0	Asymptomatic menopausal state

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Code	Description
Z78.1	Physical restraint status
Z78.9	Other specified health status
Z80.0	Family history of malignant neoplasm of digestive organs
Z80.3	Family history of malignant neoplasm of breast
*Z84.82	*Family history of sudden infant death syndrome
Z86.51	Personal history of combat and operational stress reaction
Z86.59	Personal history of other mental and behavioral disorders
Z87.890	Personal history of sex reassignment
Z88.0	Allergy status to penicillin
Z88.1	Allergy status to other antibiotic agents status
Z88.2	Allergy status to sulfonamides status
Z88.3	Allergy status to other anti-infective agents status
Z88.4	Allergy status to anesthetic agent status
Z88.5	Allergy status to narcotic agent status
Z88.6	Allergy status to analgesic agent status
Z88.7	Allergy status to serum and vaccine status
Z88.8	Allergy status to other drugs, medicaments and biological substances status
Z89.011	Acquired absence of right thumb
Z89.012	Acquired absence of left thumb
Z89.019	Acquired absence of unspecified thumb
Z89.021	Acquired absence of right finger(s)
Z89.022	Acquired absence of left finger(s)
Z89.029	Acquired absence of unspecified finger(s)
Z89.111	Acquired absence of right hand
Z89.112	Acquired absence of left hand
Z89.119	Acquired absence of unspecified hand
Z89.121	Acquired absence of right wrist
Z89.122	Acquired absence of left wrist
Z89.129	Acquired absence of unspecified wrist
Z89.201	Acquired absence of right upper limb, unspecified level



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Code	Description
Z89.202	Acquired absence of left upper limb, unspecified level
Z89.209	Acquired absence of unspecified upper limb, unspecified level
Z89.211	Acquired absence of right upper limb below elbow
Z89.212	Acquired absence of left upper limb below elbow
Z89.219	Acquired absence of unspecified upper limb below elbow
Z89.221	Acquired absence of right upper limb above elbow
Z89.222	Acquired absence of left upper limb above elbow
Z89.229	Acquired absence of unspecified upper limb above elbow
Z89.231	Acquired absence of right shoulder
Z89.232	Acquired absence of left shoulder
Z89.239	Acquired absence of unspecified shoulder
Z89.411	Acquired absence of right great toe
Z89.412	Acquired absence of left great toe
Z89.419	Acquired absence of unspecified great toe
Z89.421	Acquired absence of other right toe(s)
Z89.422	Acquired absence of other left toe(s)
Z89.429	Acquired absence of other toe(s), unspecified side
Z89.431	Acquired absence of right foot
Z89.432	Acquired absence of left foot
Z89.439	Acquired absence of unspecified foot
Z89.441	Acquired absence of right ankle
Z89.442	Acquired absence of left ankle
Z89.449	Acquired absence of unspecified ankle
Z89.511	Acquired absence of right leg below knee
Z89.512	Acquired absence of left leg below knee
Z89.519	Acquired absence of unspecified leg below knee
Z89.611	Acquired absence of right leg above knee
Z89.612	Acquired absence of left leg above knee
Z89.619	Acquired absence of unspecified leg above knee
Z89.621	Acquired absence of right hip joint



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Code	Description
Z89.622	Acquired absence of left hip joint
Z89.629	Acquired absence of unspecified hip joint
Z89.9	Acquired absence of limb, unspecified
Z90.01	Acquired absence of eye
Z90.02	Acquired absence of larynx
Z90.09	Acquired absence of other part of head and neck
Z90.10	Acquired absence of unspecified breast and nipple
Z90.11	Acquired absence of right breast and nipple
Z90.12	Acquired absence of left breast and nipple
Z90.13	Acquired absence of bilateral breasts and nipples
Z90.2	Acquired absence of lung [part of]
Z90.3	Acquired absence of stomach [part of]
Z90.49	Acquired absence of other specified parts of digestive tract
Z90.5	Acquired absence of kidney
Z90.6	Acquired absence of other parts of urinary tract
Z90.721	Acquired absence of ovaries, unilateral
Z90.722	Acquired absence of ovaries, bilateral
Z90.79	Acquired absence of other genital organ(s)
Z90.81	Acquired absence of spleen
Z90.89	Acquired absence of other organs
Z91.15	Patient's noncompliance with renal dialysis
Z91.83	Wandering in diseases classified elsewhere
Z93.0	Tracheostomy status
Z93.1	Gastrostomy status
Z93.2	Ileostomy status
Z93.3	Colostomy status
Z93.4	Other artificial openings of gastrointestinal tract status
Z93.50	Unspecified cystostomy status
Z93.51	Cutaneous-vesicostomy status
Z93.52	Appendico-vesicostomy status

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Code	Description
Z93.59	Other cystostomy status
Z93.6	Other artificial openings of urinary tract status
Z93.8	Other artificial opening status
Z93.9	Artificial opening status, unspecified
Z95.0	Presence of cardiac pacemaker
Z95.1	Presence of aortocoronary bypass graft
Z95.5	Presence of coronary angioplasty implant and graft
Z95.810	Presence of automatic (implantable) cardiac defibrillator
Z95.818	Presence of other cardiac implants and grafts
Z95.9	Presence of cardiac and vascular implant and graft, unspecified
Z96.1	Presence of intraocular lens
Z96.21	Cochlear implant status
Z96.22	Myringotomy tube(s) status
Z96.41	Presence of insulin pump (external) (internal)
Z97.0	Presence of artificial eye
Z97.2	Presence of dental prosthetic device (complete) (partial)
Z97.3	Presence of spectacles and contact lenses
Z97.4	Presence of external hearing-aid
Z97.5	Presence of (intrauterine) contraceptive device
Z97.8	Presence of other specified devices
Z98.0	Intestinal bypass and anastomosis status
Z98.1	Arthrodesis status
Z98.2	Presence of cerebrospinal fluid drainage device
Z98.3	Post therapeutic collapse of lung status
Z98.41	Cataract extraction status, right eye
Z98.42	Cataract extraction status, left eye
Z98.49	Cataract extraction status, unspecified eye
Z98.51	Tubal ligation status
Z98.52	Vasectomy status
Z98.61	Coronary angioplasty status



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Code	Description
Z98.62	Peripheral vascular angioplasty status
Z98.810	Dental sealant status
Z98.811	Dental restoration status
Z98.818	Other dental procedure status
Z98.83	Filtering (vitreous) bleb after glaucoma surgery status
Z98.84	Bariatric surgery status
Z98.86	Personal history of breast implant removal
Z98.890	Other specified postprocedural states
Z98.891	History of uterine scar from previous surgery
Z99.2	Dependence on renal dialysis

Documentation Required

Appropriate HCPCS/CPT code (s) must be used as described.

Sources of Information

Wintrobe's Clinical Hematology, G. Richard Lee et al editors, Lea & Febiger, 9th edition, Philadelphia PA 1993.

Hematology, Clinical and Laboratory Practice, R. Bick et al editors, Mosby-Year Book, Inc., St. Louis, Missouri, 1993.

"The Polycythemia", V.C. Broudy, Medicine, Chapter 5.V. Scientific American, NY, NY 1996.

Laboratory Test Handbook, D.S. Jacobs et al, Lexi-Comp Inc, 4th edition, Cleveland OH 1996.

Cancer: Principles & Practice of Oncology, DeVita, et al., 5th ed., Phil: Lippincott-Raven, 1997.

Cecil Textbook of Medicine, Bennett, et al., 20th edition, Philadelphia: W.B. Saunders, 1996.

Williams Hematology, Beutler, et al., 5th edition, New York: McGraw-Hill, 1995.



190.16 - Partial Thromboplastin Time (PTT)

Other Names/Abbreviations

PTT

Description

Basic plasma coagulation function is readily assessed with a few simple laboratory tests: The Partial Thromboplastin Time (PTT), Prothrombin Time (PT), Thrombin Time (TT), or a quantitative fibrinogen determination. The PTT test is an in vitro laboratory test used to assess the intrinsic coagulation pathway and monitor heparin therapy.

HCPCS Codes (Alphanumeric, CPT[®] AMA)

Code	Description
85730	Thromboplastin time, partial (PTT); plasma or whole blood

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A01.00	Typhoid fever, unspecified
A01.01	Typhoid meningitis
A01.02	Typhoid fever with heart involvement
A01.03	Typhoid pneumonia
A01.04	Typhoid arthritis
A01.05	Typhoid osteomyelitis
A01.09	Typhoid fever with other complications
A01.1	Paratyphoid fever A
A01.2	Paratyphoid fever B
A01.3	Paratyphoid fever C
A01.4	Paratyphoid fever, unspecified
A02.0	Salmonella enteritis
A02.1	Salmonella sepsis
A02.20	Localized salmonella infection, unspecified



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Code	Description
A02.21	Salmonella meningitis
A02.22	Salmonella pneumonia
A02.23	Salmonella arthritis
A02.24	Salmonella osteomyelitis
A02.25	Salmonella pyelonephritis
A02.29	Salmonella with other localized infection
A02.8	Other specified salmonella infections
A02.9	Salmonella infection, unspecified
A41.9	Sepsis, unspecified organism
A91	Dengue hemorrhagic fever
A92.0	Chikungunya virus disease
A95.0	Sylvatic yellow fever
A95.1	Urban yellow fever
A95.9	Yellow fever, unspecified
A96.0	Junin hemorrhagic fever
A96.1	Machupo hemorrhagic fever
A96.8	Other arenaviral hemorrhagic fevers
A96.9	Arenaviral hemorrhagic fever, unspecified
A98.0	Crimean-Congo hemorrhagic fever
A98.1	Omsk hemorrhagic fever
A98.2	Kyasanur Forest disease
A98.5	Hemorrhagic fever with renal syndrome
A98.8	Other specified viral hemorrhagic fevers
A99	Unspecified viral hemorrhagic fever
B15.0	Hepatitis A with hepatic coma
B15.9	Hepatitis A without hepatic coma
B16.0	Acute hepatitis B with delta-agent with hepatic coma
B16.1	Acute hepatitis B with delta-agent without hepatic coma
B16.2	Acute hepatitis B without delta-agent with hepatic coma
B16.9	Acute hepatitis B without delta-agent and without hepatic coma



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Code	Description
B17.0	Acute delta-(super) infection of hepatitis B carrier
B17.10	Acute hepatitis C without hepatic coma
B17.11	Acute hepatitis C with hepatic coma
B17.2	Acute hepatitis E
B17.8	Other specified acute viral hepatitis
B17.9	Acute viral hepatitis, unspecified
B18.0	Chronic viral hepatitis B with delta-agent
B18.1	Chronic viral hepatitis B without delta-agent
B18.2	Chronic viral hepatitis C
B18.8	Other chronic viral hepatitis
B18.9	Chronic viral hepatitis, unspecified
B19.0	Unspecified viral hepatitis with hepatic coma
B19.10	Unspecified viral hepatitis B without hepatic coma
B19.11	Unspecified viral hepatitis B with hepatic coma
B19.20	Unspecified viral hepatitis C without hepatic coma
B19.21	Unspecified viral hepatitis C with hepatic coma
B19.9	Unspecified viral hepatitis without hepatic coma
B20	Human immunodeficiency virus [HIV] disease
B25.1	Cytomegaloviral hepatitis
B25.2	Cytomegaloviral pancreatitis
B27.00	Gammaherpesviral mononucleosis without complication
B27.01	Gammaherpesviral mononucleosis with polyneuropathy
B27.02	Gammaherpesviral mononucleosis with meningitis
B27.09	Gammaherpesviral mononucleosis with other complications
B27.10	Cytomegaloviral mononucleosis without complications
B27.11	Cytomegaloviral mononucleosis with polyneuropathy
B27.12	Cytomegaloviral mononucleosis with meningitis
B27.19	Cytomegaloviral mononucleosis with other complication
B27.80	Other infectious mononucleosis without complication
B27.81	Other infectious mononucleosis with polyneuropathy



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Code	Description
B27.82	Other infectious mononucleosis with meningitis
B27.89	Other infectious mononucleosis with other complication
B27.90	Infectious mononucleosis, unspecified without complication
B27.91	Infectious mononucleosis, unspecified with polyneuropathy
B27.92	Infectious mononucleosis, unspecified with meningitis
B27.99	Infectious mononucleosis, unspecified with other complication
B52.0	Plasmodium malariae malaria with nephropathy
B65.0	Schistosomiasis due to Schistosoma haematobium [urinary schistosomiasis]
B66.1	Clonorchiasis
B66.3	Fascioliasis
B75	Trichinellosis
C22.0	Liver cell carcinoma
C22.1	Intrahepatic bile duct carcinoma
C22.2	Hepatoblastoma
C22.3	Angiosarcoma of liver
C22.4	Other sarcomas of liver
C22.7	Other specified carcinomas of liver
C22.8	Malignant neoplasm of liver, primary, unspecified as to type
C22.9	Malignant neoplasm of liver, not specified as primary or secondary
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct
C88.0	Waldenstrom macroglobulinemia
C88.8	Other malignant immunoproliferative diseases
C94.40	Acute panmyelosis with myelofibrosis not having achieved remission
C94.41	Acute panmyelosis with myelofibrosis, in remission
C94.42	Acute panmyelosis with myelofibrosis, in relapse
C94.6	Myelodysplastic disease, not classified
D45	Polycythemia vera
D46.0	Refractory anemia without ring sideroblasts, so stated
D46.1	Refractory anemia with ring sideroblasts
D46.20	Refractory anemia with excess of blasts, unspecified



**Medicare National Coverage Determinations (NCD)
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Code	Description
D46.21	Refractory anemia with excess of blasts 1
D46.22	Refractory anemia with excess of blasts 2
D46.4	Refractory anemia, unspecified
D46.9	Myelodysplastic syndrome, unspecified
D46.A	Refractory cytopenia with multilineage dysplasia
D46.B	Refractory cytopenia with multilineage dysplasia and ring sideroblasts
D46.C	Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality
D46.Z	Other myelodysplastic syndromes
D47.1	Chronic myeloproliferative disease
D47.2	Monoclonal gammopathy
D47.3	Essential (hemorrhagic) thrombocythemia
D47.9	Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified
D47.Z1	Post-transplant lymphoproliferative disorder (PTLD)
*D47.Z2	*Castleman disease
D47.Z9	Other specified neoplasms of uncertain behavior of lymphoid, hematopoietic and related tissue
D49.9	Neoplasm of unspecified behavior of unspecified site
D62	Acute posthemorrhagic anemia
D65	Disseminated intravascular coagulation [defibrination syndrome]
D66	Hereditary factor VIII deficiency
D67	Hereditary factor IX deficiency
D68.0	Von Willebrand's disease
D68.1	Hereditary factor XI deficiency
D68.2	Hereditary deficiency of other clotting factors
D68.311	Acquired hemophilia
D68.312	Antiphospholipid antibody with hemorrhagic disorder
D68.318	Other hemorrhagic disorder due to intrinsic circulating anticoagulants, antibodies, or inhibitors
D68.32	Hemorrhagic disorder due to extrinsic circulating anticoagulants
D68.4	Acquired coagulation factor deficiency
D68.51	Activated protein C resistance

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Code	Description
D68.52	Prothrombin gene mutation
D68.59	Other primary thrombophilia
D68.61	Antiphospholipid syndrome
D68.62	Lupus anticoagulant syndrome
D68.8	Other specified coagulation defects
D68.9	Coagulation defect, unspecified
D69.0	Allergic purpura
D69.1	Qualitative platelet defects
D69.2	Other nonthrombocytopenic purpura
D69.3	Immune thrombocytopenic purpura
D69.41	Evans syndrome
D69.42	Congenital and hereditary thrombocytopenia purpura
D69.49	Other primary thrombocytopenia
D69.51	Posttransfusion purpura
D69.59	Other secondary thrombocytopenia
D69.6	Thrombocytopenia, unspecified
D69.8	Other specified hemorrhagic conditions
D69.9	Hemorrhagic condition, unspecified
D75.1	Secondary polycythemia
D78.01	Intraoperative hemorrhage and hematoma of the spleen complicating a procedure on the spleen
D78.02	Intraoperative hemorrhage and hematoma of the spleen complicating other procedure
D78.21	Postprocedural hemorrhage of the spleen following a procedure on the spleen
D78.22	Postprocedural hemorrhage of the spleen following other procedure
*D78.31	*Postprocedural hematoma of the spleen following a procedure on the spleen
*D78.32	*Postprocedural hematoma of the spleen following other procedure
D86.0	Sarcoidosis of lung
D86.1	Sarcoidosis of lymph nodes
D86.2	Sarcoidosis of lung with sarcoidosis of lymph nodes
D86.3	Sarcoidosis of skin
D86.81	Sarcoid meningitis

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Code	Description
D86.82	Multiple cranial nerve palsies in sarcoidosis
D86.83	Sarcoid iridocyclitis
D86.84	Sarcoid pyelonephritis
D86.85	Sarcoid myocarditis
D86.86	Sarcoid arthropathy
D86.87	Sarcoid myositis
D86.89	Sarcoidosis of other sites
D86.9	Sarcoidosis, unspecified
D89.0	Polyclonal hypergammaglobulinemia
D89.1	Cryoglobulinemia
D89.2	Hypergammaglobulinemia, unspecified
E07.89	Other specified disorders of thyroid
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.21	Type 1 diabetes mellitus with diabetic nephropathy
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.65	Type 1 diabetes mellitus with hyperglycemia
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication

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Code	Description
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.65	Type 2 diabetes mellitus with hyperglycemia
E13.21	Other specified diabetes mellitus with diabetic nephropathy
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
E13.29	Other specified diabetes mellitus with other diabetic kidney complication
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E20.1	Pseudohypoparathyroidism
E36.01	Intraoperative hemorrhage and hematoma of an endocrine system organ or structure complicating an endocrine system procedure
E36.02	Intraoperative hemorrhage and hematoma of an endocrine system organ or structure complicating other procedure
E56.1	Deficiency of vitamin K
E80.0	Hereditary erythropoietic porphyria
E80.1	Porphyria cutanea tarda
E80.20	Unspecified porphyria
E80.21	Acute intermittent (hepatic) porphyria
E80.29	Other porphyria
E83.00	Disorder of copper metabolism, unspecified
E83.01	Wilson's disease
E83.09	Other disorders of copper metabolism
E83.10	Disorder of iron metabolism, unspecified
E83.110	Hereditary hemochromatosis
E83.111	Hemochromatosis due to repeated red blood cell transfusions
E83.118	Other hemochromatosis
E83.119	Hemochromatosis, unspecified
E83.19	Other disorders of iron metabolism
E83.30	Disorder of phosphorus metabolism, unspecified
E83.31	Familial hypophosphatemia
E83.32	Hereditary vitamin D-dependent rickets (type 1) (type 2)
E83.39	Other disorders of phosphorus metabolism
E83.40	Disorders of magnesium metabolism, unspecified

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Code	Description
E83.41	Hypermagnesemia
E83.42	Hypomagnesemia
E83.49	Other disorders of magnesium metabolism
E83.50	Unspecified disorder of calcium metabolism
E83.51	Hypocalcemia
E83.52	Hypercalcemia
E83.59	Other disorders of calcium metabolism
E83.81	Hungry bone syndrome
E83.89	Other disorders of mineral metabolism
E83.9	Disorder of mineral metabolism, unspecified
E85.0	Non-neuropathic hereditary amyloidosis
E85.1	Neuropathic hereditary amyloidosis
E85.2	Hereditary amyloidosis, unspecified
E85.3	Secondary systemic amyloidosis
E85.4	Organ-limited amyloidosis
E85.8	Other amyloidosis
E85.9	Amyloidosis, unspecified
E88.09	Other disorders of plasma-protein metabolism, not elsewhere classified
*E89.810	*Postprocedural hemorrhage of an endocrine system organ or structure following an endocrine system procedure
*E89.811	*Postprocedural hemorrhage of an endocrine system organ or structure following other procedure
*E89.820	*Postprocedural hematoma of an endocrine system organ or structure following an endocrine system procedure
*E89.821	*Postprocedural hematoma of an endocrine system organ or structure following other procedure
G08	Intracranial and intraspinal phlebitis and thrombophlebitis
G45.3	Amaurosis fugax
G45.9	Transient cerebral ischemic attack, unspecified
G97.31	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating a nervous system procedure



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Code	Description
G97.32	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating other procedure
G97.51	Postprocedural hemorrhage of a nervous system organ or structure following a nervous system procedure
G97.52	Postprocedural hemorrhage of a nervous system organ or structure following other procedure
*G97.61	*Postprocedural hematoma of a nervous system organ or structure following a nervous system procedure
*G97.62	*Postprocedural hematoma of a nervous system organ or structure following other procedure
H02.89	Other specified disorders of eyelid
H05.231	Hemorrhage of right orbit
H05.232	Hemorrhage of left orbit
H05.233	Hemorrhage of bilateral orbit
H05.239	Hemorrhage of unspecified orbit
H11.30	Conjunctival hemorrhage, unspecified eye
H11.31	Conjunctival hemorrhage, right eye
H11.32	Conjunctival hemorrhage, left eye
H11.33	Conjunctival hemorrhage, bilateral
H31.301	Unspecified choroidal hemorrhage, right eye
H31.302	Unspecified choroidal hemorrhage, left eye
H31.303	Unspecified choroidal hemorrhage, bilateral
H31.309	Unspecified choroidal hemorrhage, unspecified eye
H31.311	Expulsive choroidal hemorrhage, right eye
H31.312	Expulsive choroidal hemorrhage, left eye
H31.313	Expulsive choroidal hemorrhage, bilateral
H31.319	Expulsive choroidal hemorrhage, unspecified eye
H31.321	Choroidal rupture, right eye
H31.322	Choroidal rupture, left eye
H31.323	Choroidal rupture, bilateral
H31.329	Choroidal rupture, unspecified eye
H31.411	Hemorrhagic choroidal detachment, right eye

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Code	Description
H31.412	Hemorrhagic choroidal detachment, left eye
H31.413	Hemorrhagic choroidal detachment, bilateral
H31.419	Hemorrhagic choroidal detachment, unspecified eye
H34.00	Transient retinal artery occlusion, unspecified eye
H34.01	Transient retinal artery occlusion, right eye
H34.02	Transient retinal artery occlusion, left eye
H34.03	Transient retinal artery occlusion, bilateral
H34.10	Central retinal artery occlusion, unspecified eye
H34.11	Central retinal artery occlusion, right eye
H34.12	Central retinal artery occlusion, left eye
H34.13	Central retinal artery occlusion, bilateral
H34.211	Partial retinal artery occlusion, right eye
H34.212	Partial retinal artery occlusion, left eye
H34.213	Partial retinal artery occlusion, bilateral
H34.219	Partial retinal artery occlusion, unspecified eye
H34.231	Retinal artery branch occlusion, right eye
H34.232	Retinal artery branch occlusion, left eye
H34.233	Retinal artery branch occlusion, bilateral
H34.239	Retinal artery branch occlusion, unspecified eye
H34.8110	Central retinal vein occlusion, right eye, with macular edema
H34.8111	Central retinal vein occlusion, right eye, with retinal neovascularization
H34.8112	Central retinal vein occlusion, right eye, stable
H34.8120	Central retinal vein occlusion, left eye, with macular edema
H34.8121	Central retinal vein occlusion, left eye, with retinal neovascularization
H34.8122	Central retinal vein occlusion, left eye, stable
H34.8130	Central retinal vein occlusion, bilateral, with macular edema
H34.8131	Central retinal vein occlusion, bilateral, with retinal neovascularization
H34.8132	Central retinal vein occlusion, bilateral, stable
H34.8190	Central retinal vein occlusion, unspecified eye, with macular edema
H34.8191	Central retinal vein occlusion, unspecified eye, with retinal neovascularization

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Code	Description
H34.8192	Central retinal vein occlusion, unspecified eye, stable
H34.821	Venous engorgement, right eye
H34.822	Venous engorgement, left eye
H34.823	Venous engorgement, bilateral
H34.829	Venous engorgement, unspecified eye
H34.8310	Tributary (branch) retinal vein occlusion, right eye, with macular edema
H34.8311	Tributary (branch) retinal vein occlusion, right eye, with retinal neovascularization
H34.8312	Tributary (branch) retinal vein occlusion, right eye, stable
H34.8320	Tributary (branch) retinal vein occlusion, left eye, with macular edema
H34.8321	Tributary (branch) retinal vein occlusion, left eye, with retinal neovascularization
H34.8322	Tributary (branch) retinal vein occlusion, left eye, stable
H34.8330	Tributary (branch) retinal vein occlusion, bilateral, with macular edema
H34.8331	Tributary (branch) retinal vein occlusion, bilateral, with retinal neovascularization
H34.8332	Tributary (branch) retinal vein occlusion, bilateral, stable
H34.8390	Tributary (branch) retinal vein occlusion, unspecified eye, with macular edema
H34.8391	Tributary (branch) retinal vein occlusion, unspecified eye, with retinal neovascularization
H34.8392	Tributary (branch) retinal vein occlusion, unspecified eye, stable
H34.9	Unspecified retinal vascular occlusion
H35.60	Retinal hemorrhage, unspecified eye
H35.61	Retinal hemorrhage, right eye
H35.62	Retinal hemorrhage, left eye
H35.63	Retinal hemorrhage, bilateral
H35.731	Hemorrhagic detachment of retinal pigment epithelium, right eye
H35.732	Hemorrhagic detachment of retinal pigment epithelium, left eye
H35.733	Hemorrhagic detachment of retinal pigment epithelium, bilateral
H35.739	Hemorrhagic detachment of retinal pigment epithelium, unspecified eye
H43.10	Vitreous hemorrhage, unspecified eye
H43.11	Vitreous hemorrhage, right eye
H43.12	Vitreous hemorrhage, left eye
H43.13	Vitreous hemorrhage, bilateral



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Code	Description
H44.811	Hemophthalmos, right eye
H44.812	Hemophthalmos, left eye
H44.813	Hemophthalmos, bilateral
H44.819	Hemophthalmos, unspecified eye
H47.021	Hemorrhage in optic nerve sheath, right eye
H47.022	Hemorrhage in optic nerve sheath, left eye
H47.023	Hemorrhage in optic nerve sheath, bilateral
H47.029	Hemorrhage in optic nerve sheath, unspecified eye
H53.9	Unspecified visual disturbance
H59.111	Intraoperative hemorrhage and hematoma of right eye and adnexa complicating an ophthalmic procedure
H59.112	Intraoperative hemorrhage and hematoma of left eye and adnexa complicating an ophthalmic procedure
H59.113	Intraoperative hemorrhage and hematoma of eye and adnexa complicating an ophthalmic procedure, bilateral
H59.119	Intraoperative hemorrhage and hematoma of unspecified eye and adnexa complicating an ophthalmic procedure
H59.121	Intraoperative hemorrhage and hematoma of right eye and adnexa complicating other procedure
H59.122	Intraoperative hemorrhage and hematoma of left eye and adnexa complicating other procedure
H59.123	Intraoperative hemorrhage and hematoma of eye and adnexa complicating other procedure, bilateral
H59.129	Intraoperative hemorrhage and hematoma of unspecified eye and adnexa complicating other procedure
H59.311	Postprocedural hemorrhage of right eye and adnexa following an ophthalmic procedure
H59.312	Postprocedural hemorrhage of left eye and adnexa following an ophthalmic procedure
H59.313	Postprocedural hemorrhage of eye and adnexa following an ophthalmic procedure, bilateral
H59.319	Postprocedural hemorrhage of unspecified eye and adnexa following an ophthalmic procedure
H59.321	Postprocedural hemorrhage of right eye and adnexa following other procedure
H59.322	Postprocedural hemorrhage of left eye and adnexa following other procedure
H59.323	Postprocedural hemorrhage of eye and adnexa following other procedure, bilateral

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**Medicare National Coverage Determinations (NCD)
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Code	Description
H59.329	Postprocedural hemorrhage of unspecified eye and adnexa following other procedure
*H59.331	*Postprocedural hematoma of right eye and adnexa following an ophthalmic procedure
*H59.332	*Postprocedural hematoma of left eye and adnexa following an ophthalmic procedure
*H59.333	*Postprocedural hematoma of eye and adnexa following an ophthalmic procedure, bilateral
*H59.339	*Postprocedural hematoma of unspecified eye and adnexa following an ophthalmic procedure
*H59.341	*Postprocedural hematoma of right eye and adnexa following other procedure
*H59.342	*Postprocedural hematoma of left eye and adnexa following other procedure
*H59.343	*Postprocedural hematoma of eye and adnexa following other procedure, bilateral
*H59.349	*Postprocedural hematoma of unspecified eye and adnexa following other procedure
H61.121	Hematoma of pinna, right ear
H61.122	Hematoma of pinna, left ear
H61.123	Hematoma of pinna, bilateral
H61.129	Hematoma of pinna, unspecified ear
H95.21	Intraoperative hemorrhage and hematoma of ear and mastoid process complicating a procedure on the ear and mastoid process
H95.22	Intraoperative hemorrhage and hematoma of ear and mastoid process complicating other procedure
H95.41	Postprocedural hemorrhage of ear and mastoid process following a procedure on the ear and mastoid process
H95.42	Postprocedural hemorrhage of ear and mastoid process following other procedure
*H95.51	*Postprocedural hematoma of ear and mastoid process following a procedure on the ear and mastoid process
*H95.52	*Postprocedural hematoma of ear and mastoid process following other procedure
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease
*I16.0	*Hypertensive urgency
*I16.1	*Hypertensive emergency



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Code	Description
*I16.9	*Hypertensive crisis, unspecified
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site
I21.4	Non-ST elevation (NSTEMI) myocardial infarction
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site
I23.0	Hemopericardium as current complication following acute myocardial infarction
I23.3	Rupture of cardiac wall without hemopericardium as current complication following acute myocardial infarction
I23.6	Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction
I23.7	Postinfarction angina
I23.8	Other current complications following acute myocardial infarction
I31.2	Hemopericardium, not elsewhere classified
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation
I48.2	Chronic atrial fibrillation
I48.91	Unspecified atrial fibrillation
I49.9	Cardiac arrhythmia, unspecified
I50.20	Unspecified systolic (congestive) heart failure
I50.21	Acute systolic (congestive) heart failure

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Code	Description
I50.22	Chronic systolic (congestive) heart failure
I50.23	Acute on chronic systolic (congestive) heart failure
I50.30	Unspecified diastolic (congestive) heart failure
I50.31	Acute diastolic (congestive) heart failure
I50.32	Chronic diastolic (congestive) heart failure
I50.33	Acute on chronic diastolic (congestive) heart failure
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.9	Heart failure, unspecified
I60.00	Nontraumatic subarachnoid hemorrhage from unspecified carotid siphon and bifurcation
I60.01	Nontraumatic subarachnoid hemorrhage from right carotid siphon and bifurcation
I60.02	Nontraumatic subarachnoid hemorrhage from left carotid siphon and bifurcation
I60.10	Nontraumatic subarachnoid hemorrhage from unspecified middle cerebral artery
I60.11	Nontraumatic subarachnoid hemorrhage from right middle cerebral artery
I60.12	Nontraumatic subarachnoid hemorrhage from left middle cerebral artery
*I60.2	*Nontraumatic subarachnoid hemorrhage from anterior communicating artery
I60.30	Nontraumatic subarachnoid hemorrhage from unspecified posterior communicating artery
I60.31	Nontraumatic subarachnoid hemorrhage from right posterior communicating artery
I60.32	Nontraumatic subarachnoid hemorrhage from left posterior communicating artery
I60.4	Nontraumatic subarachnoid hemorrhage from basilar artery
I60.50	Nontraumatic subarachnoid hemorrhage from unspecified vertebral artery
I60.51	Nontraumatic subarachnoid hemorrhage from right vertebral artery
I60.52	Nontraumatic subarachnoid hemorrhage from left vertebral artery
I60.6	Nontraumatic subarachnoid hemorrhage from other intracranial arteries
I60.7	Nontraumatic subarachnoid hemorrhage from unspecified intracranial artery
I60.8	Other nontraumatic subarachnoid hemorrhage
I60.9	Nontraumatic subarachnoid hemorrhage, unspecified
I61.0	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical



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Code	Description
I61.1	Nontraumatic intracerebral hemorrhage in hemisphere, cortical
I61.2	Nontraumatic intracerebral hemorrhage in hemisphere, unspecified
I61.3	Nontraumatic intracerebral hemorrhage in brain stem
I61.4	Nontraumatic intracerebral hemorrhage in cerebellum
I61.5	Nontraumatic intracerebral hemorrhage, intraventricular
I61.6	Nontraumatic intracerebral hemorrhage, multiple localized
I61.8	Other nontraumatic intracerebral hemorrhage
I61.9	Nontraumatic intracerebral hemorrhage, unspecified
I62.00	Nontraumatic subdural hemorrhage, unspecified
I62.01	Nontraumatic acute subdural hemorrhage
I62.02	Nontraumatic subacute subdural hemorrhage
I62.03	Nontraumatic chronic subdural hemorrhage
I62.1	Nontraumatic extradural hemorrhage
I62.9	Nontraumatic intracranial hemorrhage, unspecified
I63.00	Cerebral infarction due to thrombosis of unspecified precerebral artery
I63.011	Cerebral infarction due to thrombosis of right vertebral artery
I63.012	Cerebral infarction due to thrombosis of left vertebral artery
*I63.013	*Cerebral infarction due to thrombosis of bilateral vertebral arteries
I63.019	Cerebral infarction due to thrombosis of unspecified vertebral artery
I63.02	Cerebral infarction due to thrombosis of basilar artery
I63.031	Cerebral infarction due to thrombosis of right carotid artery
I63.032	Cerebral infarction due to thrombosis of left carotid artery
*I63.033	*Cerebral infarction due to thrombosis of bilateral carotid arteries
I63.039	Cerebral infarction due to thrombosis of unspecified carotid artery
I63.09	Cerebral infarction due to thrombosis of other precerebral artery
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery
I63.111	Cerebral infarction due to embolism of right vertebral artery
I63.112	Cerebral infarction due to embolism of left vertebral artery
*I63.113	*Cerebral infarction due to embolism of bilateral vertebral arteries
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery



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Code	Description
I63.12	Cerebral infarction due to embolism of basilar artery
I63.131	Cerebral infarction due to embolism of right carotid artery
I63.132	Cerebral infarction due to embolism of left carotid artery
*I63.133	*Cerebral infarction due to embolism of bilateral carotid arteries
I63.139	Cerebral infarction due to embolism of unspecified carotid artery
I63.19	Cerebral infarction due to embolism of other precerebral artery
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries
I63.211	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral arteries
I63.212	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral arteries
*I63.213	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries
I63.219	Cerebral infarction due to unspecified occlusion or stenosis of unspecified vertebral arteries
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar arteries
I63.231	Cerebral infarction due to unspecified occlusion or stenosis of right carotid arteries
I63.232	Cerebral infarction due to unspecified occlusion or stenosis of left carotid arteries
*I63.233	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid arteries
I63.239	Cerebral infarction due to unspecified occlusion or stenosis of unspecified carotid arteries
I63.29	Cerebral infarction due to unspecified occlusion or stenosis of other precerebral arteries
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery
I63.311	Cerebral infarction due to thrombosis of right middle cerebral artery
I63.312	Cerebral infarction due to thrombosis of left middle cerebral artery
*I63.313	*Cerebral infarction due to thrombosis of bilateral middle cerebral arteries
I63.319	Cerebral infarction due to thrombosis of unspecified middle cerebral artery
I63.321	Cerebral infarction due to thrombosis of right anterior cerebral artery
I63.322	Cerebral infarction due to thrombosis of left anterior cerebral artery
*I63.323	*Cerebral infarction due to thrombosis of bilateral anterior arteries
I63.329	Cerebral infarction due to thrombosis of unspecified anterior cerebral artery
I63.331	Cerebral infarction due to thrombosis of right posterior cerebral artery
I63.332	Cerebral infarction due to thrombosis of left posterior cerebral artery



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Code	Description
*I63.333	*Cerebral infarction to thrombosis of bilateral posterior arteries
I63.339	Cerebral infarction due to thrombosis of unspecified posterior cerebral artery
I63.341	Cerebral infarction due to thrombosis of right cerebellar artery
I63.342	Cerebral infarction due to thrombosis of left cerebellar artery
*I63.343	*Cerebral infarction to thrombosis of bilateral cerebellar arteries
I63.349	Cerebral infarction due to thrombosis of unspecified cerebellar artery
I63.39	Cerebral infarction due to thrombosis of other cerebral artery
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery
I63.411	Cerebral infarction due to embolism of right middle cerebral artery
I63.412	Cerebral infarction due to embolism of left middle cerebral artery
*I63.413	*Cerebral infarction due to embolism of bilateral middle cerebral arteries
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery
*I63.423	*Cerebral infarction due to embolism of bilateral anterior cerebral arteries
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery
*I63.433	*Cerebral infarction due to embolism of bilateral posterior cerebral arteries
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery
I63.441	Cerebral infarction due to embolism of right cerebellar artery
I63.442	Cerebral infarction due to embolism of left cerebellar artery
*I63.443	*Cerebral infarction due to embolism of bilateral cerebellar arteries
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery
I63.49	Cerebral infarction due to embolism of other cerebral artery
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery
I63.511	Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery
I63.512	Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery
*I63.513	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle arteries



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Code	Description
I63.519	Cerebral infarction due to unspecified occlusion or stenosis of unspecified middle cerebral artery
I63.521	Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery
I63.522	Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery
*I63.523	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior arteries
I63.529	Cerebral infarction due to unspecified occlusion or stenosis of unspecified anterior cerebral artery
I63.531	Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery
I63.532	Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery
*I63.533	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior arteries
I63.539	Cerebral infarction due to unspecified occlusion or stenosis of unspecified posterior cerebral artery
I63.541	Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery
I63.542	Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery
*I63.543	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries
I63.549	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebellar artery
I63.59	Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery
I63.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic
I63.8	Other cerebral infarction
I63.9	Cerebral infarction, unspecified
I65.01	Occlusion and stenosis of right vertebral artery
I65.02	Occlusion and stenosis of left vertebral artery
I65.03	Occlusion and stenosis of bilateral vertebral arteries
I65.09	Occlusion and stenosis of unspecified vertebral artery
I65.1	Occlusion and stenosis of basilar artery
I65.21	Occlusion and stenosis of right carotid artery
I65.22	Occlusion and stenosis of left carotid artery
I65.23	Occlusion and stenosis of bilateral carotid arteries
I65.29	Occlusion and stenosis of unspecified carotid artery



**Medicare National Coverage Determinations (NCD)
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Code	Description
I65.8	Occlusion and stenosis of other precerebral arteries
I65.9	Occlusion and stenosis of unspecified precerebral artery
I66.01	Occlusion and stenosis of right middle cerebral artery
I66.02	Occlusion and stenosis of left middle cerebral artery
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries
I66.09	Occlusion and stenosis of unspecified middle cerebral artery
I66.11	Occlusion and stenosis of right anterior cerebral artery
I66.12	Occlusion and stenosis of left anterior cerebral artery
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery
I66.21	Occlusion and stenosis of right posterior cerebral artery
I66.22	Occlusion and stenosis of left posterior cerebral artery
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery
I66.3	Occlusion and stenosis of cerebellar arteries
I66.8	Occlusion and stenosis of other cerebral arteries
I66.9	Occlusion and stenosis of unspecified cerebral artery
I67.841	Reversible cerebrovascular vasoconstriction syndrome
I67.848	Other cerebrovascular vasospasm and vasoconstriction
I70.361	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, right leg
I70.362	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, left leg
I70.363	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, bilateral legs
I70.368	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, other extremity
I70.369	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.461	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, right leg
I70.462	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, left leg



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Code	Description
I70.463	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, bilateral legs
I70.468	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, other extremity
I70.469	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.561	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, right leg
I70.562	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, left leg
I70.563	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, bilateral legs
I70.568	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, other extremity
I70.569	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.661	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, right leg
I70.662	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, left leg
I70.663	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, bilateral legs
I70.668	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, other extremity
I70.669	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.761	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, right leg
I70.762	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, left leg
I70.763	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, bilateral legs
I70.768	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, other extremity
I70.769	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, unspecified extremity
I73.01	Raynaud's syndrome with gangrene
I74.01	Saddle embolus of abdominal aorta
I74.09	Other arterial embolism and thrombosis of abdominal aorta



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Code	Description
I74.10	Embolism and thrombosis of unspecified parts of aorta
I74.11	Embolism and thrombosis of thoracic aorta
I74.19	Embolism and thrombosis of other parts of aorta
I74.2	Embolism and thrombosis of arteries of the upper extremities
I74.3	Embolism and thrombosis of arteries of the lower extremities
I74.4	Embolism and thrombosis of arteries of extremities, unspecified
I74.5	Embolism and thrombosis of iliac artery
I74.8	Embolism and thrombosis of other arteries
I74.9	Embolism and thrombosis of unspecified artery
I77.2	Rupture of artery
I78.0	Hereditary hemorrhagic telangiectasia
I80.00	Phlebitis and thrombophlebitis of superficial vessels of unspecified lower extremity
I80.01	Phlebitis and thrombophlebitis of superficial vessels of right lower extremity
I80.02	Phlebitis and thrombophlebitis of superficial vessels of left lower extremity
I80.03	Phlebitis and thrombophlebitis of superficial vessels of lower extremities, bilateral
I80.10	Phlebitis and thrombophlebitis of unspecified femoral vein
I80.11	Phlebitis and thrombophlebitis of right femoral vein
I80.12	Phlebitis and thrombophlebitis of left femoral vein
I80.13	Phlebitis and thrombophlebitis of femoral vein, bilateral
I80.201	Phlebitis and thrombophlebitis of unspecified deep vessels of right lower extremity
I80.202	Phlebitis and thrombophlebitis of unspecified deep vessels of left lower extremity
I80.203	Phlebitis and thrombophlebitis of unspecified deep vessels of lower extremities, bilateral
I80.209	Phlebitis and thrombophlebitis of unspecified deep vessels of unspecified lower extremity
I80.211	Phlebitis and thrombophlebitis of right iliac vein
I80.212	Phlebitis and thrombophlebitis of left iliac vein
I80.213	Phlebitis and thrombophlebitis of iliac vein, bilateral
I80.219	Phlebitis and thrombophlebitis of unspecified iliac vein
I80.221	Phlebitis and thrombophlebitis of right popliteal vein
I80.222	Phlebitis and thrombophlebitis of left popliteal vein
I80.223	Phlebitis and thrombophlebitis of popliteal vein, bilateral

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Code	Description
I80.229	Phlebitis and thrombophlebitis of unspecified popliteal vein
I80.231	Phlebitis and thrombophlebitis of right tibial vein
I80.232	Phlebitis and thrombophlebitis of left tibial vein
I80.233	Phlebitis and thrombophlebitis of tibial vein, bilateral
I80.239	Phlebitis and thrombophlebitis of unspecified tibial vein
I80.291	Phlebitis and thrombophlebitis of other deep vessels of right lower extremity
I80.292	Phlebitis and thrombophlebitis of other deep vessels of left lower extremity
I80.293	Phlebitis and thrombophlebitis of other deep vessels of lower extremity, bilateral
I80.299	Phlebitis and thrombophlebitis of other deep vessels of unspecified lower extremity
I80.3	Phlebitis and thrombophlebitis of lower extremities, unspecified
I80.8	Phlebitis and thrombophlebitis of other sites
I80.9	Phlebitis and thrombophlebitis of unspecified site
I82.0	Budd-Chiari syndrome
I82.1	Thrombophlebitis migrans
I82.210	Acute embolism and thrombosis of superior vena cava
I82.211	Chronic embolism and thrombosis of superior vena cava
I82.220	Acute embolism and thrombosis of inferior vena cava
I82.221	Chronic embolism and thrombosis of inferior vena cava
I82.290	Acute embolism and thrombosis of other thoracic veins
I82.291	Chronic embolism and thrombosis of other thoracic veins
I82.3	Embolism and thrombosis of renal vein
I82.401	Acute embolism and thrombosis of unspecified deep veins of right lower extremity
I82.402	Acute embolism and thrombosis of unspecified deep veins of left lower extremity
I82.403	Acute embolism and thrombosis of unspecified deep veins of lower extremity, bilateral
I82.409	Acute embolism and thrombosis of unspecified deep veins of unspecified lower extremity
I82.411	Acute embolism and thrombosis of right femoral vein
I82.412	Acute embolism and thrombosis of left femoral vein
I82.413	Acute embolism and thrombosis of femoral vein, bilateral
I82.419	Acute embolism and thrombosis of unspecified femoral vein
I82.421	Acute embolism and thrombosis of right iliac vein

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Code	Description
I82.422	Acute embolism and thrombosis of left iliac vein
I82.423	Acute embolism and thrombosis of iliac vein, bilateral
I82.429	Acute embolism and thrombosis of unspecified iliac vein
I82.431	Acute embolism and thrombosis of right popliteal vein
I82.432	Acute embolism and thrombosis of left popliteal vein
I82.433	Acute embolism and thrombosis of popliteal vein, bilateral
I82.439	Acute embolism and thrombosis of unspecified popliteal vein
I82.441	Acute embolism and thrombosis of right tibial vein
I82.442	Acute embolism and thrombosis of left tibial vein
I82.443	Acute embolism and thrombosis of tibial vein, bilateral
I82.449	Acute embolism and thrombosis of unspecified tibial vein
I82.491	Acute embolism and thrombosis of other specified deep vein of right lower extremity
I82.492	Acute embolism and thrombosis of other specified deep vein of left lower extremity
I82.493	Acute embolism and thrombosis of other specified deep vein of lower extremity, bilateral
I82.499	Acute embolism and thrombosis of other specified deep vein of unspecified lower extremity
I82.4Y1	Acute embolism and thrombosis of unspecified deep veins of right proximal lower extremity
I82.4Y2	Acute embolism and thrombosis of unspecified deep veins of left proximal lower extremity
I82.4Y3	Acute embolism and thrombosis of unspecified deep veins of proximal lower extremity, bilateral
I82.4Y9	Acute embolism and thrombosis of unspecified deep veins of unspecified proximal lower extremity
I82.4Z1	Acute embolism and thrombosis of unspecified deep veins of right distal lower extremity
I82.4Z2	Acute embolism and thrombosis of unspecified deep veins of left distal lower extremity
I82.4Z3	Acute embolism and thrombosis of unspecified deep veins of distal lower extremity, bilateral
I82.4Z9	Acute embolism and thrombosis of unspecified deep veins of unspecified distal lower extremity
I82.501	Chronic embolism and thrombosis of unspecified deep veins of right lower extremity
I82.502	Chronic embolism and thrombosis of unspecified deep veins of left lower extremity
I82.503	Chronic embolism and thrombosis of unspecified deep veins of lower extremity, bilateral
I82.509	Chronic embolism and thrombosis of unspecified deep veins of unspecified lower extremity
I82.511	Chronic embolism and thrombosis of right femoral vein

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Code	Description
I82.512	Chronic embolism and thrombosis of left femoral vein
I82.513	Chronic embolism and thrombosis of femoral vein, bilateral
I82.519	Chronic embolism and thrombosis of unspecified femoral vein
I82.521	Chronic embolism and thrombosis of right iliac vein
I82.522	Chronic embolism and thrombosis of left iliac vein
I82.523	Chronic embolism and thrombosis of iliac vein, bilateral
I82.529	Chronic embolism and thrombosis of unspecified iliac vein
I82.531	Chronic embolism and thrombosis of right popliteal vein
I82.532	Chronic embolism and thrombosis of left popliteal vein
I82.533	Chronic embolism and thrombosis of popliteal vein, bilateral
I82.539	Chronic embolism and thrombosis of unspecified popliteal vein
I82.541	Chronic embolism and thrombosis of right tibial vein
I82.542	Chronic embolism and thrombosis of left tibial vein
I82.543	Chronic embolism and thrombosis of tibial vein, bilateral
I82.549	Chronic embolism and thrombosis of unspecified tibial vein
I82.591	Chronic embolism and thrombosis of other specified deep vein of right lower extremity
I82.592	Chronic embolism and thrombosis of other specified deep vein of left lower extremity
I82.593	Chronic embolism and thrombosis of other specified deep vein of lower extremity, bilateral
I82.599	Chronic embolism and thrombosis of other specified deep vein of unspecified lower extremity
I82.5Y1	Chronic embolism and thrombosis of unspecified deep veins of right proximal lower extremity
I82.5Y2	Chronic embolism and thrombosis of unspecified deep veins of left proximal lower extremity
I82.5Y3	Chronic embolism and thrombosis of unspecified deep veins of proximal lower extremity, bilateral
I82.5Y9	Chronic embolism and thrombosis of unspecified deep veins of unspecified proximal lower extremity
I82.5Z1	Chronic embolism and thrombosis of unspecified deep veins of right distal lower extremity
I82.5Z2	Chronic embolism and thrombosis of unspecified deep veins of left distal lower extremity
I82.5Z3	Chronic embolism and thrombosis of unspecified deep veins of distal lower extremity, bilateral



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Code	Description
I82.5Z9	Chronic embolism and thrombosis of unspecified deep veins of unspecified distal lower extremity
I82.601	Acute embolism and thrombosis of unspecified veins of right upper extremity
I82.602	Acute embolism and thrombosis of unspecified veins of left upper extremity
I82.603	Acute embolism and thrombosis of unspecified veins of upper extremity, bilateral
I82.609	Acute embolism and thrombosis of unspecified veins of unspecified upper extremity
I82.611	Acute embolism and thrombosis of superficial veins of right upper extremity
I82.612	Acute embolism and thrombosis of superficial veins of left upper extremity
I82.613	Acute embolism and thrombosis of superficial veins of upper extremity, bilateral
I82.619	Acute embolism and thrombosis of superficial veins of unspecified upper extremity
I82.621	Acute embolism and thrombosis of deep veins of right upper extremity
I82.622	Acute embolism and thrombosis of deep veins of left upper extremity
I82.623	Acute embolism and thrombosis of deep veins of upper extremity, bilateral
I82.629	Acute embolism and thrombosis of deep veins of unspecified upper extremity
I82.701	Chronic embolism and thrombosis of unspecified veins of right upper extremity
I82.702	Chronic embolism and thrombosis of unspecified veins of left upper extremity
I82.703	Chronic embolism and thrombosis of unspecified veins of upper extremity, bilateral
I82.709	Chronic embolism and thrombosis of unspecified veins of unspecified upper extremity
I82.711	Chronic embolism and thrombosis of superficial veins of right upper extremity
I82.712	Chronic embolism and thrombosis of superficial veins of left upper extremity
I82.713	Chronic embolism and thrombosis of superficial veins of upper extremity, bilateral
I82.719	Chronic embolism and thrombosis of superficial veins of unspecified upper extremity
I82.721	Chronic embolism and thrombosis of deep veins of right upper extremity
I82.722	Chronic embolism and thrombosis of deep veins of left upper extremity
I82.723	Chronic embolism and thrombosis of deep veins of upper extremity, bilateral
I82.729	Chronic embolism and thrombosis of deep veins of unspecified upper extremity
I82.811	Embolism and thrombosis of superficial veins of right lower extremities
I82.812	Embolism and thrombosis of superficial veins of left lower extremities
I82.813	Embolism and thrombosis of superficial veins of lower extremities, bilateral
I82.819	Embolism and thrombosis of superficial veins of unspecified lower extremities
I82.890	Acute embolism and thrombosis of other specified veins

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Code	Description
I82.891	Chronic embolism and thrombosis of other specified veins
I82.90	Acute embolism and thrombosis of unspecified vein
I82.91	Chronic embolism and thrombosis of unspecified vein
I82.A11	Acute embolism and thrombosis of right axillary vein
I82.A12	Acute embolism and thrombosis of left axillary vein
I82.A13	Acute embolism and thrombosis of axillary vein, bilateral
I82.A19	Acute embolism and thrombosis of unspecified axillary vein
I82.A21	Chronic embolism and thrombosis of right axillary vein
I82.A22	Chronic embolism and thrombosis of left axillary vein
I82.A23	Chronic embolism and thrombosis of axillary vein, bilateral
I82.A29	Chronic embolism and thrombosis of unspecified axillary vein
I82.B11	Acute embolism and thrombosis of right subclavian vein
I82.B12	Acute embolism and thrombosis of left subclavian vein
I82.B13	Acute embolism and thrombosis of subclavian vein, bilateral
I82.B19	Acute embolism and thrombosis of unspecified subclavian vein
I82.B21	Chronic embolism and thrombosis of right subclavian vein
I82.B22	Chronic embolism and thrombosis of left subclavian vein
I82.B23	Chronic embolism and thrombosis of subclavian vein, bilateral
I82.B29	Chronic embolism and thrombosis of unspecified subclavian vein
I82.C11	Acute embolism and thrombosis of right internal jugular vein
I82.C12	Acute embolism and thrombosis of left internal jugular vein
I82.C13	Acute embolism and thrombosis of internal jugular vein, bilateral
I82.C19	Acute embolism and thrombosis of unspecified internal jugular vein
I82.C21	Chronic embolism and thrombosis of right internal jugular vein
I82.C22	Chronic embolism and thrombosis of left internal jugular vein
I82.C23	Chronic embolism and thrombosis of internal jugular vein, bilateral
I82.C29	Chronic embolism and thrombosis of unspecified internal jugular vein
I85.00	Esophageal varices without bleeding
I85.01	Esophageal varices with bleeding
I86.4	Gastric varices



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Code	Description
I86.8	Varicose veins of other specified sites
I87.8	Other specified disorders of veins
I96	Gangrene, not elsewhere classified
I97.410	Intraoperative hemorrhage and hematoma of a circulatory system organ or structure complicating a cardiac catheterization
I97.411	Intraoperative hemorrhage and hematoma of a circulatory system organ or structure complicating a cardiac bypass
I97.418	Intraoperative hemorrhage and hematoma of a circulatory system organ or structure complicating other circulatory system procedure
I97.42	Intraoperative hemorrhage and hematoma of a circulatory system organ or structure complicating other procedure
I97.610	Postprocedural hemorrhage of a circulatory system organ or structure following a cardiac catheterization
I97.611	Postprocedural hemorrhage of a circulatory system organ or structure following cardiac bypass
I97.618	Postprocedural hemorrhage of a circulatory system organ or structure following other circulatory system procedure
I97.620	Postprocedural hemorrhage of a circulatory system organ or structure following other procedure
I97.621	Postprocedural hematoma of a circulatory system organ or structure following other procedure
*I97.630	*Postprocedural hematoma of a circulatory system organ or structure following a cardiac catheterization
*I97.631	*Postprocedural hematoma of a circulatory system organ or structure following cardiac bypass
*I97.638	*Postprocedural hematoma of a circulatory system organ or structure following other circulatory system procedure
I97.810	Intraoperative cerebrovascular infarction during cardiac surgery
I97.811	Intraoperative cerebrovascular infarction during other surgery
I97.820	Postprocedural cerebrovascular infarction following cardiac surgery
I97.821	Postprocedural cerebrovascular infarction following other surgery
I99.8	Other disorder of circulatory system
J95.61	Intraoperative hemorrhage and hematoma of a respiratory system organ or structure complicating a respiratory system procedure



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Code	Description
J95.62	Intraoperative hemorrhage and hematoma of a respiratory system organ or structure complicating other procedure
J95.830	Postprocedural hemorrhage of a respiratory system organ or structure following a respiratory system procedure
J95.831	Postprocedural hemorrhage of a respiratory system organ or structure following other procedure
*J95.860	*Postprocedural hematoma of a respiratory system organ or structure following a respiratory system procedure
*J95.861	*Postprocedural hematoma of a respiratory system organ or structure following other procedure
K22.6	Gastro-esophageal laceration-hemorrhage syndrome
K22.8	Other specified diseases of esophagus
K25.0	Acute gastric ulcer with hemorrhage
K25.1	Acute gastric ulcer with perforation
K25.2	Acute gastric ulcer with both hemorrhage and perforation
K25.3	Acute gastric ulcer without hemorrhage or perforation
K25.4	Chronic or unspecified gastric ulcer with hemorrhage
K25.5	Chronic or unspecified gastric ulcer with perforation
K25.6	Chronic or unspecified gastric ulcer with both hemorrhage and perforation
K25.7	Chronic gastric ulcer without hemorrhage or perforation
K25.9	Gastric ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K26.0	Acute duodenal ulcer with hemorrhage
K26.1	Acute duodenal ulcer with perforation
K26.2	Acute duodenal ulcer with both hemorrhage and perforation
K26.3	Acute duodenal ulcer without hemorrhage or perforation
K26.4	Chronic or unspecified duodenal ulcer with hemorrhage
K26.5	Chronic or unspecified duodenal ulcer with perforation
K26.6	Chronic or unspecified duodenal ulcer with both hemorrhage and perforation
K26.7	Chronic duodenal ulcer without hemorrhage or perforation
K26.9	Duodenal ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K27.0	Acute peptic ulcer, site unspecified, with hemorrhage
K27.1	Acute peptic ulcer, site unspecified, with perforation

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Code	Description
K27.2	Acute peptic ulcer, site unspecified, with both hemorrhage and perforation
K27.3	Acute peptic ulcer, site unspecified, without hemorrhage or perforation
K27.4	Chronic or unspecified peptic ulcer, site unspecified, with hemorrhage
K27.5	Chronic or unspecified peptic ulcer, site unspecified, with perforation
K27.6	Chronic or unspecified peptic ulcer, site unspecified, with both hemorrhage and perforation
K27.7	Chronic peptic ulcer, site unspecified, without hemorrhage or perforation
K27.9	Peptic ulcer, site unspecified, unspecified as acute or chronic, without hemorrhage or perforation
K28.0	Acute gastrojejunal ulcer with hemorrhage
K28.1	Acute gastrojejunal ulcer with perforation
K28.2	Acute gastrojejunal ulcer with both hemorrhage and perforation
K28.3	Acute gastrojejunal ulcer without hemorrhage or perforation
K28.4	Chronic or unspecified gastrojejunal ulcer with hemorrhage
K28.5	Chronic or unspecified gastrojejunal ulcer with perforation
K28.6	Chronic or unspecified gastrojejunal ulcer with both hemorrhage and perforation
K28.7	Chronic gastrojejunal ulcer without hemorrhage or perforation
K28.9	Gastrojejunal ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K29.00	Acute gastritis without bleeding
K29.01	Acute gastritis with bleeding
K29.20	Alcoholic gastritis without bleeding
K29.21	Alcoholic gastritis with bleeding
K29.30	Chronic superficial gastritis without bleeding
K29.31	Chronic superficial gastritis with bleeding
K29.40	Chronic atrophic gastritis without bleeding
K29.41	Chronic atrophic gastritis with bleeding
K29.50	Unspecified chronic gastritis without bleeding
K29.51	Unspecified chronic gastritis with bleeding
K29.60	Other gastritis without bleeding
K29.61	Other gastritis with bleeding
K29.70	Gastritis, unspecified, without bleeding
K29.71	Gastritis, unspecified, with bleeding

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Code	Description
K29.80	Duodenitis without bleeding
K29.81	Duodenitis with bleeding
K29.90	Gastroduodenitis, unspecified, without bleeding
K29.91	Gastroduodenitis, unspecified, with bleeding
K31.811	Angiodysplasia of stomach and duodenum with bleeding
K31.82	Dieulafoy lesion (hemorrhagic) of stomach and duodenum
K51.00	Ulcerative (chronic) pancolitis without complications
K51.011	Ulcerative (chronic) pancolitis with rectal bleeding
K51.012	Ulcerative (chronic) pancolitis with intestinal obstruction
K51.013	Ulcerative (chronic) pancolitis with fistula
K51.014	Ulcerative (chronic) pancolitis with abscess
K51.018	Ulcerative (chronic) pancolitis with other complication
K51.019	Ulcerative (chronic) pancolitis with unspecified complications
K51.20	Ulcerative (chronic) proctitis without complications
K51.211	Ulcerative (chronic) proctitis with rectal bleeding
K51.212	Ulcerative (chronic) proctitis with intestinal obstruction
K51.213	Ulcerative (chronic) proctitis with fistula
K51.214	Ulcerative (chronic) proctitis with abscess
K51.218	Ulcerative (chronic) proctitis with other complication
K51.219	Ulcerative (chronic) proctitis with unspecified complications
K51.30	Ulcerative (chronic) rectosigmoiditis without complications
K51.311	Ulcerative (chronic) rectosigmoiditis with rectal bleeding
K51.312	Ulcerative (chronic) rectosigmoiditis with intestinal obstruction
K51.313	Ulcerative (chronic) rectosigmoiditis with fistula
K51.314	Ulcerative (chronic) rectosigmoiditis with abscess
K51.318	Ulcerative (chronic) rectosigmoiditis with other complication
K51.319	Ulcerative (chronic) rectosigmoiditis with unspecified complications
K51.40	Inflammatory polyps of colon without complications
K51.411	Inflammatory polyps of colon with rectal bleeding
K51.412	Inflammatory polyps of colon with intestinal obstruction

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Code	Description
K51.413	Inflammatory polyps of colon with fistula
K51.414	Inflammatory polyps of colon with abscess
K51.418	Inflammatory polyps of colon with other complication
K51.419	Inflammatory polyps of colon with unspecified complications
K51.50	Left sided colitis without complications
K51.511	Left sided colitis with rectal bleeding
K51.512	Left sided colitis with intestinal obstruction
K51.513	Left sided colitis with fistula
K51.514	Left sided colitis with abscess
K51.518	Left sided colitis with other complication
K51.519	Left sided colitis with unspecified complications
K51.80	Other ulcerative colitis without complications
K51.811	Other ulcerative colitis with rectal bleeding
K51.812	Other ulcerative colitis with intestinal obstruction
K51.813	Other ulcerative colitis with fistula
K51.814	Other ulcerative colitis with abscess
K51.818	Other ulcerative colitis with other complication
K51.819	Other ulcerative colitis with unspecified complications
K51.90	Ulcerative colitis, unspecified, without complications
K51.911	Ulcerative colitis, unspecified with rectal bleeding
K51.912	Ulcerative colitis, unspecified with intestinal obstruction
K51.913	Ulcerative colitis, unspecified with fistula
K51.914	Ulcerative colitis, unspecified with abscess
K51.918	Ulcerative colitis, unspecified with other complication
K51.919	Ulcerative colitis, unspecified with unspecified complications
K52.81	Eosinophilic gastritis or gastroenteritis
K55.011	Focal (segmental) acute (reversible) ischemia of small intestine
K55.012	Diffuse acute (reversible) ischemia of small intestine
K55.019	Acute (reversible) ischemia of small intestine, extent unspecified
K55.021	Focal (segmental) acute infarction of small intestine



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Code	Description
K55.022	Diffuse acute infarction of small intestine
K55.029	Acute infarction of small intestine, extent unspecified
K55.031	Focal (segmental) acute (reversible) ischemia of large intestine
K55.032	Diffuse acute (reversible) ischemia of large intestine
K55.039	Acute (reversible) ischemia of large intestine, extent unspecified
K55.041	Focal (segmental) acute infarction of large intestine
K55.042	Diffuse acute infarction of large intestine
K55.049	Acute infarction of large intestine, extent unspecified
K55.051	Focal (segmental) acute (reversible) ischemia of intestine, part unspecified
K55.052	Diffuse acute (reversible) ischemia of intestine, part unspecified
K55.059	Acute (reversible) ischemia of intestine, part and extent unspecified
K55.061	Focal (segmental) acute infarction of intestine, part unspecified
K55.062	Diffuse acute infarction of intestine, part unspecified
K55.069	Acute infarction of intestine, part and extent unspecified
K55.1	Chronic vascular disorders of intestine
*K55.30	*Necrotizing enterocolitis, unspecified
*K55.31	*Stage 1 necrotizing enterocolitis
*K55.32	*Stage 2 necrotizing enterocolitis
*K55.33	*Stage 3 necrotizing enterocolitis
K55.8	Other vascular disorders of intestine
K55.9	Vascular disorder of intestine, unspecified
K57.01	Diverticulitis of small intestine with perforation and abscess with bleeding
K57.11	Diverticulosis of small intestine without perforation or abscess with bleeding
K57.13	Diverticulitis of small intestine without perforation or abscess with bleeding
K57.21	Diverticulitis of large intestine with perforation and abscess with bleeding
K57.31	Diverticulosis of large intestine without perforation or abscess with bleeding
K57.33	Diverticulitis of large intestine without perforation or abscess with bleeding
K57.41	Diverticulitis of both small and large intestine with perforation and abscess with bleeding
K57.51	Diverticulosis of both small and large intestine without perforation or abscess with bleeding
K57.53	Diverticulitis of both small and large intestine without perforation or abscess with bleeding



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Code	Description
K57.81	Diverticulitis of intestine, part unspecified, with perforation and abscess with bleeding
K57.91	Diverticulosis of intestine, part unspecified, without perforation or abscess with bleeding
K57.93	Diverticulitis of intestine, part unspecified, without perforation or abscess with bleeding
*K59.31	*Toxic megacolon
K62.5	Hemorrhage of anus and rectum
K66.1	Hemoperitoneum
K70.0	Alcoholic fatty liver
K70.10	Alcoholic hepatitis without ascites
K70.11	Alcoholic hepatitis with ascites
K70.2	Alcoholic fibrosis and sclerosis of liver
K70.30	Alcoholic cirrhosis of liver without ascites
K70.31	Alcoholic cirrhosis of liver with ascites
K70.40	Alcoholic hepatic failure without coma
K70.41	Alcoholic hepatic failure with coma
K70.9	Alcoholic liver disease, unspecified
K71.0	Toxic liver disease with cholestasis
K71.10	Toxic liver disease with hepatic necrosis, without coma
K71.11	Toxic liver disease with hepatic necrosis, with coma
K71.2	Toxic liver disease with acute hepatitis
K71.3	Toxic liver disease with chronic persistent hepatitis
K71.4	Toxic liver disease with chronic lobular hepatitis
K71.50	Toxic liver disease with chronic active hepatitis without ascites
K71.51	Toxic liver disease with chronic active hepatitis with ascites
K71.6	Toxic liver disease with hepatitis, not elsewhere classified
K71.7	Toxic liver disease with fibrosis and cirrhosis of liver
K71.8	Toxic liver disease with other disorders of liver
K71.9	Toxic liver disease, unspecified
K72.00	Acute and subacute hepatic failure without coma
K72.01	Acute and subacute hepatic failure with coma
K72.10	Chronic hepatic failure without coma



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Code	Description
K72.11	Chronic hepatic failure with coma
K72.90	Hepatic failure, unspecified without coma
K72.91	Hepatic failure, unspecified with coma
K73.0	Chronic persistent hepatitis, not elsewhere classified
K73.1	Chronic lobular hepatitis, not elsewhere classified
K73.2	Chronic active hepatitis, not elsewhere classified
K73.8	Other chronic hepatitis, not elsewhere classified
K73.9	Chronic hepatitis, unspecified
K74.0	Hepatic fibrosis
K74.1	Hepatic sclerosis
K74.2	Hepatic fibrosis with hepatic sclerosis
K74.3	Primary biliary cirrhosis
K74.4	Secondary biliary cirrhosis
K74.5	Biliary cirrhosis, unspecified
K74.60	Unspecified cirrhosis of liver
K74.69	Other cirrhosis of liver
K75.0	Abscess of liver
K75.1	Phlebitis of portal vein
K75.2	Nonspecific reactive hepatitis
K75.3	Granulomatous hepatitis, not elsewhere classified
K75.4	Autoimmune hepatitis
K75.81	Nonalcoholic steatohepatitis (NASH)
K75.89	Other specified inflammatory liver diseases
K75.9	Inflammatory liver disease, unspecified
K76.0	Fatty (change of) liver, not elsewhere classified
K76.1	Chronic passive congestion of liver
K76.2	Central hemorrhagic necrosis of liver
K76.3	Infarction of liver
K76.4	Peliosis hepatis
K76.5	Hepatic veno-occlusive disease



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Code	Description
K76.6	Portal hypertension
K76.7	Hepatorenal syndrome
K76.81	Hepatopulmonary syndrome
K76.89	Other specified diseases of liver
K76.9	Liver disease, unspecified
K77	Liver disorders in diseases classified elsewhere
K80.30	Calculus of bile duct with cholangitis, unspecified, without obstruction
K80.31	Calculus of bile duct with cholangitis, unspecified, with obstruction
K80.32	Calculus of bile duct with acute cholangitis without obstruction
K80.33	Calculus of bile duct with acute cholangitis with obstruction
K80.34	Calculus of bile duct with chronic cholangitis without obstruction
K80.35	Calculus of bile duct with chronic cholangitis with obstruction
K80.36	Calculus of bile duct with acute and chronic cholangitis without obstruction
K80.37	Calculus of bile duct with acute and chronic cholangitis with obstruction
K83.0	Cholangitis
K83.1	Obstruction of bile duct
K83.2	Perforation of bile duct
K83.3	Fistula of bile duct
K83.4	Spasm of sphincter of Oddi
K83.5	Biliary cyst
K83.8	Other specified diseases of biliary tract
K83.9	Disease of biliary tract, unspecified
K85.00	Idiopathic acute pancreatitis without necrosis or infection
K85.01	Idiopathic acute pancreatitis with uninfected necrosis
K85.02	Idiopathic acute pancreatitis with infected necrosis
K85.10	Biliary acute pancreatitis without necrosis or infection
K85.11	Biliary acute pancreatitis with uninfected necrosis
K85.12	Biliary acute pancreatitis with infected necrosis
K85.20	Alcohol induced acute pancreatitis without necrosis or infection
K85.21	Alcohol induced acute pancreatitis with uninfected necrosis

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Code	Description
K85.22	Alcohol induced acute pancreatitis with infected necrosis
K85.30	Drug induced acute pancreatitis without necrosis or infection
K85.31	Drug induced acute pancreatitis with uninfected necrosis
K85.32	Drug induced acute pancreatitis with infected necrosis
K85.80	Other acute pancreatitis without necrosis or infection
K85.81	Other acute pancreatitis with uninfected necrosis
K85.82	Other acute pancreatitis with infected necrosis
K85.90	Acute pancreatitis without necrosis or infection, unspecified
K85.91	Acute pancreatitis with uninfected necrosis, unspecified
K85.92	Acute pancreatitis with infected necrosis, unspecified
K87	Disorders of gallbladder, biliary tract and pancreas in diseases classified elsewhere
K90.0	Celiac disease
K90.1	Tropical sprue
K90.2	Blind loop syndrome, not elsewhere classified
K90.3	Pancreatic steatorrhea
K90.41	Non-celiac gluten sensitivity
K90.49	Malabsorption due to intolerance, not elsewhere classified
K90.89	Other intestinal malabsorption
K90.9	Intestinal malabsorption, unspecified
K91.2	Postsurgical malabsorption, not elsewhere classified
K91.5	Postcholecystectomy syndrome
K91.61	Intraoperative hemorrhage and hematoma of a digestive system organ or structure complicating a digestive system procedure
K91.62	Intraoperative hemorrhage and hematoma of a digestive system organ or structure complicating other procedure
K91.840	Postprocedural hemorrhage of a digestive system organ or structure following a digestive system procedure
K91.841	Postprocedural hemorrhage of a digestive system organ or structure following other procedure
*K91.870	*Postprocedural hematoma of a digestive system organ or structure following a digestive system procedure



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Code	Description
*K91.871	*Postprocedural hematoma of a digestive system organ or structure following other procedure
K92.0	Hematemesis
K92.1	Melena
K92.2	Gastrointestinal hemorrhage, unspecified
L76.01	Intraoperative hemorrhage and hematoma of skin and subcutaneous tissue complicating a dermatologic procedure
L76.02	Intraoperative hemorrhage and hematoma of skin and subcutaneous tissue complicating other procedure
L76.21	Postprocedural hemorrhage of skin and subcutaneous tissue following a dermatologic procedure
L76.22	Postprocedural hemorrhage of skin and subcutaneous tissue following other procedure
*L76.31	*Postprocedural hematoma of skin and subcutaneous tissue following a dermatologic procedure
*L76.32	*Postprocedural hematoma of skin and subcutaneous tissue following other procedure
M02.20	Postimmunization arthropathy, unspecified site
M02.211	Postimmunization arthropathy, right shoulder
M02.212	Postimmunization arthropathy, left shoulder
M02.219	Postimmunization arthropathy, unspecified shoulder
M02.221	Postimmunization arthropathy, right elbow
M02.222	Postimmunization arthropathy, left elbow
M02.229	Postimmunization arthropathy, unspecified elbow
M02.231	Postimmunization arthropathy, right wrist
M02.232	Postimmunization arthropathy, left wrist
M02.239	Postimmunization arthropathy, unspecified wrist
M02.241	Postimmunization arthropathy, right hand
M02.242	Postimmunization arthropathy, left hand
M02.249	Postimmunization arthropathy, unspecified hand
M02.251	Postimmunization arthropathy, right hip
M02.252	Postimmunization arthropathy, left hip
M02.259	Postimmunization arthropathy, unspecified hip



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Code	Description
M02.261	Postimmunization arthropathy, right knee
M02.262	Postimmunization arthropathy, left knee
M02.269	Postimmunization arthropathy, unspecified knee
M02.271	Postimmunization arthropathy, right ankle and foot
M02.272	Postimmunization arthropathy, left ankle and foot
M02.279	Postimmunization arthropathy, unspecified ankle and foot
M02.28	Postimmunization arthropathy, vertebrae
M02.29	Postimmunization arthropathy, multiple sites
M25.00	Hemarthrosis, unspecified joint
M25.011	Hemarthrosis, right shoulder
M25.012	Hemarthrosis, left shoulder
M25.019	Hemarthrosis, unspecified shoulder
M25.021	Hemarthrosis, right elbow
M25.022	Hemarthrosis, left elbow
M25.029	Hemarthrosis, unspecified elbow
M25.031	Hemarthrosis, right wrist
M25.032	Hemarthrosis, left wrist
M25.039	Hemarthrosis, unspecified wrist
M25.041	Hemarthrosis, right hand
M25.042	Hemarthrosis, left hand
M25.049	Hemarthrosis, unspecified hand
M25.051	Hemarthrosis, right hip
M25.052	Hemarthrosis, left hip
M25.059	Hemarthrosis, unspecified hip
M25.061	Hemarthrosis, right knee
M25.062	Hemarthrosis, left knee
M25.069	Hemarthrosis, unspecified knee
M25.071	Hemarthrosis, right ankle
M25.072	Hemarthrosis, left ankle
M25.073	Hemarthrosis, unspecified ankle



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Code	Description
M25.074	Hemarthrosis, right foot
M25.075	Hemarthrosis, left foot
M25.076	Hemarthrosis, unspecified foot
M25.08	Hemarthrosis, other specified site
M31.1	Thrombotic microangiopathy
M32.0	Drug-induced systemic lupus erythematosus
M32.10	Systemic lupus erythematosus, organ or system involvement unspecified
M32.11	Endocarditis in systemic lupus erythematosus
M32.12	Pericarditis in systemic lupus erythematosus
M32.13	Lung involvement in systemic lupus erythematosus
M32.14	Glomerular disease in systemic lupus erythematosus
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus
M32.19	Other organ or system involvement in systemic lupus erythematosus
M32.8	Other forms of systemic lupus erythematosus
M32.9	Systemic lupus erythematosus, unspecified
M36.2	Hemophilic arthropathy
M36.3	Arthropathy in other blood disorders
M36.4	Arthropathy in hypersensitivity reactions classified elsewhere
M48.50XA	Collapsed vertebra, not elsewhere classified, site unspecified, initial encounter for fracture
M48.51XA	Collapsed vertebra, not elsewhere classified, occipito-atlanto-axial region, initial encounter for fracture
M48.52XA	Collapsed vertebra, not elsewhere classified, cervical region, initial encounter for fracture
M48.53XA	Collapsed vertebra, not elsewhere classified, cervicothoracic region, initial encounter for fracture
M48.54XA	Collapsed vertebra, not elsewhere classified, thoracic region, initial encounter for fracture
M48.55XA	Collapsed vertebra, not elsewhere classified, thoracolumbar region, initial encounter for fracture
M48.56XA	Collapsed vertebra, not elsewhere classified, lumbar region, initial encounter for fracture
M48.57XA	Collapsed vertebra, not elsewhere classified, lumbosacral region, initial encounter for fracture
M48.58XA	Collapsed vertebra, not elsewhere classified, sacral and sacrococcygeal region, initial encounter for fracture

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Code	Description
M79.601	Pain in right arm
M79.602	Pain in left arm
M79.603	Pain in arm, unspecified
M79.604	Pain in right leg
M79.605	Pain in left leg
M79.606	Pain in leg, unspecified
M79.609	Pain in unspecified limb
M79.621	Pain in right upper arm
M79.622	Pain in left upper arm
M79.629	Pain in unspecified upper arm
M79.631	Pain in right forearm
M79.632	Pain in left forearm
M79.639	Pain in unspecified forearm
M79.641	Pain in right hand
M79.642	Pain in left hand
M79.643	Pain in unspecified hand
M79.644	Pain in right finger(s)
M79.645	Pain in left finger(s)
M79.646	Pain in unspecified finger(s)
M79.651	Pain in right thigh
M79.652	Pain in left thigh
M79.659	Pain in unspecified thigh
M79.661	Pain in right lower leg
M79.662	Pain in left lower leg
M79.669	Pain in unspecified lower leg
M79.671	Pain in right foot
M79.672	Pain in left foot
M79.673	Pain in unspecified foot
M79.674	Pain in right toe(s)
M79.675	Pain in left toe(s)



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Code	Description
M79.676	Pain in unspecified toe(s)
M79.89	Other specified soft tissue disorders
M80.00XA	Age-related osteoporosis with current pathological fracture, unspecified site, initial encounter for fracture
M80.011A	Age-related osteoporosis with current pathological fracture, right shoulder, initial encounter for fracture
M80.012A	Age-related osteoporosis with current pathological fracture, left shoulder, initial encounter for fracture
M80.019A	Age-related osteoporosis with current pathological fracture, unspecified shoulder, initial encounter for fracture
M80.021A	Age-related osteoporosis with current pathological fracture, right humerus, initial encounter for fracture
M80.022A	Age-related osteoporosis with current pathological fracture, left humerus, initial encounter for fracture
M80.029A	Age-related osteoporosis with current pathological fracture, unspecified humerus, initial encounter for fracture
M80.031A	Age-related osteoporosis with current pathological fracture, right forearm, initial encounter for fracture
M80.032A	Age-related osteoporosis with current pathological fracture, left forearm, initial encounter for fracture
M80.039A	Age-related osteoporosis with current pathological fracture, unspecified forearm, initial encounter for fracture
M80.041A	Age-related osteoporosis with current pathological fracture, right hand, initial encounter for fracture
M80.042A	Age-related osteoporosis with current pathological fracture, left hand, initial encounter for fracture
M80.049A	Age-related osteoporosis with current pathological fracture, unspecified hand, initial encounter for fracture
M80.051A	Age-related osteoporosis with current pathological fracture, right femur, initial encounter for fracture
M80.052A	Age-related osteoporosis with current pathological fracture, left femur, initial encounter for fracture
M80.059A	Age-related osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture
M80.061A	Age-related osteoporosis with current pathological fracture, right lower leg, initial encounter for fracture



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Code	Description
M80.062A	Age-related osteoporosis with current pathological fracture, left lower leg, initial encounter for fracture
M80.069A	Age-related osteoporosis with current pathological fracture, unspecified lower leg, initial encounter for fracture
M80.071A	Age-related osteoporosis with current pathological fracture, right ankle and foot, initial encounter for fracture
M80.072A	Age-related osteoporosis with current pathological fracture, left ankle and foot, initial encounter for fracture
M80.079A	Age-related osteoporosis with current pathological fracture, unspecified ankle and foot, initial encounter for fracture
M80.08XA	Age-related osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture
M80.80XA	Other osteoporosis with current pathological fracture, unspecified site, initial encounter for fracture
M80.811A	Other osteoporosis with current pathological fracture, right shoulder, initial encounter for fracture
M80.812A	Other osteoporosis with current pathological fracture, left shoulder, initial encounter for fracture
M80.819A	Other osteoporosis with current pathological fracture, unspecified shoulder, initial encounter for fracture
M80.821A	Other osteoporosis with current pathological fracture, right humerus, initial encounter for fracture
M80.822A	Other osteoporosis with current pathological fracture, left humerus, initial encounter for fracture
M80.829A	Other osteoporosis with current pathological fracture, unspecified humerus, initial encounter for fracture
M80.831A	Other osteoporosis with current pathological fracture, right forearm, initial encounter for fracture
M80.832A	Other osteoporosis with current pathological fracture, left forearm, initial encounter for fracture
M80.839A	Other osteoporosis with current pathological fracture, unspecified forearm, initial encounter for fracture
M80.841A	Other osteoporosis with current pathological fracture, right hand, initial encounter for fracture
M80.842A	Other osteoporosis with current pathological fracture, left hand, initial encounter for fracture



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Code	Description
M80.849A	Other osteoporosis with current pathological fracture, unspecified hand, initial encounter for fracture
M80.851A	Other osteoporosis with current pathological fracture, right femur, initial encounter for fracture
M80.852A	Other osteoporosis with current pathological fracture, left femur, initial encounter for fracture
M80.859A	Other osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture
M80.861A	Other osteoporosis with current pathological fracture, right lower leg, initial encounter for fracture
M80.862A	Other osteoporosis with current pathological fracture, left lower leg, initial encounter for fracture
M80.869A	Other osteoporosis with current pathological fracture, unspecified lower leg, initial encounter for fracture
M80.871A	Other osteoporosis with current pathological fracture, right ankle and foot, initial encounter for fracture
M80.872A	Other osteoporosis with current pathological fracture, left ankle and foot, initial encounter for fracture
M80.879A	Other osteoporosis with current pathological fracture, unspecified ankle and foot, initial encounter for fracture
M80.88XA	Other osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture
M84.40XA	Pathological fracture, unspecified site, initial encounter for fracture
M84.411A	Pathological fracture, right shoulder, initial encounter for fracture
M84.412A	Pathological fracture, left shoulder, initial encounter for fracture
M84.419A	Pathological fracture, unspecified shoulder, initial encounter for fracture
M84.421A	Pathological fracture, right humerus, initial encounter for fracture
M84.422A	Pathological fracture, left humerus, initial encounter for fracture
M84.429A	Pathological fracture, unspecified humerus, initial encounter for fracture
M84.431A	Pathological fracture, right ulna, initial encounter for fracture
M84.432A	Pathological fracture, left ulna, initial encounter for fracture
M84.433A	Pathological fracture, right radius, initial encounter for fracture
M84.434A	Pathological fracture, left radius, initial encounter for fracture
M84.439A	Pathological fracture, unspecified ulna and radius, initial encounter for fracture



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Code	Description
M84.441A	Pathological fracture, right hand, initial encounter for fracture
M84.442A	Pathological fracture, left hand, initial encounter for fracture
M84.443A	Pathological fracture, unspecified hand, initial encounter for fracture
M84.444A	Pathological fracture, right finger(s), initial encounter for fracture
M84.445A	Pathological fracture, left finger(s), initial encounter for fracture
M84.446A	Pathological fracture, unspecified finger(s), initial encounter for fracture
M84.451A	Pathological fracture, right femur, initial encounter for fracture
M84.452A	Pathological fracture, left femur, initial encounter for fracture
M84.453A	Pathological fracture, unspecified femur, initial encounter for fracture
M84.454A	Pathological fracture, pelvis, initial encounter for fracture
M84.459A	Pathological fracture, hip, unspecified, initial encounter for fracture
M84.461A	Pathological fracture, right tibia, initial encounter for fracture
M84.462A	Pathological fracture, left tibia, initial encounter for fracture
M84.463A	Pathological fracture, right fibula, initial encounter for fracture
M84.464A	Pathological fracture, left fibula, initial encounter for fracture
M84.469A	Pathological fracture, unspecified tibia and fibula, initial encounter for fracture
M84.471A	Pathological fracture, right ankle, initial encounter for fracture
M84.472A	Pathological fracture, left ankle, initial encounter for fracture
M84.473A	Pathological fracture, unspecified ankle, initial encounter for fracture
M84.474A	Pathological fracture, right foot, initial encounter for fracture
M84.475A	Pathological fracture, left foot, initial encounter for fracture
M84.476A	Pathological fracture, unspecified foot, initial encounter for fracture
M84.477A	Pathological fracture, right toe(s), initial encounter for fracture
M84.478A	Pathological fracture, left toe(s), initial encounter for fracture
M84.479A	Pathological fracture, unspecified toe(s), initial encounter for fracture
M84.48XA	Pathological fracture, other site, initial encounter for fracture
M84.50XA	Pathological fracture in neoplastic disease, unspecified site, initial encounter for fracture
M84.511A	Pathological fracture in neoplastic disease, right shoulder, initial encounter for fracture
M84.512A	Pathological fracture in neoplastic disease, left shoulder, initial encounter for fracture
M84.519A	Pathological fracture in neoplastic disease, unspecified shoulder, initial encounter for fracture

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Code	Description
M84.521A	Pathological fracture in neoplastic disease, right humerus, initial encounter for fracture
M84.522A	Pathological fracture in neoplastic disease, left humerus, initial encounter for fracture
M84.529A	Pathological fracture in neoplastic disease, unspecified humerus, initial encounter for fracture
M84.531A	Pathological fracture in neoplastic disease, right ulna, initial encounter for fracture
M84.532A	Pathological fracture in neoplastic disease, left ulna, initial encounter for fracture
M84.533A	Pathological fracture in neoplastic disease, right radius, initial encounter for fracture
M84.534A	Pathological fracture in neoplastic disease, left radius, initial encounter for fracture
M84.539A	Pathological fracture in neoplastic disease, unspecified ulna and radius, initial encounter for fracture
M84.541A	Pathological fracture in neoplastic disease, right hand, initial encounter for fracture
M84.542A	Pathological fracture in neoplastic disease, left hand, initial encounter for fracture
M84.549A	Pathological fracture in neoplastic disease, unspecified hand, initial encounter for fracture
M84.550A	Pathological fracture in neoplastic disease, pelvis, initial encounter for fracture
M84.551A	Pathological fracture in neoplastic disease, right femur, initial encounter for fracture
M84.552A	Pathological fracture in neoplastic disease, left femur, initial encounter for fracture
M84.553A	Pathological fracture in neoplastic disease, unspecified femur, initial encounter for fracture
M84.559A	Pathological fracture in neoplastic disease, hip, unspecified, initial encounter for fracture
M84.561A	Pathological fracture in neoplastic disease, right tibia, initial encounter for fracture
M84.562A	Pathological fracture in neoplastic disease, left tibia, initial encounter for fracture
M84.563A	Pathological fracture in neoplastic disease, right fibula, initial encounter for fracture
M84.564A	Pathological fracture in neoplastic disease, left fibula, initial encounter for fracture
M84.569A	Pathological fracture in neoplastic disease, unspecified tibia and fibula, initial encounter for fracture
M84.571A	Pathological fracture in neoplastic disease, right ankle, initial encounter for fracture
M84.572A	Pathological fracture in neoplastic disease, left ankle, initial encounter for fracture
M84.573A	Pathological fracture in neoplastic disease, unspecified ankle, initial encounter for fracture
M84.574A	Pathological fracture in neoplastic disease, right foot, initial encounter for fracture
M84.575A	Pathological fracture in neoplastic disease, left foot, initial encounter for fracture
M84.576A	Pathological fracture in neoplastic disease, unspecified foot, initial encounter for fracture
M84.58XA	Pathological fracture in neoplastic disease, other specified site, initial encounter for fracture

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Code	Description
M84.60XA	Pathological fracture in other disease, unspecified site, initial encounter for fracture
M84.611A	Pathological fracture in other disease, right shoulder, initial encounter for fracture
M84.612A	Pathological fracture in other disease, left shoulder, initial encounter for fracture
M84.619A	Pathological fracture in other disease, unspecified shoulder, initial encounter for fracture
M84.621A	Pathological fracture in other disease, right humerus, initial encounter for fracture
M84.622A	Pathological fracture in other disease, left humerus, initial encounter for fracture
M84.629A	Pathological fracture in other disease, unspecified humerus, initial encounter for fracture
M84.631A	Pathological fracture in other disease, right ulna, initial encounter for fracture
M84.632A	Pathological fracture in other disease, left ulna, initial encounter for fracture
M84.633A	Pathological fracture in other disease, right radius, initial encounter for fracture
M84.634A	Pathological fracture in other disease, left radius, initial encounter for fracture
M84.639A	Pathological fracture in other disease, unspecified ulna and radius, initial encounter for fracture
M84.641A	Pathological fracture in other disease, right hand, initial encounter for fracture
M84.642A	Pathological fracture in other disease, left hand, initial encounter for fracture
M84.649A	Pathological fracture in other disease, unspecified hand, initial encounter for fracture
M84.650A	Pathological fracture in other disease, pelvis, initial encounter for fracture
M84.651A	Pathological fracture in other disease, right femur, initial encounter for fracture
M84.652A	Pathological fracture in other disease, left femur, initial encounter for fracture
M84.653A	Pathological fracture in other disease, unspecified femur, initial encounter for fracture
M84.659A	Pathological fracture in other disease, hip, unspecified, initial encounter for fracture
M84.661A	Pathological fracture in other disease, right tibia, initial encounter for fracture
M84.662A	Pathological fracture in other disease, left tibia, initial encounter for fracture
M84.663A	Pathological fracture in other disease, right fibula, initial encounter for fracture
M84.664A	Pathological fracture in other disease, left fibula, initial encounter for fracture
M84.669A	Pathological fracture in other disease, unspecified tibia and fibula, initial encounter for fracture
M84.671A	Pathological fracture in other disease, right ankle, initial encounter for fracture
M84.672A	Pathological fracture in other disease, left ankle, initial encounter for fracture
M84.673A	Pathological fracture in other disease, unspecified ankle, initial encounter for fracture
M84.674A	Pathological fracture in other disease, right foot, initial encounter for fracture

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Code	Description
M84.675A	Pathological fracture in other disease, left foot, initial encounter for fracture
M84.676A	Pathological fracture in other disease, unspecified foot, initial encounter for fracture
M84.68XA	Pathological fracture in other disease, other site, initial encounter for fracture
*M84.751A	*Incomplete atypical femoral fracture, right leg, initial encounter for fracture
*M84.752A	*Incomplete atypical femoral fracture, left leg, initial encounter for fracture
*M84.753A	*Incomplete atypical femoral fracture, unspecified leg, initial encounter for fracture
*M84.754A	*Complete transverse atypical femoral fracture, right leg, initial encounter for fracture
*M84.755A	*Complete transverse atypical femoral fracture, left leg, initial encounter for fracture
*M84.756A	*Complete transverse atypical femoral fracture, unspecified leg, initial encounter for fracture
*M84.757A	*Complete oblique atypical femoral fracture, right leg, initial encounter for fracture
*M84.758A	*Complete oblique atypical femoral fracture, left leg, initial encounter for fracture
*M84.759A	*Complete oblique atypical femoral fracture, unspecified leg, initial encounter for fracture
M96.810	Intraoperative hemorrhage and hematoma of a musculoskeletal structure complicating a musculoskeletal system procedure
M96.811	Intraoperative hemorrhage and hematoma of a musculoskeletal structure complicating other procedure
M96.830	Postprocedural hemorrhage of a musculoskeletal structure following a musculoskeletal system procedure
M96.831	Postprocedural hemorrhage of a musculoskeletal structure following other procedure
*M96.840	*Postprocedural hematoma of a musculoskeletal structure following a musculoskeletal system procedure
*M96.841	*Postprocedural hematoma of a musculoskeletal structure following other procedure
*M97.01XA	*Periprosthetic fracture around internal prosthetic right hip joint, initial encounter
*M97.02XA	*Periprosthetic fracture around internal prosthetic left hip joint, initial encounter
*M97.11XA	*Periprosthetic fracture around internal prosthetic right knee joint, initial encounter
*M97.12XA	*Periprosthetic fracture around internal prosthetic left knee joint, initial encounter
*M97.21XA	*Periprosthetic fracture around internal prosthetic right ankle joint, initial encounter
*M97.22XA	*Periprosthetic fracture around internal prosthetic left ankle joint, initial encounter



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Code	Description
*M97.31XA	*Periprosthetic fracture around internal prosthetic right shoulder joint, initial encounter
*M97.32XA	*Periprosthetic fracture around internal prosthetic left shoulder joint, initial encounter
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis
N02.6	Recurrent and persistent hematuria with dense deposit disease
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis
N02.8	Recurrent and persistent hematuria with other morphologic changes
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes
N04.0	Nephrotic syndrome with minor glomerular abnormality
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis
N04.6	Nephrotic syndrome with dense deposit disease
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis
N04.8	Nephrotic syndrome with other morphologic changes
N04.9	Nephrotic syndrome with unspecified morphologic changes
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes
N06.9	Isolated proteinuria with unspecified morphologic lesion
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions
N08	Glomerular disorders in diseases classified elsewhere
N15.9	Renal tubulo-interstitial disease, unspecified
N17.0	Acute kidney failure with tubular necrosis



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Code	Description
N17.1	Acute kidney failure with acute cortical necrosis
N17.2	Acute kidney failure with medullary necrosis
N17.8	Other acute kidney failure
N17.9	Acute kidney failure, unspecified
N18.4	Chronic kidney disease, stage 4 (severe)
N18.5	Chronic kidney disease, stage 5
N18.6	End stage renal disease
N18.9	Chronic kidney disease, unspecified
N19	Unspecified kidney failure
N28.0	Ischemia and infarction of kidney
N28.82	Megaloureter
N28.89	Other specified disorders of kidney and ureter
N32.89	Other specified disorders of bladder
N33	Bladder disorders in diseases classified elsewhere
N50.1	Vascular disorders of male genital organs
N64.89	Other specified disorders of breast
N83.7	Hematoma of broad ligament
N85.7	Hematometra
N88.8	Other specified noninflammatory disorders of cervix uteri
N89.8	Other specified noninflammatory disorders of vagina
N90.89	Other specified noninflammatory disorders of vulva and perineum
N92.1	Excessive and frequent menstruation with irregular cycle
N92.4	Excessive bleeding in the premenopausal period
N93.0	Postcoital and contact bleeding
N94.89	Other specified conditions associated with female genital organs and menstrual cycle
N95.0	Postmenopausal bleeding
N99.510	Cystostomy hemorrhage
N99.511	Cystostomy infection
N99.512	Cystostomy malfunction
N99.518	Other cystostomy complication

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Code	Description
N99.61	Intraoperative hemorrhage and hematoma of a genitourinary system organ or structure complicating a genitourinary system procedure
N99.62	Intraoperative hemorrhage and hematoma of a genitourinary system organ or structure complicating other procedure
N99.820	Postprocedural hemorrhage of a genitourinary system organ or structure following a genitourinary system procedure
N99.821	Postprocedural hemorrhage of a genitourinary system organ or structure following other procedure
*N99.840	*Postprocedural hematoma of a genitourinary system organ or structure following a genitourinary system procedure
*N99.841	*Postprocedural hematoma of a genitourinary system organ or structure following other procedure
O02.1	Missed abortion
O03.0	Genital tract and pelvic infection following incomplete spontaneous abortion
O03.1	Delayed or excessive hemorrhage following incomplete spontaneous abortion
O03.2	Embolism following incomplete spontaneous abortion
O03.30	Unspecified complication following incomplete spontaneous abortion
O03.31	Shock following incomplete spontaneous abortion
O03.32	Renal failure following incomplete spontaneous abortion
O03.33	Metabolic disorder following incomplete spontaneous abortion
O03.34	Damage to pelvic organs following incomplete spontaneous abortion
O03.35	Other venous complications following incomplete spontaneous abortion
O03.36	Cardiac arrest following incomplete spontaneous abortion
O03.37	Sepsis following incomplete spontaneous abortion
O03.38	Urinary tract infection following incomplete spontaneous abortion
O03.39	Incomplete spontaneous abortion with other complications
O03.4	Incomplete spontaneous abortion without complication
O03.5	Genital tract and pelvic infection following complete or unspecified spontaneous abortion
O03.6	Delayed or excessive hemorrhage following complete or unspecified spontaneous abortion
O03.7	Embolism following complete or unspecified spontaneous abortion
O03.80	Unspecified complication following complete or unspecified spontaneous abortion
O03.81	Shock following complete or unspecified spontaneous abortion

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Code	Description
O03.82	Renal failure following complete or unspecified spontaneous abortion
O03.83	Metabolic disorder following complete or unspecified spontaneous abortion
O03.84	Damage to pelvic organs following complete or unspecified spontaneous abortion
O03.85	Other venous complications following complete or unspecified spontaneous abortion
O03.86	Cardiac arrest following complete or unspecified spontaneous abortion
O03.87	Sepsis following complete or unspecified spontaneous abortion
O03.88	Urinary tract infection following complete or unspecified spontaneous abortion
O03.89	Complete or unspecified spontaneous abortion with other complications
O03.9	Complete or unspecified spontaneous abortion without complication
O04.6	Delayed or excessive hemorrhage following (induced) termination of pregnancy
O07.1	Delayed or excessive hemorrhage following failed attempted termination of pregnancy
O08.1	Delayed or excessive hemorrhage following ectopic and molar pregnancy
O08.2	Embolism following ectopic and molar pregnancy
O10.011	Pre-existing essential hypertension complicating pregnancy, first trimester
O10.012	Pre-existing essential hypertension complicating pregnancy, second trimester
O10.013	Pre-existing essential hypertension complicating pregnancy, third trimester
O10.019	Pre-existing essential hypertension complicating pregnancy, unspecified trimester
O10.02	Pre-existing essential hypertension complicating childbirth
O10.03	Pre-existing essential hypertension complicating the puerperium
O10.111	Pre-existing hypertensive heart disease complicating pregnancy, first trimester
O10.112	Pre-existing hypertensive heart disease complicating pregnancy, second trimester
O10.113	Pre-existing hypertensive heart disease complicating pregnancy, third trimester
O10.119	Pre-existing hypertensive heart disease complicating pregnancy, unspecified trimester
O10.12	Pre-existing hypertensive heart disease complicating childbirth
O10.13	Pre-existing hypertensive heart disease complicating the puerperium
O10.211	Pre-existing hypertensive chronic kidney disease complicating pregnancy, first trimester
O10.212	Pre-existing hypertensive chronic kidney disease complicating pregnancy, second trimester
O10.213	Pre-existing hypertensive chronic kidney disease complicating pregnancy, third trimester
O10.219	Pre-existing hypertensive chronic kidney disease complicating pregnancy, unspecified trimester

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Code	Description
O10.22	Pre-existing hypertensive chronic kidney disease complicating childbirth
O10.23	Pre-existing hypertensive chronic kidney disease complicating the puerperium
O10.311	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, first trimester
O10.312	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, second trimester
O10.313	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, third trimester
O10.319	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, unspecified trimester
O10.32	Pre-existing hypertensive heart and chronic kidney disease complicating childbirth
O10.33	Pre-existing hypertensive heart and chronic kidney disease complicating the puerperium
O10.411	Pre-existing secondary hypertension complicating pregnancy, first trimester
O10.412	Pre-existing secondary hypertension complicating pregnancy, second trimester
O10.413	Pre-existing secondary hypertension complicating pregnancy, third trimester
O10.419	Pre-existing secondary hypertension complicating pregnancy, unspecified trimester
O10.42	Pre-existing secondary hypertension complicating childbirth
O10.43	Pre-existing secondary hypertension complicating the puerperium
O10.911	Unspecified pre-existing hypertension complicating pregnancy, first trimester
O10.912	Unspecified pre-existing hypertension complicating pregnancy, second trimester
O10.913	Unspecified pre-existing hypertension complicating pregnancy, third trimester
O10.919	Unspecified pre-existing hypertension complicating pregnancy, unspecified trimester
O10.92	Unspecified pre-existing hypertension complicating childbirth
O10.93	Unspecified pre-existing hypertension complicating the puerperium
O11.1	Pre-existing hypertension with pre-eclampsia, first trimester
O11.2	Pre-existing hypertension with pre-eclampsia, second trimester
O11.3	Pre-existing hypertension with pre-eclampsia, third trimester
O11.9	Pre-existing hypertension with pre-eclampsia, unspecified trimester
*O12.04	*Gestational edema, complicating childbirth
*O12.05	*Gestational edema, complicating the puerperium
*O12.14	*Gestational proteinuria, complicating childbirth
*O12.15	*Gestational proteinuria, complicating the puerperium

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Code	Description
*O12.24	*Gestational edema with proteinuria, complicating childbirth
*O12.25	*Gestational edema with proteinuria, complicating the puerperium
O13.1	Gestational [pregnancy-induced] hypertension without significant proteinuria, first trimester
O13.2	Gestational [pregnancy-induced] hypertension without significant proteinuria, second trimester
O13.3	Gestational [pregnancy-induced] hypertension without significant proteinuria, third trimester
*O13.4	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth
*O13.5	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating the puerperium
O13.9	Gestational [pregnancy-induced] hypertension without significant proteinuria, unspecified trimester
O14.00	Mild to moderate pre-eclampsia, unspecified trimester
O14.02	Mild to moderate pre-eclampsia, second trimester
O14.03	Mild to moderate pre-eclampsia, third trimester
*O14.04	*Mild to moderate pre-eclampsia, complicating childbirth
*O14.05	*Mild to moderate pre-eclampsia, complicating the puerperium
O14.10	Severe pre-eclampsia, unspecified trimester
O14.12	Severe pre-eclampsia, second trimester
O14.13	Severe pre-eclampsia, third trimester
*O14.14	*Severe pre-eclampsia complicating childbirth
*O14.15	*Severe pre-eclampsia, complicating the puerperium
O14.20	HELLP syndrome (HELLP), unspecified trimester
O14.22	HELLP syndrome (HELLP), second trimester
O14.23	HELLP syndrome (HELLP), third trimester
*O14.24	*HELLP syndrome, complicating childbirth
*O14.25	*HELLP syndrome, complicating the puerperium
O14.90	Unspecified pre-eclampsia, unspecified trimester
O14.92	Unspecified pre-eclampsia, second trimester
O14.93	Unspecified pre-eclampsia, third trimester
*O14.94	*Unspecified pre-eclampsia, complicating childbirth



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Code	Description
*O14.95	*Unspecified pre-eclampsia, complicating the puerperium
O15.00	Eclampsia complicating pregnancy, unspecified trimester
O15.02	Eclampsia complicating pregnancy, second trimester
O15.03	Eclampsia complicating pregnancy, third trimester
O15.1	Eclampsia complicating labor
O15.2	Eclampsia complicating the puerperium
O15.9	Eclampsia, unspecified as to time period
O16.1	Unspecified maternal hypertension, first trimester
O16.2	Unspecified maternal hypertension, second trimester
O16.3	Unspecified maternal hypertension, third trimester
*O16.4	*Unspecified maternal hypertension, complicating childbirth
*O16.5	*Unspecified maternal hypertension, complicating the puerperium
O16.9	Unspecified maternal hypertension, unspecified trimester
O20.0	Threatened abortion
O20.8	Other hemorrhage in early pregnancy
O20.9	Hemorrhage in early pregnancy, unspecified
O22.20	Superficial thrombophlebitis in pregnancy, unspecified trimester
O22.21	Superficial thrombophlebitis in pregnancy, first trimester
O22.22	Superficial thrombophlebitis in pregnancy, second trimester
O22.23	Superficial thrombophlebitis in pregnancy, third trimester
O22.30	Deep phlebothrombosis in pregnancy, unspecified trimester
O22.31	Deep phlebothrombosis in pregnancy, first trimester
O22.32	Deep phlebothrombosis in pregnancy, second trimester
O22.33	Deep phlebothrombosis in pregnancy, third trimester
O22.50	Cerebral venous thrombosis in pregnancy, unspecified trimester
O22.51	Cerebral venous thrombosis in pregnancy, first trimester
O22.52	Cerebral venous thrombosis in pregnancy, second trimester
O22.53	Cerebral venous thrombosis in pregnancy, third trimester
O22.91	Venous complication in pregnancy, unspecified, first trimester
O22.92	Venous complication in pregnancy, unspecified, second trimester



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Code	Description
O22.93	Venous complication in pregnancy, unspecified, third trimester
*O24.415	*Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs
*O24.425	*Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs
*O24.435	*Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs
O26.611	Liver and biliary tract disorders in pregnancy, first trimester
O26.612	Liver and biliary tract disorders in pregnancy, second trimester
O26.613	Liver and biliary tract disorders in pregnancy, third trimester
O26.619	Liver and biliary tract disorders in pregnancy, unspecified trimester
O26.62	Liver and biliary tract disorders in childbirth
O26.851	Spotting complicating pregnancy, first trimester
O26.852	Spotting complicating pregnancy, second trimester
O26.853	Spotting complicating pregnancy, third trimester
O26.859	Spotting complicating pregnancy, unspecified trimester
O41.1010	Infection of amniotic sac and membranes, unspecified, first trimester, not applicable or unspecified
O41.1011	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 1
O41.1012	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 2
O41.1013	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 3
O41.1014	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 4
O41.1015	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 5
O41.1019	Infection of amniotic sac and membranes, unspecified, first trimester, other fetus
O41.1020	Infection of amniotic sac and membranes, unspecified, second trimester, not applicable or unspecified
O41.1021	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 1
O41.1022	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 2
O41.1023	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 3
O41.1024	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 4
O41.1025	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 5
O41.1029	Infection of amniotic sac and membranes, unspecified, second trimester, other fetus
O41.1030	Infection of amniotic sac and membranes, unspecified, third trimester, not applicable or unspecified



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Code	Description
O41.1031	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 1
O41.1032	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 2
O41.1033	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 3
O41.1034	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 4
O41.1035	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 5
O41.1039	Infection of amniotic sac and membranes, unspecified, third trimester, other fetus
O41.1090	Infection of amniotic sac and membranes, unspecified, unspecified trimester, not applicable or unspecified
O41.1091	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 1
O41.1092	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 2
O41.1093	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 3
O41.1094	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 4
O41.1095	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 5
O41.1099	Infection of amniotic sac and membranes, unspecified, unspecified trimester, other fetus
O41.1210	Chorioamnionitis, first trimester, not applicable or unspecified
O41.1211	Chorioamnionitis, first trimester, fetus 1
O41.1212	Chorioamnionitis, first trimester, fetus 2
O41.1213	Chorioamnionitis, first trimester, fetus 3
O41.1214	Chorioamnionitis, first trimester, fetus 4
O41.1215	Chorioamnionitis, first trimester, fetus 5
O41.1219	Chorioamnionitis, first trimester, other fetus
O41.1220	Chorioamnionitis, second trimester, not applicable or unspecified
O41.1221	Chorioamnionitis, second trimester, fetus 1
O41.1222	Chorioamnionitis, second trimester, fetus 2
O41.1223	Chorioamnionitis, second trimester, fetus 3
O41.1224	Chorioamnionitis, second trimester, fetus 4
O41.1225	Chorioamnionitis, second trimester, fetus 5
O41.1229	Chorioamnionitis, second trimester, other fetus
O41.1230	Chorioamnionitis, third trimester, not applicable or unspecified
O41.1231	Chorioamnionitis, third trimester, fetus 1
O41.1232	Chorioamnionitis, third trimester, fetus 2

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Code	Description
O41.1233	Chorioamnionitis, third trimester, fetus 3
O41.1234	Chorioamnionitis, third trimester, fetus 4
O41.1235	Chorioamnionitis, third trimester, fetus 5
O41.1239	Chorioamnionitis, third trimester, other fetus
O41.1290	Chorioamnionitis, unspecified trimester, not applicable or unspecified
O41.1291	Chorioamnionitis, unspecified trimester, fetus 1
O41.1292	Chorioamnionitis, unspecified trimester, fetus 2
O41.1293	Chorioamnionitis, unspecified trimester, fetus 3
O41.1294	Chorioamnionitis, unspecified trimester, fetus 4
O41.1295	Chorioamnionitis, unspecified trimester, fetus 5
O41.1299	Chorioamnionitis, unspecified trimester, other fetus
O41.1410	Placentitis, first trimester, not applicable or unspecified
O41.1411	Placentitis, first trimester, fetus 1
O41.1412	Placentitis, first trimester, fetus 2
O41.1413	Placentitis, first trimester, fetus 3
O41.1414	Placentitis, first trimester, fetus 4
O41.1415	Placentitis, first trimester, fetus 5
O41.1419	Placentitis, first trimester, other fetus
O41.1420	Placentitis, second trimester, not applicable or unspecified
O41.1421	Placentitis, second trimester, fetus 1
O41.1422	Placentitis, second trimester, fetus 2
O41.1423	Placentitis, second trimester, fetus 3
O41.1424	Placentitis, second trimester, fetus 4
O41.1425	Placentitis, second trimester, fetus 5
O41.1429	Placentitis, second trimester, other fetus
O41.1430	Placentitis, third trimester, not applicable or unspecified
O41.1431	Placentitis, third trimester, fetus 1
O41.1432	Placentitis, third trimester, fetus 2
O41.1433	Placentitis, third trimester, fetus 3
O41.1434	Placentitis, third trimester, fetus 4

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Code	Description
O41.1435	Placentitis, third trimester, fetus 5
O41.1439	Placentitis, third trimester, other fetus
O41.1490	Placentitis, unspecified trimester, not applicable or unspecified
O41.1491	Placentitis, unspecified trimester, fetus 1
O41.1492	Placentitis, unspecified trimester, fetus 2
O41.1493	Placentitis, unspecified trimester, fetus 3
O41.1494	Placentitis, unspecified trimester, fetus 4
O41.1495	Placentitis, unspecified trimester, fetus 5
O41.1499	Placentitis, unspecified trimester, other fetus
O43.011	Fetomaternal placental transfusion syndrome, first trimester
O43.012	Fetomaternal placental transfusion syndrome, second trimester
O43.013	Fetomaternal placental transfusion syndrome, third trimester
O43.019	Fetomaternal placental transfusion syndrome, unspecified trimester
O43.211	Placenta accreta, first trimester
O43.212	Placenta accreta, second trimester
O43.213	Placenta accreta, third trimester
O43.221	Placenta increta, first trimester
O43.222	Placenta increta, second trimester
O43.223	Placenta increta, third trimester
O43.231	Placenta percreta, first trimester
O43.232	Placenta percreta, second trimester
O43.233	Placenta percreta, third trimester
O44.00	Complete placenta previa NOS or without hemorrhage, unspecified trimester
O44.01	Complete placenta previa NOS or without hemorrhage, first trimester
O44.02	Complete placenta previa NOS or without hemorrhage, second trimester
O44.03	Complete placenta previa NOS or without hemorrhage, third trimester
O44.10	Complete placenta previa with hemorrhage, unspecified trimester
O44.11	Complete placenta previa with hemorrhage, first trimester
O44.12	Complete placenta previa with hemorrhage, second trimester
O44.13	Complete placenta previa with hemorrhage, third trimester

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Code	Description
*O44.20	*Partial placenta previa NOS or without hemorrhage, unspecified trimester
*O44.21	*Partial placenta previa NOS or without hemorrhage, first trimester
*O44.22	*Partial placenta previa NOS or without hemorrhage, second trimester
*O44.23	*Partial placenta previa NOS or without hemorrhage, third trimester
*O44.30	*Partial placenta previa with hemorrhage, unspecified trimester
*O44.31	*Partial placenta previa with hemorrhage, first trimester
*O44.32	*Partial placenta previa with hemorrhage, second trimester
*O44.33	*Partial placenta previa with hemorrhage, third trimester
*O44.40	*Low lying placenta NOS or without hemorrhage, unspecified trimester
*O44.41	*Low lying placenta NOS or without hemorrhage, first trimester
*O44.42	*Low lying placenta NOS or without hemorrhage, second trimester
*O44.43	*Low lying placenta NOS or without hemorrhage, third trimester
*O44.50	*Low lying placenta with hemorrhage, unspecified trimester
*O44.51	*Low lying placenta with hemorrhage, first trimester
*O44.52	*Low lying placenta with hemorrhage, second trimester
*O44.53	*Low lying placenta with hemorrhage, third trimester
O45.001	Premature separation of placenta with coagulation defect, unspecified, first trimester
O45.002	Premature separation of placenta with coagulation defect, unspecified, second trimester
O45.003	Premature separation of placenta with coagulation defect, unspecified, third trimester
O45.009	Premature separation of placenta with coagulation defect, unspecified, unspecified trimester
O45.011	Premature separation of placenta with afibrinogenemia, first trimester
O45.012	Premature separation of placenta with afibrinogenemia, second trimester
O45.013	Premature separation of placenta with afibrinogenemia, third trimester
O45.019	Premature separation of placenta with afibrinogenemia, unspecified trimester
O45.021	Premature separation of placenta with disseminated intravascular coagulation, first trimester
O45.022	Premature separation of placenta with disseminated intravascular coagulation, second trimester
O45.023	Premature separation of placenta with disseminated intravascular coagulation, third trimester



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Code	Description
O45.029	Premature separation of placenta with disseminated intravascular coagulation, unspecified trimester
O45.091	Premature separation of placenta with other coagulation defect, first trimester
O45.092	Premature separation of placenta with other coagulation defect, second trimester
O45.093	Premature separation of placenta with other coagulation defect, third trimester
O45.099	Premature separation of placenta with other coagulation defect, unspecified trimester
O45.8X1	Other premature separation of placenta, first trimester
O45.8X2	Other premature separation of placenta, second trimester
O45.8X3	Other premature separation of placenta, third trimester
O45.8X9	Other premature separation of placenta, unspecified trimester
O45.90	Premature separation of placenta, unspecified, unspecified trimester
O45.91	Premature separation of placenta, unspecified, first trimester
O45.92	Premature separation of placenta, unspecified, second trimester
O45.93	Premature separation of placenta, unspecified, third trimester
O46.001	Antepartum hemorrhage with coagulation defect, unspecified, first trimester
O46.002	Antepartum hemorrhage with coagulation defect, unspecified, second trimester
O46.003	Antepartum hemorrhage with coagulation defect, unspecified, third trimester
O46.009	Antepartum hemorrhage with coagulation defect, unspecified, unspecified trimester
O46.011	Antepartum hemorrhage with afibrinogenemia, first trimester
O46.012	Antepartum hemorrhage with afibrinogenemia, second trimester
O46.013	Antepartum hemorrhage with afibrinogenemia, third trimester
O46.019	Antepartum hemorrhage with afibrinogenemia, unspecified trimester
O46.021	Antepartum hemorrhage with disseminated intravascular coagulation, first trimester
O46.022	Antepartum hemorrhage with disseminated intravascular coagulation, second trimester
O46.023	Antepartum hemorrhage with disseminated intravascular coagulation, third trimester
O46.029	Antepartum hemorrhage with disseminated intravascular coagulation, unspecified trimester
O46.091	Antepartum hemorrhage with other coagulation defect, first trimester
O46.092	Antepartum hemorrhage with other coagulation defect, second trimester
O46.093	Antepartum hemorrhage with other coagulation defect, third trimester
O46.099	Antepartum hemorrhage with other coagulation defect, unspecified trimester
O46.8X1	Other antepartum hemorrhage, first trimester

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Code	Description
O46.8X2	Other antepartum hemorrhage, second trimester
O46.8X3	Other antepartum hemorrhage, third trimester
O46.8X9	Other antepartum hemorrhage, unspecified trimester
O46.90	Antepartum hemorrhage, unspecified, unspecified trimester
O46.91	Antepartum hemorrhage, unspecified, first trimester
O46.92	Antepartum hemorrhage, unspecified, second trimester
O46.93	Antepartum hemorrhage, unspecified, third trimester
O67.0	Intrapartum hemorrhage with coagulation defect
O67.8	Other intrapartum hemorrhage
O67.9	Intrapartum hemorrhage, unspecified
O72.0	Third-stage hemorrhage
O72.1	Other immediate postpartum hemorrhage
O72.2	Delayed and secondary postpartum hemorrhage
O72.3	Postpartum coagulation defects
O86.0	Infection of obstetric surgical wound
O87.0	Superficial thrombophlebitis in the puerperium
O87.1	Deep phlebothrombosis in the puerperium
O87.3	Cerebral venous thrombosis in the puerperium
O88.011	Air embolism in pregnancy, first trimester
O88.012	Air embolism in pregnancy, second trimester
O88.013	Air embolism in pregnancy, third trimester
O88.019	Air embolism in pregnancy, unspecified trimester
O88.02	Air embolism in childbirth
O88.03	Air embolism in the puerperium
O88.111	Amniotic fluid embolism in pregnancy, first trimester
O88.112	Amniotic fluid embolism in pregnancy, second trimester
O88.113	Amniotic fluid embolism in pregnancy, third trimester
O88.119	Amniotic fluid embolism in pregnancy, unspecified trimester
O88.12	Amniotic fluid embolism in childbirth
O88.13	Amniotic fluid embolism in the puerperium

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Code	Description
O88.211	Thromboembolism in pregnancy, first trimester
O88.212	Thromboembolism in pregnancy, second trimester
O88.213	Thromboembolism in pregnancy, third trimester
O88.219	Thromboembolism in pregnancy, unspecified trimester
O88.22	Thromboembolism in childbirth
O88.23	Thromboembolism in the puerperium
O88.311	Pyemic and septic embolism in pregnancy, first trimester
O88.312	Pyemic and septic embolism in pregnancy, second trimester
O88.313	Pyemic and septic embolism in pregnancy, third trimester
O88.319	Pyemic and septic embolism in pregnancy, unspecified trimester
O88.32	Pyemic and septic embolism in childbirth
O88.33	Pyemic and septic embolism in the puerperium
O88.811	Other embolism in pregnancy, first trimester
O88.812	Other embolism in pregnancy, second trimester
O88.813	Other embolism in pregnancy, third trimester
O88.819	Other embolism in pregnancy, unspecified trimester
O88.82	Other embolism in childbirth
O88.83	Other embolism in the puerperium
O90.2	Hematoma of obstetric wound
O99.111	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, first trimester
O99.112	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, second trimester
O99.113	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, third trimester
O99.119	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, unspecified trimester
O99.12	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating childbirth
O99.13	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating the puerperium
P02.1	Newborn affected by other forms of placental separation and hemorrhage



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Code	Description
P05.9	Newborn affected by slow intrauterine growth, unspecified
P10.0	Subdural hemorrhage due to birth injury
P10.1	Cerebral hemorrhage due to birth injury
P10.2	Intraventricular hemorrhage due to birth injury
P10.3	Subarachnoid hemorrhage due to birth injury
P10.4	Tentorial tear due to birth injury
P10.8	Other intracranial lacerations and hemorrhages due to birth injury
P10.9	Unspecified intracranial laceration and hemorrhage due to birth injury
P11.0	Cerebral edema due to birth injury
P11.1	Other specified brain damage due to birth injury
P11.2	Unspecified brain damage due to birth injury
P11.9	Birth injury to central nervous system, unspecified
P12.2	Epicranial subaponeurotic hemorrhage due to birth injury
P15.0	Birth injury to liver
P15.1	Birth injury to spleen
P15.2	Sternomastoid injury due to birth injury
P15.3	Birth injury to eye
P15.4	Birth injury to face
P15.5	Birth injury to external genitalia
P15.6	Subcutaneous fat necrosis due to birth injury
P15.8	Other specified birth injuries
P26.0	Tracheobronchial hemorrhage originating in the perinatal period
P26.1	Massive pulmonary hemorrhage originating in the perinatal period
P26.8	Other pulmonary hemorrhages originating in the perinatal period
P26.9	Unspecified pulmonary hemorrhage originating in the perinatal period
P50.0	Newborn affected by intrauterine (fetal) blood loss from vasa previa
P50.1	Newborn affected by intrauterine (fetal) blood loss from ruptured cord
P50.2	Newborn affected by intrauterine (fetal) blood loss from placenta
P50.3	Newborn affected by hemorrhage into co-twin
P50.4	Newborn affected by hemorrhage into maternal circulation



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Code	Description
P50.5	Newborn affected by intrauterine (fetal) blood loss from cut end of co-twin's cord
P50.8	Newborn affected by other intrauterine (fetal) blood loss
P50.9	Newborn affected by intrauterine (fetal) blood loss, unspecified
P51.0	Massive umbilical hemorrhage of newborn
P51.8	Other umbilical hemorrhages of newborn
P51.9	Umbilical hemorrhage of newborn, unspecified
P52.0	Intraventricular (nontraumatic) hemorrhage, grade 1, of newborn
P52.1	Intraventricular (nontraumatic) hemorrhage, grade 2, of newborn
P52.21	Intraventricular (nontraumatic) hemorrhage, grade 3, of newborn
P52.22	Intraventricular (nontraumatic) hemorrhage, grade 4, of newborn
P52.3	Unspecified intraventricular (nontraumatic) hemorrhage of newborn
P52.4	Intracerebral (nontraumatic) hemorrhage of newborn
P52.5	Subarachnoid (nontraumatic) hemorrhage of newborn
P52.6	Cerebellar (nontraumatic) and posterior fossa hemorrhage of newborn
P52.8	Other intracranial (nontraumatic) hemorrhages of newborn
P52.9	Intracranial (nontraumatic) hemorrhage of newborn, unspecified
P53	Hemorrhagic disease of newborn
P54.0	Neonatal hematemesis
P54.1	Neonatal melena
P54.2	Neonatal rectal hemorrhage
P54.3	Other neonatal gastrointestinal hemorrhage
P54.4	Neonatal adrenal hemorrhage
P54.5	Neonatal cutaneous hemorrhage
P54.6	Neonatal vaginal hemorrhage
P54.8	Other specified neonatal hemorrhages
P54.9	Neonatal hemorrhage, unspecified
P57.8	Other specified kernicterus
P57.9	Kernicterus, unspecified
P58.0	Neonatal jaundice due to bruising
P58.1	Neonatal jaundice due to bleeding



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Code	Description
P58.2	Neonatal jaundice due to infection
P58.3	Neonatal jaundice due to polycythemia
P58.41	Neonatal jaundice due to drugs or toxins transmitted from mother
P58.42	Neonatal jaundice due to drugs or toxins given to newborn
P58.5	Neonatal jaundice due to swallowed maternal blood
P58.8	Neonatal jaundice due to other specified excessive hemolysis
P58.9	Neonatal jaundice due to excessive hemolysis, unspecified
P59.0	Neonatal jaundice associated with preterm delivery
P59.1	Inspissated bile syndrome
P59.20	Neonatal jaundice from unspecified hepatocellular damage
P59.29	Neonatal jaundice from other hepatocellular damage
P59.3	Neonatal jaundice from breast milk inhibitor
P59.8	Neonatal jaundice from other specified causes
P59.9	Neonatal jaundice, unspecified
P60	Disseminated intravascular coagulation of newborn
P61.0	Transient neonatal thrombocytopenia
P61.1	Polycythemia neonatorum
P61.2	Anemia of prematurity
P61.3	Congenital anemia from fetal blood loss
P61.4	Other congenital anemias, not elsewhere classified
P61.5	Transient neonatal neutropenia
P61.6	Other transient neonatal disorders of coagulation
P61.8	Other specified perinatal hematological disorders
P61.9	Perinatal hematological disorder, unspecified
R04.0	Epistaxis
R04.1	Hemorrhage from throat
R04.2	Hemoptysis
R04.81	Acute idiopathic pulmonary hemorrhage in infants
R04.89	Hemorrhage from other sites in respiratory passages
R04.9	Hemorrhage from respiratory passages, unspecified



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Code	Description
R06.02	Shortness of breath
R07.82	Intercostal pain
R07.89	Other chest pain
R07.9	Chest pain, unspecified
R10.0	Acute abdomen
R10.10	Upper abdominal pain, unspecified
R10.11	Right upper quadrant pain
R10.12	Left upper quadrant pain
R10.13	Epigastric pain
R10.2	Pelvic and perineal pain
R10.30	Lower abdominal pain, unspecified
R10.31	Right lower quadrant pain
R10.32	Left lower quadrant pain
R10.33	Periumbilical pain
R10.83	Colic
R10.84	Generalized abdominal pain
R10.9	Unspecified abdominal pain
R17	Unspecified jaundice
R23.3	Spontaneous ecchymoses
*R29.700	*NIHSS score 0
*R29.701	*NIHSS score 1
*R29.702	*NIHSS score 2
*R29.703	*NIHSS score 3
*R29.704	*NIHSS score 4
*R29.705	*NIHSS score 5
*R29.706	*NIHSS score 6
*R29.707	*NIHSS score 7
*R29.708	*NIHSS score 8
*R29.709	*NIHSS score 9
*R29.710	*NIHSS score 10



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Code	Description
*R29.711	*NIHSS score 11
*R29.712	*NIHSS score 12
*R29.713	*NIHSS score 13
*R29.714	*NIHSS score 14
*R29.715	*NIHSS score 15
*R29.716	*NIHSS score 16
*R29.717	*NIHSS score 17
*R29.718	*NIHSS score 18
*R29.719	*NIHSS score 19
*R29.720	*NIHSS score 20
*R29.721	*NIHSS score 21
*R29.722	*NIHSS score 22
*R29.723	*NIHSS score 23
*R29.724	*NIHSS score 24
*R29.725	*NIHSS score 25
*R29.726	*NIHSS score 26
*R29.727	*NIHSS score 27
*R29.728	*NIHSS score 28
*R29.729	*NIHSS score 29
*R29.730	*NIHSS score 30
*R29.731	*NIHSS score 31
*R29.732	*NIHSS score 32
*R29.733	*NIHSS score 33
*R29.734	*NIHSS score 34
*R29.735	*NIHSS score 35
*R29.736	*NIHSS score 36
*R29.737	*NIHSS score 37
*R29.738	*NIHSS score 38
*R29.739	*NIHSS score 39
*R29.740	*NIHSS score 40



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Code	Description
*R29.741	*NIHSS score 41
*R29.742	*NIHSS score 42
R31.0	Gross hematuria
R31.1	Benign essential microscopic hematuria
R31.21	Asymptomatic microscopic hematuria
R31.29	Other microscopic hematuria
R31.9	Hematuria, unspecified
*R40.2410	*Glasgow coma scale score 13-15, unspecified time
*R40.2411	*Glasgow coma scale score 13-15, in the field [EMT or ambulance]
*R40.2412	*Glasgow coma scale score 13-15, at arrival to emergency department
*R40.2413	*Glasgow coma scale score 13-15, at hospital admission
*R40.2414	*Glasgow coma scale score 13-15, 24 hours or more after hospital admission
*R40.2420	*Glasgow coma scale score 9-12, unspecified time
*R40.2421	*Glasgow coma scale score 9-12, in the field [EMT or ambulance]
*R40.2422	*Glasgow coma scale score 9-12, at arrival to emergency department
*R40.2423	*Glasgow coma scale score 9-12, at hospital admission
*R40.2424	*Glasgow coma scale score 9-12, 24 hours or more after hospital admission
*R40.2430	*Glasgow coma scale score 3-8, unspecified time
*R40.2431	*Glasgow coma scale score 3-8, in the field [EMT or ambulance]
*R40.2432	*Glasgow coma scale score 3-8, at arrival to emergency department
*R40.2433	*Glasgow coma scale score 3-8, at hospital admission
*R40.2434	*Glasgow coma scale score 3-8, 24 hours or more after hospital admission
*R40.2440	*Other coma, without documented Glasgow coma scale score, or with partial score reported, unspecified time
*R40.2441	*Other coma, without documented Glasgow coma scale score, or with partial score reported, in the field [EMT or ambulance]
*R40.2442	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at arrival to emergency department
*R40.2443	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at hospital admission
*R40.2444	*Other coma, without documented Glasgow coma scale score, or with partial score reported, 24 hours or more after hospital admission



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Code	Description
R55	Syncope and collapse
R57.9	Shock, unspecified
R79.1	Abnormal coagulation profile
S00.03XA	Contusion of scalp, initial encounter
S00.10XA	Contusion of unspecified eyelid and periorcular area, initial encounter
S00.11XA	Contusion of right eyelid and periorcular area, initial encounter
S00.12XA	Contusion of left eyelid and periorcular area, initial encounter
S00.33XA	Contusion of nose, initial encounter
S00.431A	Contusion of right ear, initial encounter
S00.432A	Contusion of left ear, initial encounter
S00.439A	Contusion of unspecified ear, initial encounter
S00.531A	Contusion of lip, initial encounter
S00.532A	Contusion of oral cavity, initial encounter
S00.83XA	Contusion of other part of head, initial encounter
S00.93XA	Contusion of unspecified part of head, initial encounter
S01.90XA	Unspecified open wound of unspecified part of head, initial encounter
S02.0XXA	Fracture of vault of skull, initial encounter for closed fracture
S02.0XXB	Fracture of vault of skull, initial encounter for open fracture
*S02.101A	*Fracture of base of skull, right side, initial encounter for closed fracture
*S02.101B	*Fracture of base of skull, right side, initial encounter for open fracture
*S02.102A	*Fracture of base of skull, left side, initial encounter for closed fracture
*S02.102B	*Fracture of base of skull, left side, initial encounter for open fracture
*S02.109A	*Fracture of base of skull, unspecified side, initial encounter for closed fracture
*S02.109B	*Fracture of base of skull, unspecified side, initial encounter for open fracture
S02.110A	Type I occipital condyle fracture, unspecified side, initial encounter for closed fracture
S02.110B	Type I occipital condyle fracture, unspecified side, initial encounter for open fracture
S02.111A	Type II occipital condyle fracture, unspecified side, initial encounter for closed fracture
S02.111B	Type II occipital condyle fracture, unspecified side, initial encounter for open fracture
S02.112A	Type III occipital condyle fracture, unspecified side, initial encounter for closed fracture
S02.112B	Type III occipital condyle fracture, unspecified side, initial encounter for open fracture

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***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S02.113A	Unspecified occipital condyle fracture, initial encounter for closed fracture
S02.113B	Unspecified occipital condyle fracture, initial encounter for open fracture
S02.118A	Other fracture of occiput, unspecified side, initial encounter for closed fracture
S02.118B	Other fracture of occiput, unspecified side, initial encounter for open fracture
S02.119A	Unspecified fracture of occiput, initial encounter for closed fracture
S02.119B	Unspecified fracture of occiput, initial encounter for open fracture
*S02.11AA	*Type I occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11AB	*Type I occipital condyle fracture, right side, initial encounter for open fracture
*S02.11BA	*Type I occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11BB	*Type I occipital condyle fracture, left side, initial encounter for open fracture
*S02.11CA	*Type II occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11CB	*Type II occipital condyle fracture, right side, initial encounter for open fracture
*S02.11DA	*Type II occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11DB	*Type II occipital condyle fracture, left side, initial encounter for open fracture
*S02.11EA	*Type III occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11EB	*Type III occipital condyle fracture, right side, initial encounter for open fracture
*S02.11FA	*Type III occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11FB	*Type III occipital condyle fracture, left side, initial encounter for open fracture
*S02.11GA	*Other fracture of occiput, right side, initial encounter for closed fracture
*S02.11GB	*Other fracture of occiput, right side, initial encounter for open fracture
*S02.11HA	*Other fracture of occiput, left side, initial encounter for closed fracture
*S02.11HB	*Other fracture of occiput, left side, initial encounter for open fracture
S02.19XA	Other fracture of base of skull, initial encounter for closed fracture
S02.19XB	Other fracture of base of skull, initial encounter for open fracture
*S02.30XA	*Fracture of orbital floor, unspecified side, initial encounter for closed fracture
*S02.30XB	*Fracture of orbital floor, unspecified side, initial encounter for open fracture
*S02.31XA	*Fracture of orbital floor, right side, initial encounter for closed fracture
*S02.31XB	*Fracture of orbital floor, right side, initial encounter for open fracture
*S02.32XA	*Fracture of orbital floor, left side, initial encounter for closed fracture
*S02.32XB	*Fracture of orbital floor, left side, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
S02.400A	Malar fracture, unspecified side, initial encounter for closed fracture
S02.400B	Malar fracture, unspecified side, initial encounter for open fracture
S02.401A	Maxillary fracture, unspecified side, initial encounter for closed fracture
S02.401B	Maxillary fracture, unspecified side, initial encounter for open fracture
S02.402A	Zygomatic fracture, unspecified side, initial encounter for closed fracture
S02.402B	Zygomatic fracture, unspecified side, initial encounter for open fracture
*S02.40AA	*Malar fracture, right side, initial encounter for closed fracture
*S02.40AB	*Malar fracture, right side, initial encounter for open fracture
*S02.40BA	*Malar fracture, left side, initial encounter for closed fracture
*S02.40BB	*Malar fracture, left side, initial encounter for open fracture
*S02.40CA	*Maxillary fracture, right side, initial encounter for closed fracture
*S02.40CB	*Maxillary fracture, right side, initial encounter for open fracture
*S02.40DA	*Maxillary fracture, left side, initial encounter for closed fracture
*S02.40DB	*Maxillary fracture, left side, initial encounter for open fracture
*S02.40EA	*Zygomatic fracture, right side, initial encounter for closed fracture
*S02.40EB	*Zygomatic fracture, right side, initial encounter for open fracture
*S02.40FA	*Zygomatic fracture, left side, initial encounter for closed fracture
*S02.40FB	*Zygomatic fracture, left side, initial encounter for open fracture
S02.411A	LeFort I fracture, initial encounter for closed fracture
S02.411B	LeFort I fracture, initial encounter for open fracture
S02.412A	LeFort II fracture, initial encounter for closed fracture
S02.412B	LeFort II fracture, initial encounter for open fracture
S02.413A	LeFort III fracture, initial encounter for closed fracture
S02.413B	LeFort III fracture, initial encounter for open fracture
S02.42XA	Fracture of alveolus of maxilla, initial encounter for closed fracture
S02.42XB	Fracture of alveolus of maxilla, initial encounter for open fracture
S02.600A	Fracture of unspecified part of body of mandible, unspecified side, initial encounter for closed fracture
S02.600B	Fracture of unspecified part of body of mandible, unspecified side, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
*S02.601A	*Fracture of unspecified part of body of right mandible, initial encounter for closed fracture
*S02.601B	*Fracture of unspecified part of body of right mandible, initial encounter for open fracture
*S02.602A	*Fracture of unspecified part of body of left mandible, initial encounter for closed fracture
*S02.602B	*Fracture of unspecified part of body of left mandible, initial encounter for open fracture
S02.609A	Fracture of mandible, unspecified, initial encounter for closed fracture
S02.609B	Fracture of mandible, unspecified, initial encounter for open fracture
*S02.610A	*Fracture of condylar process of mandible, unspecified side, initial encounter for closed fracture
*S02.610B	*Fracture of condylar process of mandible, unspecified side, initial encounter for open fracture
*S02.611A	*Fracture of condylar process of right mandible, initial encounter for closed fracture
*S02.611B	*Fracture of condylar process of right mandible, initial encounter for open fracture
*S02.612A	*Fracture of condylar process of left mandible, initial encounter for closed fracture
*S02.612B	*Fracture of condylar process of left mandible, initial encounter for open fracture
*S02.620A	*Fracture of subcondylar process of mandible, unspecified side, initial encounter for closed fracture
*S02.620B	*Fracture of subcondylar process of mandible, unspecified side, initial encounter for open fracture
*S02.621A	*Fracture of subcondylar process of right mandible, initial encounter for closed fracture
*S02.621B	*Fracture of subcondylar process of right mandible, initial encounter for open fracture
*S02.622A	*Fracture of subcondylar process of left mandible, initial encounter for closed fracture
*S02.622B	*Fracture of subcondylar process of left mandible, initial encounter for open fracture
*S02.630A	*Fracture of coronoid process of mandible, unspecified side, initial encounter for closed fracture
*S02.630B	*Fracture of coronoid process of mandible, unspecified side, initial encounter for open fracture
*S02.631A	*Fracture of coronoid process of right mandible, initial encounter for closed fracture
*S02.631B	*Fracture of coronoid process of right mandible, initial encounter for open fracture



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S02.632A	*Fracture of coronoid process of left mandible, initial encounter for closed fracture
*S02.632B	*Fracture of coronoid process of left mandible, initial encounter for open fracture
*S02.640A	*Fracture of ramus of mandible, unspecified side, initial encounter for closed fracture
*S02.640B	*Fracture of ramus of mandible, unspecified side, initial encounter for open fracture
*S02.641A	*Fracture of ramus of right mandible, initial encounter for closed fracture
*S02.641B	*Fracture of ramus of right mandible, initial encounter for open fracture
*S02.642A	*Fracture of ramus of left mandible, initial encounter for closed fracture
*S02.642B	*Fracture of ramus of left mandible, initial encounter for open fracture
*S02.650A	*Fracture of angle of mandible, unspecified side, initial encounter for closed fracture
*S02.650B	*Fracture of angle of mandible, unspecified side, initial encounter for open fracture
*S02.651A	*Fracture of angle of right mandible, initial encounter for closed fracture
*S02.651B	*Fracture of angle of right mandible, initial encounter for open fracture
*S02.652A	*Fracture of angle of left mandible, initial encounter for closed fracture
*S02.652B	*Fracture of angle of left mandible, initial encounter for open fracture
S02.66XA	Fracture of symphysis of mandible, initial encounter for closed fracture
S02.66XB	Fracture of symphysis of mandible, initial encounter for open fracture
*S02.670A	*Fracture of alveolus of mandible, unspecified side, initial encounter for closed fracture
*S02.670B	*Fracture of alveolus of mandible, unspecified side, initial encounter for open fracture
*S02.671A	*Fracture of alveolus of right mandible, initial encounter for closed fracture
*S02.671B	*Fracture of alveolus of right mandible, initial encounter for open fracture
*S02.672A	*Fracture of alveolus of left mandible, initial encounter for closed fracture
*S02.672B	*Fracture of alveolus of left mandible, initial encounter for open fracture
S02.69XA	Fracture of mandible of other specified site, initial encounter for closed fracture
S02.69XB	Fracture of mandible of other specified site, initial encounter for open fracture
*S02.80XA	*Fracture of other specified skull and facial bones, unspecified side, initial encounter for closed fracture
*S02.80XB	*Fracture of other specified skull and facial bones, unspecified side, initial encounter for open fracture



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S02.81XA	*Fracture of other specified skull and facial bones, right side, initial encounter for closed fracture
*S02.81XB	*Fracture of other specified skull and facial bones, right side, initial encounter for open fracture
*S02.82XA	*Fracture of other specified skull and facial bones, left side, initial encounter for closed fracture
*S02.82XB	*Fracture of other specified skull and facial bones, left side, initial encounter for open fracture
S02.91XA	Unspecified fracture of skull, initial encounter for closed fracture
S02.91XB	Unspecified fracture of skull, initial encounter for open fracture
S02.92XA	Unspecified fracture of facial bones, initial encounter for closed fracture
S02.92XB	Unspecified fracture of facial bones, initial encounter for open fracture
S05.10XA	Contusion of eyeball and orbital tissues, unspecified eye, initial encounter
S05.11XA	Contusion of eyeball and orbital tissues, right eye, initial encounter
S05.12XA	Contusion of eyeball and orbital tissues, left eye, initial encounter
S05.90XA	Unspecified injury of unspecified eye and orbit, initial encounter
S06.330A	Contusion and laceration of cerebrum, unspecified, without loss of consciousness, initial encounter
S06.331A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of 30 minutes or less, initial encounter
S06.332A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.333A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.334A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.335A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.336A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.337A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.338A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S06.339A	Contusion and laceration of cerebrum, unspecified, with loss of consciousness of unspecified duration, initial encounter
S06.340A	Traumatic hemorrhage of right cerebrum without loss of consciousness, initial encounter
S06.341A	Traumatic hemorrhage of right cerebrum with loss of consciousness of 30 minutes or less, initial encounter
S06.342A	Traumatic hemorrhage of right cerebrum with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.343A	Traumatic hemorrhage of right cerebrum with loss of consciousness of 1 hours to 5 hours 59 minutes, initial encounter
S06.344A	Traumatic hemorrhage of right cerebrum with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.345A	Traumatic hemorrhage of right cerebrum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.346A	Traumatic hemorrhage of right cerebrum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.347A	Traumatic hemorrhage of right cerebrum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.348A	Traumatic hemorrhage of right cerebrum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.349A	Traumatic hemorrhage of right cerebrum with loss of consciousness of unspecified duration, initial encounter
S06.350A	Traumatic hemorrhage of left cerebrum without loss of consciousness, initial encounter
S06.351A	Traumatic hemorrhage of left cerebrum with loss of consciousness of 30 minutes or less, initial encounter
S06.352A	Traumatic hemorrhage of left cerebrum with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.353A	Traumatic hemorrhage of left cerebrum with loss of consciousness of 1 hours to 5 hours 59 minutes, initial encounter
S06.354A	Traumatic hemorrhage of left cerebrum with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.355A	Traumatic hemorrhage of left cerebrum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.356A	Traumatic hemorrhage of left cerebrum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.357A	Traumatic hemorrhage of left cerebrum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter



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Code	Description
S06.358A	Traumatic hemorrhage of left cerebrum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.359A	Traumatic hemorrhage of left cerebrum with loss of consciousness of unspecified duration, initial encounter
S06.360A	Traumatic hemorrhage of cerebrum, unspecified, without loss of consciousness, initial encounter
S06.361A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 30 minutes or less, initial encounter
S06.362A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.363A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 1 hours to 5 hours 59 minutes, initial encounter
S06.364A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.365A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.366A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.367A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.368A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.369A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of unspecified duration, initial encounter
S06.4X0A	Epidural hemorrhage without loss of consciousness, initial encounter
S06.4X1A	Epidural hemorrhage with loss of consciousness of 30 minutes or less, initial encounter
S06.4X2A	Epidural hemorrhage with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.4X3A	Epidural hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.4X4A	Epidural hemorrhage with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.4X5A	Epidural hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.4X6A	Epidural hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter



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Code	Description
S06.4X7A	Epidural hemorrhage with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.4X8A	Epidural hemorrhage with loss of consciousness of any duration with death due to other causes prior to regaining consciousness, initial encounter
S06.4X9A	Epidural hemorrhage with loss of consciousness of unspecified duration, initial encounter
S06.5X0A	Traumatic subdural hemorrhage without loss of consciousness, initial encounter
S06.5X1A	Traumatic subdural hemorrhage with loss of consciousness of 30 minutes or less, initial encounter
S06.5X2A	Traumatic subdural hemorrhage with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.5X3A	Traumatic subdural hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.5X4A	Traumatic subdural hemorrhage with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.5X5A	Traumatic subdural hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.5X6A	Traumatic subdural hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.5X7A	Traumatic subdural hemorrhage with loss of consciousness of any duration with death due to brain injury before regaining consciousness, initial encounter
S06.5X8A	Traumatic subdural hemorrhage with loss of consciousness of any duration with death due to other cause before regaining consciousness, initial encounter
S06.5X9A	Traumatic subdural hemorrhage with loss of consciousness of unspecified duration, initial encounter
S06.6X0A	Traumatic subarachnoid hemorrhage without loss of consciousness, initial encounter
S06.6X1A	Traumatic subarachnoid hemorrhage with loss of consciousness of 30 minutes or less, initial encounter
S06.6X2A	Traumatic subarachnoid hemorrhage with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.6X3A	Traumatic subarachnoid hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.6X4A	Traumatic subarachnoid hemorrhage with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.6X5A	Traumatic subarachnoid hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter



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Code	Description
S06.6X6A	Traumatic subarachnoid hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.6X7A	Traumatic subarachnoid hemorrhage with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.6X8A	Traumatic subarachnoid hemorrhage with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.6X9A	Traumatic subarachnoid hemorrhage with loss of consciousness of unspecified duration, initial encounter
S06.890A	Other specified intracranial injury without loss of consciousness, initial encounter
S06.891A	Other specified intracranial injury with loss of consciousness of 30 minutes or less, initial encounter
S06.892A	Other specified intracranial injury with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.893A	Other specified intracranial injury with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.894A	Other specified intracranial injury with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.895A	Other specified intracranial injury with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.896A	Other specified intracranial injury with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.897A	Other specified intracranial injury with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.898A	Other specified intracranial injury with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.899A	Other specified intracranial injury with loss of consciousness of unspecified duration, initial encounter
S06.9X0A	Unspecified intracranial injury without loss of consciousness, initial encounter
S06.9X1A	Unspecified intracranial injury with loss of consciousness of 30 minutes or less, initial encounter
S06.9X2A	Unspecified intracranial injury with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.9X3A	Unspecified intracranial injury with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.9X4A	Unspecified intracranial injury with loss of consciousness of 6 hours to 24 hours, initial encounter



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Code	Description
S06.9X5A	Unspecified intracranial injury with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.9X6A	Unspecified intracranial injury with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.9X7A	Unspecified intracranial injury with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.9X8A	Unspecified intracranial injury with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.9X9A	Unspecified intracranial injury with loss of consciousness of unspecified duration, initial encounter
S07.0XXA	Crushing injury of face, initial encounter
S07.1XXA	Crushing injury of skull, initial encounter
S07.8XXA	Crushing injury of other parts of head, initial encounter
S07.9XXA	Crushing injury of head, part unspecified, initial encounter
S09.0XXA	Injury of blood vessels of head, not elsewhere classified, initial encounter
S10.0XXA	Contusion of throat, initial encounter
S10.83XA	Contusion of other specified part of neck, initial encounter
S10.93XA	Contusion of unspecified part of neck, initial encounter
S12.000A	Unspecified displaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.000B	Unspecified displaced fracture of first cervical vertebra, initial encounter for open fracture
S12.001A	Unspecified nondisplaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.001B	Unspecified nondisplaced fracture of first cervical vertebra, initial encounter for open fracture
S12.01XA	Stable burst fracture of first cervical vertebra, initial encounter for closed fracture
S12.01XB	Stable burst fracture of first cervical vertebra, initial encounter for open fracture
S12.02XA	Unstable burst fracture of first cervical vertebra, initial encounter for closed fracture
S12.02XB	Unstable burst fracture of first cervical vertebra, initial encounter for open fracture
S12.030A	Displaced posterior arch fracture of first cervical vertebra, initial encounter for closed fracture
S12.030B	Displaced posterior arch fracture of first cervical vertebra, initial encounter for open fracture
S12.031A	Nondisplaced posterior arch fracture of first cervical vertebra, initial encounter for closed fracture

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Code	Description
S12.031B	Nondisplaced posterior arch fracture of first cervical vertebra, initial encounter for open fracture
S12.040A	Displaced lateral mass fracture of first cervical vertebra, initial encounter for closed fracture
S12.040B	Displaced lateral mass fracture of first cervical vertebra, initial encounter for open fracture
S12.041A	Nondisplaced lateral mass fracture of first cervical vertebra, initial encounter for closed fracture
S12.041B	Nondisplaced lateral mass fracture of first cervical vertebra, initial encounter for open fracture
S12.090A	Other displaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.090B	Other displaced fracture of first cervical vertebra, initial encounter for open fracture
S12.091A	Other nondisplaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.091B	Other nondisplaced fracture of first cervical vertebra, initial encounter for open fracture
S12.100A	Unspecified displaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.100B	Unspecified displaced fracture of second cervical vertebra, initial encounter for open fracture
S12.101A	Unspecified nondisplaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.101B	Unspecified nondisplaced fracture of second cervical vertebra, initial encounter for open fracture
S12.110A	Anterior displaced Type II dens fracture, initial encounter for closed fracture
S12.110B	Anterior displaced Type II dens fracture, initial encounter for open fracture
S12.111A	Posterior displaced Type II dens fracture, initial encounter for closed fracture
S12.111B	Posterior displaced Type II dens fracture, initial encounter for open fracture
S12.112A	Nondisplaced Type II dens fracture, initial encounter for closed fracture
S12.112B	Nondisplaced Type II dens fracture, initial encounter for open fracture
S12.120A	Other displaced dens fracture, initial encounter for closed fracture
S12.120B	Other displaced dens fracture, initial encounter for open fracture
S12.121A	Other nondisplaced dens fracture, initial encounter for closed fracture
S12.121B	Other nondisplaced dens fracture, initial encounter for open fracture
S12.130A	Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture



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Code	Description
S12.130B	Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.131A	Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.131B	Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.14XA	Type III traumatic spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.14XB	Type III traumatic spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.150A	Other traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.150B	Other traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.151A	Other traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.151B	Other traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.190A	Other displaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.190B	Other displaced fracture of second cervical vertebra, initial encounter for open fracture
S12.191A	Other nondisplaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.191B	Other nondisplaced fracture of second cervical vertebra, initial encounter for open fracture
S12.200A	Unspecified displaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.200B	Unspecified displaced fracture of third cervical vertebra, initial encounter for open fracture
S12.201A	Unspecified nondisplaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.201B	Unspecified nondisplaced fracture of third cervical vertebra, initial encounter for open fracture
S12.230A	Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.230B	Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.231A	Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
S12.231B	Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.24XA	Type III traumatic spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.24XB	Type III traumatic spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.250A	Other traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.250B	Other traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.251A	Other traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.251B	Other traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.290A	Other displaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.290B	Other displaced fracture of third cervical vertebra, initial encounter for open fracture
S12.291A	Other nondisplaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.291B	Other nondisplaced fracture of third cervical vertebra, initial encounter for open fracture
S12.300A	Unspecified displaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.300B	Unspecified displaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.301A	Unspecified nondisplaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.301B	Unspecified nondisplaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.330A	Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.330B	Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.331A	Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.331B	Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.34XA	Type III traumatic spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S12.34XB	Type III traumatic spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.350A	Other traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.350B	Other traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.351A	Other traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.351B	Other traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.390A	Other displaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.390B	Other displaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.391A	Other nondisplaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.391B	Other nondisplaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.400A	Unspecified displaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.400B	Unspecified displaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.401A	Unspecified nondisplaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.401B	Unspecified nondisplaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.430A	Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.430B	Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.431A	Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.431B	Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.44XA	Type III traumatic spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.44XB	Type III traumatic spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.450A	Other traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S12.450B	Other traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.451A	Other traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.451B	Other traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.490A	Other displaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.490B	Other displaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.491A	Other nondisplaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.491B	Other nondisplaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.500A	Unspecified displaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.500B	Unspecified displaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.501A	Unspecified nondisplaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.501B	Unspecified nondisplaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.530A	Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.530B	Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.531A	Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.531B	Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.54XA	Type III traumatic spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.54XB	Type III traumatic spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.550A	Other traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.550B	Other traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.551A	Other traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S12.551B	Other traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.590A	Other displaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.590B	Other displaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.591A	Other nondisplaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.591B	Other nondisplaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.600A	Unspecified displaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.600B	Unspecified displaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.601A	Unspecified nondisplaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.601B	Unspecified nondisplaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.630A	Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.630B	Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.631A	Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.631B	Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.64XA	Type III traumatic spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.64XB	Type III traumatic spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.650A	Other traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.650B	Other traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.651A	Other traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.651B	Other traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.690A	Other displaced fracture of seventh cervical vertebra, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S12.690B	Other displaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.691A	Other nondisplaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.691B	Other nondisplaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.9XXA	Fracture of neck, unspecified, initial encounter
S14.101A	Unspecified injury at C1 level of cervical spinal cord, initial encounter
S14.102A	Unspecified injury at C2 level of cervical spinal cord, initial encounter
S14.103A	Unspecified injury at C3 level of cervical spinal cord, initial encounter
S14.104A	Unspecified injury at C4 level of cervical spinal cord, initial encounter
S14.105A	Unspecified injury at C5 level of cervical spinal cord, initial encounter
S14.106A	Unspecified injury at C6 level of cervical spinal cord, initial encounter
S14.107A	Unspecified injury at C7 level of cervical spinal cord, initial encounter
S14.109A	Unspecified injury at unspecified level of cervical spinal cord, initial encounter
S14.111A	Complete lesion at C1 level of cervical spinal cord, initial encounter
S14.112A	Complete lesion at C2 level of cervical spinal cord, initial encounter
S14.113A	Complete lesion at C3 level of cervical spinal cord, initial encounter
S14.114A	Complete lesion at C4 level of cervical spinal cord, initial encounter
S14.115A	Complete lesion at C5 level of cervical spinal cord, initial encounter
S14.116A	Complete lesion at C6 level of cervical spinal cord, initial encounter
S14.117A	Complete lesion at C7 level of cervical spinal cord, initial encounter
S14.121A	Central cord syndrome at C1 level of cervical spinal cord, initial encounter
S14.122A	Central cord syndrome at C2 level of cervical spinal cord, initial encounter
S14.123A	Central cord syndrome at C3 level of cervical spinal cord, initial encounter
S14.124A	Central cord syndrome at C4 level of cervical spinal cord, initial encounter
S14.125A	Central cord syndrome at C5 level of cervical spinal cord, initial encounter
S14.126A	Central cord syndrome at C6 level of cervical spinal cord, initial encounter
S14.127A	Central cord syndrome at C7 level of cervical spinal cord, initial encounter
S14.131A	Anterior cord syndrome at C1 level of cervical spinal cord, initial encounter
S14.132A	Anterior cord syndrome at C2 level of cervical spinal cord, initial encounter
S14.133A	Anterior cord syndrome at C3 level of cervical spinal cord, initial encounter
S14.134A	Anterior cord syndrome at C4 level of cervical spinal cord, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S14.135A	Anterior cord syndrome at C5 level of cervical spinal cord, initial encounter
S14.136A	Anterior cord syndrome at C6 level of cervical spinal cord, initial encounter
S14.137A	Anterior cord syndrome at C7 level of cervical spinal cord, initial encounter
S14.151A	Other incomplete lesion at C1 level of cervical spinal cord, initial encounter
S14.152A	Other incomplete lesion at C2 level of cervical spinal cord, initial encounter
S14.153A	Other incomplete lesion at C3 level of cervical spinal cord, initial encounter
S14.154A	Other incomplete lesion at C4 level of cervical spinal cord, initial encounter
S14.155A	Other incomplete lesion at C5 level of cervical spinal cord, initial encounter
S14.156A	Other incomplete lesion at C6 level of cervical spinal cord, initial encounter
S14.157A	Other incomplete lesion at C7 level of cervical spinal cord, initial encounter
S15.001A	Unspecified injury of right carotid artery, initial encounter
S15.002A	Unspecified injury of left carotid artery, initial encounter
S15.009A	Unspecified injury of unspecified carotid artery, initial encounter
S15.011A	Minor laceration of right carotid artery, initial encounter
S15.012A	Minor laceration of left carotid artery, initial encounter
S15.019A	Minor laceration of unspecified carotid artery, initial encounter
S15.021A	Major laceration of right carotid artery, initial encounter
S15.022A	Major laceration of left carotid artery, initial encounter
S15.029A	Major laceration of unspecified carotid artery, initial encounter
S15.091A	Other specified injury of right carotid artery, initial encounter
S15.092A	Other specified injury of left carotid artery, initial encounter
S15.099A	Other specified injury of unspecified carotid artery, initial encounter
S15.101A	Unspecified injury of right vertebral artery, initial encounter
S15.102A	Unspecified injury of left vertebral artery, initial encounter
S15.109A	Unspecified injury of unspecified vertebral artery, initial encounter
S15.111A	Minor laceration of right vertebral artery, initial encounter
S15.112A	Minor laceration of left vertebral artery, initial encounter
S15.119A	Minor laceration of unspecified vertebral artery, initial encounter
S15.121A	Major laceration of right vertebral artery, initial encounter
S15.122A	Major laceration of left vertebral artery, initial encounter



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Code	Description
S15.129A	Major laceration of unspecified vertebral artery, initial encounter
S15.191A	Other specified injury of right vertebral artery, initial encounter
S15.192A	Other specified injury of left vertebral artery, initial encounter
S15.199A	Other specified injury of unspecified vertebral artery, initial encounter
S15.201A	Unspecified injury of right external jugular vein, initial encounter
S15.202A	Unspecified injury of left external jugular vein, initial encounter
S15.209A	Unspecified injury of unspecified external jugular vein, initial encounter
S15.211A	Minor laceration of right external jugular vein, initial encounter
S15.212A	Minor laceration of left external jugular vein, initial encounter
S15.219A	Minor laceration of unspecified external jugular vein, initial encounter
S15.221A	Major laceration of right external jugular vein, initial encounter
S15.222A	Major laceration of left external jugular vein, initial encounter
S15.229A	Major laceration of unspecified external jugular vein, initial encounter
S15.291A	Other specified injury of right external jugular vein, initial encounter
S15.292A	Other specified injury of left external jugular vein, initial encounter
S15.299A	Other specified injury of unspecified external jugular vein, initial encounter
S15.301A	Unspecified injury of right internal jugular vein, initial encounter
S15.302A	Unspecified injury of left internal jugular vein, initial encounter
S15.309A	Unspecified injury of unspecified internal jugular vein, initial encounter
S15.311A	Minor laceration of right internal jugular vein, initial encounter
S15.312A	Minor laceration of left internal jugular vein, initial encounter
S15.319A	Minor laceration of unspecified internal jugular vein, initial encounter
S15.321A	Major laceration of right internal jugular vein, initial encounter
S15.322A	Major laceration of left internal jugular vein, initial encounter
S15.329A	Major laceration of unspecified internal jugular vein, initial encounter
S15.391A	Other specified injury of right internal jugular vein, initial encounter
S15.392A	Other specified injury of left internal jugular vein, initial encounter
S15.399A	Other specified injury of unspecified internal jugular vein, initial encounter
S15.8XXA	Injury of other specified blood vessels at neck level, initial encounter
S15.9XXA	Injury of unspecified blood vessel at neck level, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S17.0XXA	Crushing injury of larynx and trachea, initial encounter
S17.8XXA	Crushing injury of other specified parts of neck, initial encounter
S17.9XXA	Crushing injury of neck, part unspecified, initial encounter
S20.00XA	Contusion of breast, unspecified breast, initial encounter
S20.01XA	Contusion of right breast, initial encounter
S20.02XA	Contusion of left breast, initial encounter
S20.20XA	Contusion of thorax, unspecified, initial encounter
S20.211A	Contusion of right front wall of thorax, initial encounter
S20.212A	Contusion of left front wall of thorax, initial encounter
S20.219A	Contusion of unspecified front wall of thorax, initial encounter
S20.221A	Contusion of right back wall of thorax, initial encounter
S20.222A	Contusion of left back wall of thorax, initial encounter
S20.229A	Contusion of unspecified back wall of thorax, initial encounter
S21.301A	Unspecified open wound of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.302A	Unspecified open wound of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.309A	Unspecified open wound of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.311A	Laceration without foreign body of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.312A	Laceration without foreign body of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.319A	Laceration without foreign body of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.321A	Laceration with foreign body of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.322A	Laceration with foreign body of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.329A	Laceration with foreign body of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.331A	Puncture wound without foreign body of right front wall of thorax with penetration into thoracic cavity, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S21.332A	Puncture wound without foreign body of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.339A	Puncture wound without foreign body of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.341A	Puncture wound with foreign body of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.342A	Puncture wound with foreign body of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.349A	Puncture wound with foreign body of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.351A	Open bite of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.352A	Open bite of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.359A	Open bite of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.401A	Unspecified open wound of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.402A	Unspecified open wound of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.409A	Unspecified open wound of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.411A	Laceration without foreign body of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.412A	Laceration without foreign body of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.419A	Laceration without foreign body of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.421A	Laceration with foreign body of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.422A	Laceration with foreign body of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.429A	Laceration with foreign body of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.431A	Puncture wound without foreign body of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.432A	Puncture wound without foreign body of left back wall of thorax with penetration into thoracic cavity, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S21.439A	Puncture wound without foreign body of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.441A	Puncture wound with foreign body of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.442A	Puncture wound with foreign body of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.449A	Puncture wound with foreign body of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.451A	Open bite of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.452A	Open bite of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.459A	Open bite of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S22.000A	Wedge compression fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.000B	Wedge compression fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.001A	Stable burst fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.001B	Stable burst fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.002A	Unstable burst fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.002B	Unstable burst fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.008A	Other fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.008B	Other fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.009A	Unspecified fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.009B	Unspecified fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.010A	Wedge compression fracture of first thoracic vertebra, initial encounter for closed fracture
S22.010B	Wedge compression fracture of first thoracic vertebra, initial encounter for open fracture
S22.011A	Stable burst fracture of first thoracic vertebra, initial encounter for closed fracture
S22.011B	Stable burst fracture of first thoracic vertebra, initial encounter for open fracture
S22.012A	Unstable burst fracture of first thoracic vertebra, initial encounter for closed fracture
S22.012B	Unstable burst fracture of first thoracic vertebra, initial encounter for open fracture
S22.018A	Other fracture of first thoracic vertebra, initial encounter for closed fracture
S22.018B	Other fracture of first thoracic vertebra, initial encounter for open fracture
S22.019A	Unspecified fracture of first thoracic vertebra, initial encounter for closed fracture

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S22.019B	Unspecified fracture of first thoracic vertebra, initial encounter for open fracture
S22.020A	Wedge compression fracture of second thoracic vertebra, initial encounter for closed fracture
S22.020B	Wedge compression fracture of second thoracic vertebra, initial encounter for open fracture
S22.021A	Stable burst fracture of second thoracic vertebra, initial encounter for closed fracture
S22.021B	Stable burst fracture of second thoracic vertebra, initial encounter for open fracture
S22.022A	Unstable burst fracture of second thoracic vertebra, initial encounter for closed fracture
S22.022B	Unstable burst fracture of second thoracic vertebra, initial encounter for open fracture
S22.028A	Other fracture of second thoracic vertebra, initial encounter for closed fracture
S22.028B	Other fracture of second thoracic vertebra, initial encounter for open fracture
S22.029A	Unspecified fracture of second thoracic vertebra, initial encounter for closed fracture
S22.029B	Unspecified fracture of second thoracic vertebra, initial encounter for open fracture
S22.030A	Wedge compression fracture of third thoracic vertebra, initial encounter for closed fracture
S22.030B	Wedge compression fracture of third thoracic vertebra, initial encounter for open fracture
S22.031A	Stable burst fracture of third thoracic vertebra, initial encounter for closed fracture
S22.031B	Stable burst fracture of third thoracic vertebra, initial encounter for open fracture
S22.032A	Unstable burst fracture of third thoracic vertebra, initial encounter for closed fracture
S22.032B	Unstable burst fracture of third thoracic vertebra, initial encounter for open fracture
S22.038A	Other fracture of third thoracic vertebra, initial encounter for closed fracture
S22.038B	Other fracture of third thoracic vertebra, initial encounter for open fracture
S22.039A	Unspecified fracture of third thoracic vertebra, initial encounter for closed fracture
S22.039B	Unspecified fracture of third thoracic vertebra, initial encounter for open fracture
S22.040A	Wedge compression fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.040B	Wedge compression fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.041A	Stable burst fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.041B	Stable burst fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.042A	Unstable burst fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.042B	Unstable burst fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.048A	Other fracture of fourth thoracic vertebra, initial encounter for closed fracture



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Code	Description
S22.048B	Other fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.049A	Unspecified fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.049B	Unspecified fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.050A	Wedge compression fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.050B	Wedge compression fracture of T5-T6 vertebra, initial encounter for open fracture
S22.051A	Stable burst fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.051B	Stable burst fracture of T5-T6 vertebra, initial encounter for open fracture
S22.052A	Unstable burst fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.052B	Unstable burst fracture of T5-T6 vertebra, initial encounter for open fracture
S22.058A	Other fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.058B	Other fracture of T5-T6 vertebra, initial encounter for open fracture
S22.059A	Unspecified fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.059B	Unspecified fracture of T5-T6 vertebra, initial encounter for open fracture
S22.060A	Wedge compression fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.060B	Wedge compression fracture of T7-T8 vertebra, initial encounter for open fracture
S22.061A	Stable burst fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.061B	Stable burst fracture of T7-T8 vertebra, initial encounter for open fracture
S22.062A	Unstable burst fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.062B	Unstable burst fracture of T7-T8 vertebra, initial encounter for open fracture
S22.068A	Other fracture of T7-T8 thoracic vertebra, initial encounter for closed fracture
S22.068B	Other fracture of T7-T8 thoracic vertebra, initial encounter for open fracture
S22.069A	Unspecified fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.069B	Unspecified fracture of T7-T8 vertebra, initial encounter for open fracture
S22.070A	Wedge compression fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.070B	Wedge compression fracture of T9-T10 vertebra, initial encounter for open fracture
S22.071A	Stable burst fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.071B	Stable burst fracture of T9-T10 vertebra, initial encounter for open fracture
S22.072A	Unstable burst fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.072B	Unstable burst fracture of T9-T10 vertebra, initial encounter for open fracture
S22.078A	Other fracture of T9-T10 vertebra, initial encounter for closed fracture

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S22.078B	Other fracture of T9-T10 vertebra, initial encounter for open fracture
S22.079A	Unspecified fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.079B	Unspecified fracture of T9-T10 vertebra, initial encounter for open fracture
S22.080A	Wedge compression fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.080B	Wedge compression fracture of T11-T12 vertebra, initial encounter for open fracture
S22.081A	Stable burst fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.081B	Stable burst fracture of T11-T12 vertebra, initial encounter for open fracture
S22.082A	Unstable burst fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.082B	Unstable burst fracture of T11-T12 vertebra, initial encounter for open fracture
S22.088A	Other fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.088B	Other fracture of T11-T12 vertebra, initial encounter for open fracture
S22.089A	Unspecified fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.089B	Unspecified fracture of T11-T12 vertebra, initial encounter for open fracture
S22.20XA	Unspecified fracture of sternum, initial encounter for closed fracture
*S22.20XB	*Unspecified fracture of sternum, initial encounter for open fracture
S22.31XA	Fracture of one rib, right side, initial encounter for closed fracture
S22.31XB	Fracture of one rib, right side, initial encounter for open fracture
S22.32XA	Fracture of one rib, left side, initial encounter for closed fracture
S22.32XB	Fracture of one rib, left side, initial encounter for open fracture
S22.39XA	Fracture of one rib, unspecified side, initial encounter for closed fracture
S22.39XB	Fracture of one rib, unspecified side, initial encounter for open fracture
S22.41XA	Multiple fractures of ribs, right side, initial encounter for closed fracture
S22.41XB	Multiple fractures of ribs, right side, initial encounter for open fracture
S22.42XA	Multiple fractures of ribs, left side, initial encounter for closed fracture
S22.42XB	Multiple fractures of ribs, left side, initial encounter for open fracture
S22.43XA	Multiple fractures of ribs, bilateral, initial encounter for closed fracture
S22.43XB	Multiple fractures of ribs, bilateral, initial encounter for open fracture
S22.49XA	Multiple fractures of ribs, unspecified side, initial encounter for closed fracture
S22.49XB	Multiple fractures of ribs, unspecified side, initial encounter for open fracture
S22.9XXA	Fracture of bony thorax, part unspecified, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S22.9XXB	Fracture of bony thorax, part unspecified, initial encounter for open fracture
S24.101A	Unspecified injury at T1 level of thoracic spinal cord, initial encounter
S24.102A	Unspecified injury at T2-T6 level of thoracic spinal cord, initial encounter
S24.103A	Unspecified injury at T7-T10 level of thoracic spinal cord, initial encounter
S24.104A	Unspecified injury at T11-T12 level of thoracic spinal cord, initial encounter
S24.109A	Unspecified injury at unspecified level of thoracic spinal cord, initial encounter
S24.111A	Complete lesion at T1 level of thoracic spinal cord, initial encounter
S24.112A	Complete lesion at T2-T6 level of thoracic spinal cord, initial encounter
S24.113A	Complete lesion at T7-T10 level of thoracic spinal cord, initial encounter
S24.114A	Complete lesion at T11-T12 level of thoracic spinal cord, initial encounter
S24.131A	Anterior cord syndrome at T1 level of thoracic spinal cord, initial encounter
S24.132A	Anterior cord syndrome at T2-T6 level of thoracic spinal cord, initial encounter
S24.133A	Anterior cord syndrome at T7-T10 level of thoracic spinal cord, initial encounter
S24.134A	Anterior cord syndrome at T11-T12 level of thoracic spinal cord, initial encounter
S24.151A	Other incomplete lesion at T1 level of thoracic spinal cord, initial encounter
S24.152A	Other incomplete lesion at T2-T6 level of thoracic spinal cord, initial encounter
S24.153A	Other incomplete lesion at T7-T10 level of thoracic spinal cord, initial encounter
S24.154A	Other incomplete lesion at T11-T12 level of thoracic spinal cord, initial encounter
S25.00XA	Unspecified injury of thoracic aorta, initial encounter
S25.01XA	Minor laceration of thoracic aorta, initial encounter
S25.02XA	Major laceration of thoracic aorta, initial encounter
S25.09XA	Other specified injury of thoracic aorta, initial encounter
S25.101A	Unspecified injury of right innominate or subclavian artery, initial encounter
S25.102A	Unspecified injury of left innominate or subclavian artery, initial encounter
S25.109A	Unspecified injury of unspecified innominate or subclavian artery, initial encounter
S25.111A	Minor laceration of right innominate or subclavian artery, initial encounter
S25.112A	Minor laceration of left innominate or subclavian artery, initial encounter
S25.119A	Minor laceration of unspecified innominate or subclavian artery, initial encounter
S25.121A	Major laceration of right innominate or subclavian artery, initial encounter
S25.122A	Major laceration of left innominate or subclavian artery, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S25.129A	Major laceration of unspecified innominate or subclavian artery, initial encounter
S25.191A	Other specified injury of right innominate or subclavian artery, initial encounter
S25.192A	Other specified injury of left innominate or subclavian artery, initial encounter
S25.199A	Other specified injury of unspecified innominate or subclavian artery, initial encounter
S25.20XA	Unspecified injury of superior vena cava, initial encounter
S25.21XA	Minor laceration of superior vena cava, initial encounter
S25.22XA	Major laceration of superior vena cava, initial encounter
S25.29XA	Other specified injury of superior vena cava, initial encounter
S25.301A	Unspecified injury of right innominate or subclavian vein, initial encounter
S25.302A	Unspecified injury of left innominate or subclavian vein, initial encounter
S25.309A	Unspecified injury of unspecified innominate or subclavian vein, initial encounter
S25.311A	Minor laceration of right innominate or subclavian vein, initial encounter
S25.312A	Minor laceration of left innominate or subclavian vein, initial encounter
S25.319A	Minor laceration of unspecified innominate or subclavian vein, initial encounter
S25.321A	Major laceration of right innominate or subclavian vein, initial encounter
S25.322A	Major laceration of left innominate or subclavian vein, initial encounter
S25.329A	Major laceration of unspecified innominate or subclavian vein, initial encounter
S25.391A	Other specified injury of right innominate or subclavian vein, initial encounter
S25.392A	Other specified injury of left innominate or subclavian vein, initial encounter
S25.399A	Other specified injury of unspecified innominate or subclavian vein, initial encounter
S25.401A	Unspecified injury of right pulmonary blood vessels, initial encounter
S25.402A	Unspecified injury of left pulmonary blood vessels, initial encounter
S25.409A	Unspecified injury of unspecified pulmonary blood vessels, initial encounter
S25.411A	Minor laceration of right pulmonary blood vessels, initial encounter
S25.412A	Minor laceration of left pulmonary blood vessels, initial encounter
S25.419A	Minor laceration of unspecified pulmonary blood vessels, initial encounter
S25.421A	Major laceration of right pulmonary blood vessels, initial encounter
S25.422A	Major laceration of left pulmonary blood vessels, initial encounter
S25.429A	Major laceration of unspecified pulmonary blood vessels, initial encounter
S25.491A	Other specified injury of right pulmonary blood vessels, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S25.492A	Other specified injury of left pulmonary blood vessels, initial encounter
S25.499A	Other specified injury of unspecified pulmonary blood vessels, initial encounter
S25.501A	Unspecified injury of intercostal blood vessels, right side, initial encounter
S25.502A	Unspecified injury of intercostal blood vessels, left side, initial encounter
S25.509A	Unspecified injury of intercostal blood vessels, unspecified side, initial encounter
S25.511A	Laceration of intercostal blood vessels, right side, initial encounter
S25.512A	Laceration of intercostal blood vessels, left side, initial encounter
S25.519A	Laceration of intercostal blood vessels, unspecified side, initial encounter
S25.591A	Other specified injury of intercostal blood vessels, right side, initial encounter
S25.592A	Other specified injury of intercostal blood vessels, left side, initial encounter
S25.599A	Other specified injury of intercostal blood vessels, unspecified side, initial encounter
S25.801A	Unspecified injury of other blood vessels of thorax, right side, initial encounter
S25.802A	Unspecified injury of other blood vessels of thorax, left side, initial encounter
S25.809A	Unspecified injury of other blood vessels of thorax, unspecified side, initial encounter
S25.811A	Laceration of other blood vessels of thorax, right side, initial encounter
S25.812A	Laceration of other blood vessels of thorax, left side, initial encounter
S25.819A	Laceration of other blood vessels of thorax, unspecified side, initial encounter
S25.891A	Other specified injury of other blood vessels of thorax, right side, initial encounter
S25.892A	Other specified injury of other blood vessels of thorax, left side, initial encounter
S25.899A	Other specified injury of other blood vessels of thorax, unspecified side, initial encounter
S25.90XA	Unspecified injury of unspecified blood vessel of thorax, initial encounter
S25.91XA	Laceration of unspecified blood vessel of thorax, initial encounter
S25.99XA	Other specified injury of unspecified blood vessel of thorax, initial encounter
S26.00XA	Unspecified injury of heart with hemopericardium, initial encounter
S26.01XA	Contusion of heart with hemopericardium, initial encounter
S26.020A	Mild laceration of heart with hemopericardium, initial encounter
S26.021A	Moderate laceration of heart with hemopericardium, initial encounter
S26.022A	Major laceration of heart with hemopericardium, initial encounter
S26.09XA	Other injury of heart with hemopericardium, initial encounter
S26.10XA	Unspecified injury of heart without hemopericardium, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S26.11XA	Contusion of heart without hemopericardium, initial encounter
S26.12XA	Laceration of heart without hemopericardium, initial encounter
S26.19XA	Other injury of heart without hemopericardium, initial encounter
S26.90XA	Unspecified injury of heart, unspecified with or without hemopericardium, initial encounter
S26.91XA	Contusion of heart, unspecified with or without hemopericardium, initial encounter
S26.92XA	Laceration of heart, unspecified with or without hemopericardium, initial encounter
S26.99XA	Other injury of heart, unspecified with or without hemopericardium, initial encounter
S27.0XXA	Traumatic pneumothorax, initial encounter
S27.1XXA	Traumatic hemothorax, initial encounter
S27.2XXA	Traumatic hemopneumothorax, initial encounter
S27.301A	Unspecified injury of lung, unilateral, initial encounter
S27.302A	Unspecified injury of lung, bilateral, initial encounter
S27.309A	Unspecified injury of lung, unspecified, initial encounter
S27.311A	Primary blast injury of lung, unilateral, initial encounter
S27.312A	Primary blast injury of lung, bilateral, initial encounter
S27.319A	Primary blast injury of lung, unspecified, initial encounter
S27.321A	Contusion of lung, unilateral, initial encounter
S27.322A	Contusion of lung, bilateral, initial encounter
S27.329A	Contusion of lung, unspecified, initial encounter
S27.331A	Laceration of lung, unilateral, initial encounter
S27.332A	Laceration of lung, bilateral, initial encounter
S27.339A	Laceration of lung, unspecified, initial encounter
S27.391A	Other injuries of lung, unilateral, initial encounter
S27.392A	Other injuries of lung, bilateral, initial encounter
S27.399A	Other injuries of lung, unspecified, initial encounter
S27.401A	Unspecified injury of bronchus, unilateral, initial encounter
S27.402A	Unspecified injury of bronchus, bilateral, initial encounter
S27.409A	Unspecified injury of bronchus, unspecified, initial encounter
S27.411A	Primary blast injury of bronchus, unilateral, initial encounter
S27.412A	Primary blast injury of bronchus, bilateral, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S27.419A	Primary blast injury of bronchus, unspecified, initial encounter
S27.421A	Contusion of bronchus, unilateral, initial encounter
S27.422A	Contusion of bronchus, bilateral, initial encounter
S27.429A	Contusion of bronchus, unspecified, initial encounter
S27.431A	Laceration of bronchus, unilateral, initial encounter
S27.432A	Laceration of bronchus, bilateral, initial encounter
S27.439A	Laceration of bronchus, unspecified, initial encounter
S27.491A	Other injury of bronchus, unilateral, initial encounter
S27.492A	Other injury of bronchus, bilateral, initial encounter
S27.499A	Other injury of bronchus, unspecified, initial encounter
S27.50XA	Unspecified injury of thoracic trachea, initial encounter
S27.51XA	Primary blast injury of thoracic trachea, initial encounter
S27.52XA	Contusion of thoracic trachea, initial encounter
S27.53XA	Laceration of thoracic trachea, initial encounter
S27.59XA	Other injury of thoracic trachea, initial encounter
S27.60XA	Unspecified injury of pleura, initial encounter
S27.63XA	Laceration of pleura, initial encounter
S27.69XA	Other injury of pleura, initial encounter
S27.802A	Contusion of diaphragm, initial encounter
S27.803A	Laceration of diaphragm, initial encounter
S27.808A	Other injury of diaphragm, initial encounter
S27.809A	Unspecified injury of diaphragm, initial encounter
S27.812A	Contusion of esophagus (thoracic part), initial encounter
S27.813A	Laceration of esophagus (thoracic part), initial encounter
S27.818A	Other injury of esophagus (thoracic part), initial encounter
S27.819A	Unspecified injury of esophagus (thoracic part), initial encounter
S27.892A	Contusion of other specified intrathoracic organs, initial encounter
S27.893A	Laceration of other specified intrathoracic organs, initial encounter
S27.898A	Other injury of other specified intrathoracic organs, initial encounter
S27.899A	Unspecified injury of other specified intrathoracic organs, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S27.9XXA	Injury of unspecified intrathoracic organ, initial encounter
S28.0XXA	Crushed chest, initial encounter
S30.0XXA	Contusion of lower back and pelvis, initial encounter
S30.1XXA	Contusion of abdominal wall, initial encounter
S30.201A	Contusion of unspecified external genital organ, male, initial encounter
S30.202A	Contusion of unspecified external genital organ, female, initial encounter
S30.21XA	Contusion of penis, initial encounter
S30.22XA	Contusion of scrotum and testes, initial encounter
S30.23XA	Contusion of vagina and vulva, initial encounter
S30.3XXA	Contusion of anus, initial encounter
S31.001A	Unspecified open wound of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.011A	Laceration without foreign body of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.021A	Laceration with foreign body of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.031A	Puncture wound without foreign body of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.041A	Puncture wound with foreign body of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.051A	Open bite of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.600A	Unspecified open wound of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.601A	Unspecified open wound of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.602A	Unspecified open wound of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.603A	Unspecified open wound of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.604A	Unspecified open wound of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.605A	Unspecified open wound of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S31.609A	Unspecified open wound of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.610A	Laceration without foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.611A	Laceration without foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.612A	Laceration without foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.613A	Laceration without foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.614A	Laceration without foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.615A	Laceration without foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.619A	Laceration without foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.620A	Laceration with foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.621A	Laceration with foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.622A	Laceration with foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.623A	Laceration with foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.624A	Laceration with foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.625A	Laceration with foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.629A	Laceration with foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.630A	Puncture wound without foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.631A	Puncture wound without foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.632A	Puncture wound without foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S31.633A	Puncture wound without foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.634A	Puncture wound without foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.635A	Puncture wound without foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.639A	Puncture wound without foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.640A	Puncture wound with foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.641A	Puncture wound with foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.642A	Puncture wound with foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.643A	Puncture wound with foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.644A	Puncture wound with foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.645A	Puncture wound with foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.649A	Puncture wound with foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.650A	Open bite of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.651A	Open bite of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.652A	Open bite of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.653A	Open bite of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.654A	Open bite of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.655A	Open bite of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.659A	Open bite of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S32.000A	Wedge compression fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.000B	Wedge compression fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.001A	Stable burst fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.001B	Stable burst fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.002A	Unstable burst fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.002B	Unstable burst fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.008A	Other fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.008B	Other fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.009A	Unspecified fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.009B	Unspecified fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.010A	Wedge compression fracture of first lumbar vertebra, initial encounter for closed fracture
S32.010B	Wedge compression fracture of first lumbar vertebra, initial encounter for open fracture
S32.011A	Stable burst fracture of first lumbar vertebra, initial encounter for closed fracture
S32.011B	Stable burst fracture of first lumbar vertebra, initial encounter for open fracture
S32.012A	Unstable burst fracture of first lumbar vertebra, initial encounter for closed fracture
S32.012B	Unstable burst fracture of first lumbar vertebra, initial encounter for open fracture
S32.018A	Other fracture of first lumbar vertebra, initial encounter for closed fracture
S32.018B	Other fracture of first lumbar vertebra, initial encounter for open fracture
S32.019A	Unspecified fracture of first lumbar vertebra, initial encounter for closed fracture
S32.019B	Unspecified fracture of first lumbar vertebra, initial encounter for open fracture
S32.020A	Wedge compression fracture of second lumbar vertebra, initial encounter for closed fracture
S32.020B	Wedge compression fracture of second lumbar vertebra, initial encounter for open fracture
S32.021A	Stable burst fracture of second lumbar vertebra, initial encounter for closed fracture
S32.021B	Stable burst fracture of second lumbar vertebra, initial encounter for open fracture
S32.022A	Unstable burst fracture of second lumbar vertebra, initial encounter for closed fracture
S32.022B	Unstable burst fracture of second lumbar vertebra, initial encounter for open fracture
S32.028A	Other fracture of second lumbar vertebra, initial encounter for closed fracture
S32.028B	Other fracture of second lumbar vertebra, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S32.029A	Unspecified fracture of second lumbar vertebra, initial encounter for closed fracture
S32.029B	Unspecified fracture of second lumbar vertebra, initial encounter for open fracture
S32.030A	Wedge compression fracture of third lumbar vertebra, initial encounter for closed fracture
S32.030B	Wedge compression fracture of third lumbar vertebra, initial encounter for open fracture
S32.031A	Stable burst fracture of third lumbar vertebra, initial encounter for closed fracture
S32.031B	Stable burst fracture of third lumbar vertebra, initial encounter for open fracture
S32.032A	Unstable burst fracture of third lumbar vertebra, initial encounter for closed fracture
S32.032B	Unstable burst fracture of third lumbar vertebra, initial encounter for open fracture
S32.038A	Other fracture of third lumbar vertebra, initial encounter for closed fracture
S32.038B	Other fracture of third lumbar vertebra, initial encounter for open fracture
S32.039A	Unspecified fracture of third lumbar vertebra, initial encounter for closed fracture
S32.039B	Unspecified fracture of third lumbar vertebra, initial encounter for open fracture
S32.040A	Wedge compression fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.040B	Wedge compression fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.041A	Stable burst fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.041B	Stable burst fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.042A	Unstable burst fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.042B	Unstable burst fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.048A	Other fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.048B	Other fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.049A	Unspecified fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.049B	Unspecified fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.050A	Wedge compression fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.050B	Wedge compression fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.051A	Stable burst fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.051B	Stable burst fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.052A	Unstable burst fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.052B	Unstable burst fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.058A	Other fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.058B	Other fracture of fifth lumbar vertebra, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S32.059A	Unspecified fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.059B	Unspecified fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.10XA	Unspecified fracture of sacrum, initial encounter for closed fracture
S32.10XB	Unspecified fracture of sacrum, initial encounter for open fracture
S32.110A	Nondisplaced Zone I fracture of sacrum, initial encounter for closed fracture
S32.110B	Nondisplaced Zone I fracture of sacrum, initial encounter for open fracture
S32.111A	Minimally displaced Zone I fracture of sacrum, initial encounter for closed fracture
S32.111B	Minimally displaced Zone I fracture of sacrum, initial encounter for open fracture
S32.112A	Severely displaced Zone I fracture of sacrum, initial encounter for closed fracture
S32.112B	Severely displaced Zone I fracture of sacrum, initial encounter for open fracture
S32.119A	Unspecified Zone I fracture of sacrum, initial encounter for closed fracture
S32.119B	Unspecified Zone I fracture of sacrum, initial encounter for open fracture
S32.120A	Nondisplaced Zone II fracture of sacrum, initial encounter for closed fracture
S32.120B	Nondisplaced Zone II fracture of sacrum, initial encounter for open fracture
S32.121A	Minimally displaced Zone II fracture of sacrum, initial encounter for closed fracture
S32.121B	Minimally displaced Zone II fracture of sacrum, initial encounter for open fracture
S32.122A	Severely displaced Zone II fracture of sacrum, initial encounter for closed fracture
S32.122B	Severely displaced Zone II fracture of sacrum, initial encounter for open fracture
S32.129A	Unspecified Zone II fracture of sacrum, initial encounter for closed fracture
S32.129B	Unspecified Zone II fracture of sacrum, initial encounter for open fracture
S32.130A	Nondisplaced Zone III fracture of sacrum, initial encounter for closed fracture
S32.130B	Nondisplaced Zone III fracture of sacrum, initial encounter for open fracture
S32.131A	Minimally displaced Zone III fracture of sacrum, initial encounter for closed fracture
S32.131B	Minimally displaced Zone III fracture of sacrum, initial encounter for open fracture
S32.132A	Severely displaced Zone III fracture of sacrum, initial encounter for closed fracture
S32.132B	Severely displaced Zone III fracture of sacrum, initial encounter for open fracture
S32.139A	Unspecified Zone III fracture of sacrum, initial encounter for closed fracture
S32.139B	Unspecified Zone III fracture of sacrum, initial encounter for open fracture
S32.14XA	Type 1 fracture of sacrum, initial encounter for closed fracture
S32.14XB	Type 1 fracture of sacrum, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S32.15XA	Type 2 fracture of sacrum, initial encounter for closed fracture
S32.15XB	Type 2 fracture of sacrum, initial encounter for open fracture
S32.16XA	Type 3 fracture of sacrum, initial encounter for closed fracture
S32.16XB	Type 3 fracture of sacrum, initial encounter for open fracture
S32.17XA	Type 4 fracture of sacrum, initial encounter for closed fracture
S32.17XB	Type 4 fracture of sacrum, initial encounter for open fracture
S32.19XA	Other fracture of sacrum, initial encounter for closed fracture
S32.19XB	Other fracture of sacrum, initial encounter for open fracture
S32.2XXA	Fracture of coccyx, initial encounter for closed fracture
S32.2XXB	Fracture of coccyx, initial encounter for open fracture
S32.9XXA	Fracture of unspecified parts of lumbosacral spine and pelvis, initial encounter for closed fracture
S32.9XXB	Fracture of unspecified parts of lumbosacral spine and pelvis, initial encounter for open fracture
S34.101A	Unspecified injury to L1 level of lumbar spinal cord, initial encounter
S34.102A	Unspecified injury to L2 level of lumbar spinal cord, initial encounter
S34.103A	Unspecified injury to L3 level of lumbar spinal cord, initial encounter
S34.104A	Unspecified injury to L4 level of lumbar spinal cord, initial encounter
S34.105A	Unspecified injury to L5 level of lumbar spinal cord, initial encounter
S34.109A	Unspecified injury to unspecified level of lumbar spinal cord, initial encounter
S34.111A	Complete lesion of L1 level of lumbar spinal cord, initial encounter
S34.112A	Complete lesion of L2 level of lumbar spinal cord, initial encounter
S34.113A	Complete lesion of L3 level of lumbar spinal cord, initial encounter
S34.114A	Complete lesion of L4 level of lumbar spinal cord, initial encounter
S34.115A	Complete lesion of L5 level of lumbar spinal cord, initial encounter
S34.119A	Complete lesion of unspecified level of lumbar spinal cord, initial encounter
S34.121A	Incomplete lesion of L1 level of lumbar spinal cord, initial encounter
S34.122A	Incomplete lesion of L2 level of lumbar spinal cord, initial encounter
S34.123A	Incomplete lesion of L3 level of lumbar spinal cord, initial encounter
S34.124A	Incomplete lesion of L4 level of lumbar spinal cord, initial encounter
S34.125A	Incomplete lesion of L5 level of lumbar spinal cord, initial encounter

NCD 190.16

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S34.129A	Incomplete lesion of unspecified level of lumbar spinal cord, initial encounter
S34.131A	Complete lesion of sacral spinal cord, initial encounter
S34.132A	Incomplete lesion of sacral spinal cord, initial encounter
S34.139A	Unspecified injury to sacral spinal cord, initial encounter
S34.3XXA	Injury of cauda equina, initial encounter
S35.00XA	Unspecified injury of abdominal aorta, initial encounter
S35.01XA	Minor laceration of abdominal aorta, initial encounter
S35.02XA	Major laceration of abdominal aorta, initial encounter
S35.09XA	Other injury of abdominal aorta, initial encounter
S35.10XA	Unspecified injury of inferior vena cava, initial encounter
S35.11XA	Minor laceration of inferior vena cava, initial encounter
S35.12XA	Major laceration of inferior vena cava, initial encounter
S35.19XA	Other injury of inferior vena cava, initial encounter
S35.211A	Minor laceration of celiac artery, initial encounter
S35.212A	Major laceration of celiac artery, initial encounter
S35.218A	Other injury of celiac artery, initial encounter
S35.219A	Unspecified injury of celiac artery, initial encounter
S35.221A	Minor laceration of superior mesenteric artery, initial encounter
S35.222A	Major laceration of superior mesenteric artery, initial encounter
S35.228A	Other injury of superior mesenteric artery, initial encounter
S35.229A	Unspecified injury of superior mesenteric artery, initial encounter
S35.231A	Minor laceration of inferior mesenteric artery, initial encounter
S35.232A	Major laceration of inferior mesenteric artery, initial encounter
S35.238A	Other injury of inferior mesenteric artery, initial encounter
S35.239A	Unspecified injury of inferior mesenteric artery, initial encounter
S35.291A	Minor laceration of branches of celiac and mesenteric artery, initial encounter
S35.292A	Major laceration of branches of celiac and mesenteric artery, initial encounter
S35.298A	Other injury of branches of celiac and mesenteric artery, initial encounter
S35.299A	Unspecified injury of branches of celiac and mesenteric artery, initial encounter
S35.311A	Laceration of portal vein, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S35.318A	Other specified injury of portal vein, initial encounter
S35.319A	Unspecified injury of portal vein, initial encounter
S35.321A	Laceration of splenic vein, initial encounter
S35.328A	Other specified injury of splenic vein, initial encounter
S35.329A	Unspecified injury of splenic vein, initial encounter
S35.331A	Laceration of superior mesenteric vein, initial encounter
S35.338A	Other specified injury of superior mesenteric vein, initial encounter
S35.339A	Unspecified injury of superior mesenteric vein, initial encounter
S35.341A	Laceration of inferior mesenteric vein, initial encounter
S35.348A	Other specified injury of inferior mesenteric vein, initial encounter
S35.349A	Unspecified injury of inferior mesenteric vein, initial encounter
S35.401A	Unspecified injury of right renal artery, initial encounter
S35.402A	Unspecified injury of left renal artery, initial encounter
S35.403A	Unspecified injury of unspecified renal artery, initial encounter
S35.404A	Unspecified injury of right renal vein, initial encounter
S35.405A	Unspecified injury of left renal vein, initial encounter
S35.406A	Unspecified injury of unspecified renal vein, initial encounter
S35.411A	Laceration of right renal artery, initial encounter
S35.412A	Laceration of left renal artery, initial encounter
S35.413A	Laceration of unspecified renal artery, initial encounter
S35.414A	Laceration of right renal vein, initial encounter
S35.415A	Laceration of left renal vein, initial encounter
S35.416A	Laceration of unspecified renal vein, initial encounter
S35.491A	Other specified injury of right renal artery, initial encounter
S35.492A	Other specified injury of left renal artery, initial encounter
S35.493A	Other specified injury of unspecified renal artery, initial encounter
S35.494A	Other specified injury of right renal vein, initial encounter
S35.495A	Other specified injury of left renal vein, initial encounter
S35.496A	Other specified injury of unspecified renal vein, initial encounter
S35.50XA	Injury of unspecified iliac blood vessel(s), initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S35.511A	Injury of right iliac artery, initial encounter
S35.512A	Injury of left iliac artery, initial encounter
S35.513A	Injury of unspecified iliac artery, initial encounter
S35.514A	Injury of right iliac vein, initial encounter
S35.515A	Injury of left iliac vein, initial encounter
S35.516A	Injury of unspecified iliac vein, initial encounter
S35.531A	Injury of right uterine artery, initial encounter
S35.532A	Injury of left uterine artery, initial encounter
S35.533A	Injury of unspecified uterine artery, initial encounter
S35.534A	Injury of right uterine vein, initial encounter
S35.535A	Injury of left uterine vein, initial encounter
S35.536A	Injury of unspecified uterine vein, initial encounter
S35.59XA	Injury of other iliac blood vessels, initial encounter
S35.8X1A	Laceration of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.8X8A	Other specified injury of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.8X9A	Unspecified injury of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.90XA	Unspecified injury of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S35.91XA	Laceration of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S35.99XA	Other specified injury of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S36.00XA	Unspecified injury of spleen, initial encounter
S36.020A	Minor contusion of spleen, initial encounter
S36.021A	Major contusion of spleen, initial encounter
S36.029A	Unspecified contusion of spleen, initial encounter
S36.030A	Superficial (capsular) laceration of spleen, initial encounter
S36.031A	Moderate laceration of spleen, initial encounter
S36.032A	Major laceration of spleen, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S36.039A	Unspecified laceration of spleen, initial encounter
S36.09XA	Other injury of spleen, initial encounter
S36.112A	Contusion of liver, initial encounter
S36.113A	Laceration of liver, unspecified degree, initial encounter
S36.114A	Minor laceration of liver, initial encounter
S36.115A	Moderate laceration of liver, initial encounter
S36.116A	Major laceration of liver, initial encounter
S36.118A	Other injury of liver, initial encounter
S36.119A	Unspecified injury of liver, initial encounter
S36.122A	Contusion of gallbladder, initial encounter
S36.123A	Laceration of gallbladder, initial encounter
S36.128A	Other injury of gallbladder, initial encounter
S36.129A	Unspecified injury of gallbladder, initial encounter
S36.13XA	Injury of bile duct, initial encounter
S36.200A	Unspecified injury of head of pancreas, initial encounter
S36.201A	Unspecified injury of body of pancreas, initial encounter
S36.202A	Unspecified injury of tail of pancreas, initial encounter
S36.209A	Unspecified injury of unspecified part of pancreas, initial encounter
S36.220A	Contusion of head of pancreas, initial encounter
S36.221A	Contusion of body of pancreas, initial encounter
S36.222A	Contusion of tail of pancreas, initial encounter
S36.229A	Contusion of unspecified part of pancreas, initial encounter
S36.230A	Laceration of head of pancreas, unspecified degree, initial encounter
S36.231A	Laceration of body of pancreas, unspecified degree, initial encounter
S36.232A	Laceration of tail of pancreas, unspecified degree, initial encounter
S36.239A	Laceration of unspecified part of pancreas, unspecified degree, initial encounter
S36.240A	Minor laceration of head of pancreas, initial encounter
S36.241A	Minor laceration of body of pancreas, initial encounter
S36.242A	Minor laceration of tail of pancreas, initial encounter
S36.249A	Minor laceration of unspecified part of pancreas, initial encounter

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S36.250A	Moderate laceration of head of pancreas, initial encounter
S36.251A	Moderate laceration of body of pancreas, initial encounter
S36.252A	Moderate laceration of tail of pancreas, initial encounter
S36.259A	Moderate laceration of unspecified part of pancreas, initial encounter
S36.260A	Major laceration of head of pancreas, initial encounter
S36.261A	Major laceration of body of pancreas, initial encounter
S36.262A	Major laceration of tail of pancreas, initial encounter
S36.269A	Major laceration of unspecified part of pancreas, initial encounter
S36.290A	Other injury of head of pancreas, initial encounter
S36.291A	Other injury of body of pancreas, initial encounter
S36.292A	Other injury of tail of pancreas, initial encounter
S36.299A	Other injury of unspecified part of pancreas, initial encounter
S36.30XA	Unspecified injury of stomach, initial encounter
S36.32XA	Contusion of stomach, initial encounter
S36.33XA	Laceration of stomach, initial encounter
S36.39XA	Other injury of stomach, initial encounter
S36.400A	Unspecified injury of duodenum, initial encounter
S36.408A	Unspecified injury of other part of small intestine, initial encounter
S36.409A	Unspecified injury of unspecified part of small intestine, initial encounter
S36.410A	Primary blast injury of duodenum, initial encounter
S36.418A	Primary blast injury of other part of small intestine, initial encounter
S36.419A	Primary blast injury of unspecified part of small intestine, initial encounter
S36.420A	Contusion of duodenum, initial encounter
S36.428A	Contusion of other part of small intestine, initial encounter
S36.429A	Contusion of unspecified part of small intestine, initial encounter
S36.430A	Laceration of duodenum, initial encounter
S36.438A	Laceration of other part of small intestine, initial encounter
S36.439A	Laceration of unspecified part of small intestine, initial encounter
S36.490A	Other injury of duodenum, initial encounter
S36.498A	Other injury of other part of small intestine, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S36.499A	Other injury of unspecified part of small intestine, initial encounter
S36.500A	Unspecified injury of ascending [right] colon, initial encounter
S36.501A	Unspecified injury of transverse colon, initial encounter
S36.502A	Unspecified injury of descending [left] colon, initial encounter
S36.503A	Unspecified injury of sigmoid colon, initial encounter
S36.508A	Unspecified injury of other part of colon, initial encounter
S36.509A	Unspecified injury of unspecified part of colon, initial encounter
S36.510A	Primary blast injury of ascending [right] colon, initial encounter
S36.511A	Primary blast injury of transverse colon, initial encounter
S36.512A	Primary blast injury of descending [left] colon, initial encounter
S36.513A	Primary blast injury of sigmoid colon, initial encounter
S36.518A	Primary blast injury of other part of colon, initial encounter
S36.519A	Primary blast injury of unspecified part of colon, initial encounter
S36.520A	Contusion of ascending [right] colon, initial encounter
S36.521A	Contusion of transverse colon, initial encounter
S36.522A	Contusion of descending [left] colon, initial encounter
S36.523A	Contusion of sigmoid colon, initial encounter
S36.528A	Contusion of other part of colon, initial encounter
S36.529A	Contusion of unspecified part of colon, initial encounter
S36.530A	Laceration of ascending [right] colon, initial encounter
S36.531A	Laceration of transverse colon, initial encounter
S36.532A	Laceration of descending [left] colon, initial encounter
S36.533A	Laceration of sigmoid colon, initial encounter
S36.538A	Laceration of other part of colon, initial encounter
S36.539A	Laceration of unspecified part of colon, initial encounter
S36.590A	Other injury of ascending [right] colon, initial encounter
S36.591A	Other injury of transverse colon, initial encounter
S36.592A	Other injury of descending [left] colon, initial encounter
S36.593A	Other injury of sigmoid colon, initial encounter
S36.598A	Other injury of other part of colon, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S36.599A	Other injury of unspecified part of colon, initial encounter
S36.60XA	Unspecified injury of rectum, initial encounter
S36.61XA	Primary blast injury of rectum, initial encounter
S36.62XA	Contusion of rectum, initial encounter
S36.63XA	Laceration of rectum, initial encounter
S36.69XA	Other injury of rectum, initial encounter
S36.81XA	Injury of peritoneum, initial encounter
S36.892A	Contusion of other intra-abdominal organs, initial encounter
S36.893A	Laceration of other intra-abdominal organs, initial encounter
S36.898A	Other injury of other intra-abdominal organs, initial encounter
S36.899A	Unspecified injury of other intra-abdominal organs, initial encounter
S36.90XA	Unspecified injury of unspecified intra-abdominal organ, initial encounter
S36.92XA	Contusion of unspecified intra-abdominal organ, initial encounter
S36.93XA	Laceration of unspecified intra-abdominal organ, initial encounter
S36.99XA	Other injury of unspecified intra-abdominal organ, initial encounter
S37.001A	Unspecified injury of right kidney, initial encounter
S37.002A	Unspecified injury of left kidney, initial encounter
S37.009A	Unspecified injury of unspecified kidney, initial encounter
S37.011A	Minor contusion of right kidney, initial encounter
S37.012A	Minor contusion of left kidney, initial encounter
S37.019A	Minor contusion of unspecified kidney, initial encounter
S37.021A	Major contusion of right kidney, initial encounter
S37.022A	Major contusion of left kidney, initial encounter
S37.029A	Major contusion of unspecified kidney, initial encounter
S37.031A	Laceration of right kidney, unspecified degree, initial encounter
S37.032A	Laceration of left kidney, unspecified degree, initial encounter
S37.039A	Laceration of unspecified kidney, unspecified degree, initial encounter
S37.041A	Minor laceration of right kidney, initial encounter
S37.042A	Minor laceration of left kidney, initial encounter
S37.049A	Minor laceration of unspecified kidney, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S37.051A	Moderate laceration of right kidney, initial encounter
S37.052A	Moderate laceration of left kidney, initial encounter
S37.059A	Moderate laceration of unspecified kidney, initial encounter
S37.061A	Major laceration of right kidney, initial encounter
S37.062A	Major laceration of left kidney, initial encounter
S37.069A	Major laceration of unspecified kidney, initial encounter
S37.091A	Other injury of right kidney, initial encounter
S37.092A	Other injury of left kidney, initial encounter
S37.099A	Other injury of unspecified kidney, initial encounter
S37.10XA	Unspecified injury of ureter, initial encounter
S37.12XA	Contusion of ureter, initial encounter
S37.13XA	Laceration of ureter, initial encounter
S37.19XA	Other injury of ureter, initial encounter
S37.20XA	Unspecified injury of bladder, initial encounter
S37.22XA	Contusion of bladder, initial encounter
S37.23XA	Laceration of bladder, initial encounter
S37.29XA	Other injury of bladder, initial encounter
S37.30XA	Unspecified injury of urethra, initial encounter
S37.32XA	Contusion of urethra, initial encounter
S37.33XA	Laceration of urethra, initial encounter
S37.39XA	Other injury of urethra, initial encounter
S37.401A	Unspecified injury of ovary, unilateral, initial encounter
S37.402A	Unspecified injury of ovary, bilateral, initial encounter
S37.409A	Unspecified injury of ovary, unspecified, initial encounter
S37.421A	Contusion of ovary, unilateral, initial encounter
S37.422A	Contusion of ovary, bilateral, initial encounter
S37.429A	Contusion of ovary, unspecified, initial encounter
S37.431A	Laceration of ovary, unilateral, initial encounter
S37.432A	Laceration of ovary, bilateral, initial encounter
S37.439A	Laceration of ovary, unspecified, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S37.491A	Other injury of ovary, unilateral, initial encounter
S37.492A	Other injury of ovary, bilateral, initial encounter
S37.499A	Other injury of ovary, unspecified, initial encounter
S37.501A	Unspecified injury of fallopian tube, unilateral, initial encounter
S37.502A	Unspecified injury of fallopian tube, bilateral, initial encounter
S37.509A	Unspecified injury of fallopian tube, unspecified, initial encounter
S37.511A	Primary blast injury of fallopian tube, unilateral, initial encounter
S37.512A	Primary blast injury of fallopian tube, bilateral, initial encounter
S37.519A	Primary blast injury of fallopian tube, unspecified, initial encounter
S37.521A	Contusion of fallopian tube, unilateral, initial encounter
S37.522A	Contusion of fallopian tube, bilateral, initial encounter
S37.529A	Contusion of fallopian tube, unspecified, initial encounter
S37.531A	Laceration of fallopian tube, unilateral, initial encounter
S37.532A	Laceration of fallopian tube, bilateral, initial encounter
S37.539A	Laceration of fallopian tube, unspecified, initial encounter
S37.591A	Other injury of fallopian tube, unilateral, initial encounter
S37.592A	Other injury of fallopian tube, bilateral, initial encounter
S37.599A	Other injury of fallopian tube, unspecified, initial encounter
S37.60XA	Unspecified injury of uterus, initial encounter
S37.62XA	Contusion of uterus, initial encounter
S37.63XA	Laceration of uterus, initial encounter
S37.69XA	Other injury of uterus, initial encounter
S37.812A	Contusion of adrenal gland, initial encounter
S37.813A	Laceration of adrenal gland, initial encounter
S37.818A	Other injury of adrenal gland, initial encounter
S37.819A	Unspecified injury of adrenal gland, initial encounter
S37.822A	Contusion of prostate, initial encounter
S37.823A	Laceration of prostate, initial encounter
S37.828A	Other injury of prostate, initial encounter
S37.829A	Unspecified injury of prostate, initial encounter

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S37.892A	Contusion of other urinary and pelvic organ, initial encounter
S37.893A	Laceration of other urinary and pelvic organ, initial encounter
S37.898A	Other injury of other urinary and pelvic organ, initial encounter
S37.899A	Unspecified injury of other urinary and pelvic organ, initial encounter
S37.90XA	Unspecified injury of unspecified urinary and pelvic organ, initial encounter
S37.92XA	Contusion of unspecified urinary and pelvic organ, initial encounter
S37.93XA	Laceration of unspecified urinary and pelvic organ, initial encounter
S37.99XA	Other injury of unspecified urinary and pelvic organ, initial encounter
S38.001A	Crushing injury of unspecified external genital organs, male, initial encounter
S38.002A	Crushing injury of unspecified external genital organs, female, initial encounter
S38.01XA	Crushing injury of penis, initial encounter
S38.02XA	Crushing injury of scrotum and testis, initial encounter
S38.03XA	Crushing injury of vulva, initial encounter
S38.1XXA	Crushing injury of abdomen, lower back, and pelvis, initial encounter
S40.011A	Contusion of right shoulder, initial encounter
S40.012A	Contusion of left shoulder, initial encounter
S40.019A	Contusion of unspecified shoulder, initial encounter
S40.021A	Contusion of right upper arm, initial encounter
S40.022A	Contusion of left upper arm, initial encounter
S40.029A	Contusion of unspecified upper arm, initial encounter
S42.001A	Fracture of unspecified part of right clavicle, initial encounter for closed fracture
S42.001B	Fracture of unspecified part of right clavicle, initial encounter for open fracture
S42.002A	Fracture of unspecified part of left clavicle, initial encounter for closed fracture
S42.002B	Fracture of unspecified part of left clavicle, initial encounter for open fracture
S42.009A	Fracture of unspecified part of unspecified clavicle, initial encounter for closed fracture
S42.009B	Fracture of unspecified part of unspecified clavicle, initial encounter for open fracture
S42.011A	Anterior displaced fracture of sternal end of right clavicle, initial encounter for closed fracture
S42.011B	Anterior displaced fracture of sternal end of right clavicle, initial encounter for open fracture
S42.012A	Anterior displaced fracture of sternal end of left clavicle, initial encounter for closed fracture
S42.012B	Anterior displaced fracture of sternal end of left clavicle, initial encounter for open fracture

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.013A	Anterior displaced fracture of sternal end of unspecified clavicle, initial encounter for closed fracture
S42.013B	Anterior displaced fracture of sternal end of unspecified clavicle, initial encounter for open fracture
S42.014A	Posterior displaced fracture of sternal end of right clavicle, initial encounter for closed fracture
S42.014B	Posterior displaced fracture of sternal end of right clavicle, initial encounter for open fracture
S42.015A	Posterior displaced fracture of sternal end of left clavicle, initial encounter for closed fracture
S42.015B	Posterior displaced fracture of sternal end of left clavicle, initial encounter for open fracture
S42.016A	Posterior displaced fracture of sternal end of unspecified clavicle, initial encounter for closed fracture
S42.016B	Posterior displaced fracture of sternal end of unspecified clavicle, initial encounter for open fracture
S42.017A	Nondisplaced fracture of sternal end of right clavicle, initial encounter for closed fracture
S42.017B	Nondisplaced fracture of sternal end of right clavicle, initial encounter for open fracture
S42.018A	Nondisplaced fracture of sternal end of left clavicle, initial encounter for closed fracture
S42.018B	Nondisplaced fracture of sternal end of left clavicle, initial encounter for open fracture
S42.019A	Nondisplaced fracture of sternal end of unspecified clavicle, initial encounter for closed fracture
S42.019B	Nondisplaced fracture of sternal end of unspecified clavicle, initial encounter for open fracture
S42.021A	Displaced fracture of shaft of right clavicle, initial encounter for closed fracture
S42.021B	Displaced fracture of shaft of right clavicle, initial encounter for open fracture
S42.022A	Displaced fracture of shaft of left clavicle, initial encounter for closed fracture
S42.022B	Displaced fracture of shaft of left clavicle, initial encounter for open fracture
S42.023A	Displaced fracture of shaft of unspecified clavicle, initial encounter for closed fracture
S42.023B	Displaced fracture of shaft of unspecified clavicle, initial encounter for open fracture
S42.024A	Nondisplaced fracture of shaft of right clavicle, initial encounter for closed fracture
S42.024B	Nondisplaced fracture of shaft of right clavicle, initial encounter for open fracture
S42.025A	Nondisplaced fracture of shaft of left clavicle, initial encounter for closed fracture
S42.025B	Nondisplaced fracture of shaft of left clavicle, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.026A	Nondisplaced fracture of shaft of unspecified clavicle, initial encounter for closed fracture
S42.026B	Nondisplaced fracture of shaft of unspecified clavicle, initial encounter for open fracture
S42.031A	Displaced fracture of lateral end of right clavicle, initial encounter for closed fracture
S42.031B	Displaced fracture of lateral end of right clavicle, initial encounter for open fracture
S42.032A	Displaced fracture of lateral end of left clavicle, initial encounter for closed fracture
S42.032B	Displaced fracture of lateral end of left clavicle, initial encounter for open fracture
S42.033A	Displaced fracture of lateral end of unspecified clavicle, initial encounter for closed fracture
S42.033B	Displaced fracture of lateral end of unspecified clavicle, initial encounter for open fracture
S42.034A	Nondisplaced fracture of lateral end of right clavicle, initial encounter for closed fracture
S42.034B	Nondisplaced fracture of lateral end of right clavicle, initial encounter for open fracture
S42.035A	Nondisplaced fracture of lateral end of left clavicle, initial encounter for closed fracture
S42.035B	Nondisplaced fracture of lateral end of left clavicle, initial encounter for open fracture
S42.036A	Nondisplaced fracture of lateral end of unspecified clavicle, initial encounter for closed fracture
S42.036B	Nondisplaced fracture of lateral end of unspecified clavicle, initial encounter for open fracture
S42.101A	Fracture of unspecified part of scapula, right shoulder, initial encounter for closed fracture
S42.101B	Fracture of unspecified part of scapula, right shoulder, initial encounter for open fracture
S42.102A	Fracture of unspecified part of scapula, left shoulder, initial encounter for closed fracture
S42.102B	Fracture of unspecified part of scapula, left shoulder, initial encounter for open fracture
S42.109A	Fracture of unspecified part of scapula, unspecified shoulder, initial encounter for closed fracture
S42.109B	Fracture of unspecified part of scapula, unspecified shoulder, initial encounter for open fracture
S42.111A	Displaced fracture of body of scapula, right shoulder, initial encounter for closed fracture
S42.111B	Displaced fracture of body of scapula, right shoulder, initial encounter for open fracture
S42.112A	Displaced fracture of body of scapula, left shoulder, initial encounter for closed fracture
S42.112B	Displaced fracture of body of scapula, left shoulder, initial encounter for open fracture
S42.113A	Displaced fracture of body of scapula, unspecified shoulder, initial encounter for closed fracture
S42.113B	Displaced fracture of body of scapula, unspecified shoulder, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.114A	Nondisplaced fracture of body of scapula, right shoulder, initial encounter for closed fracture
S42.114B	Nondisplaced fracture of body of scapula, right shoulder, initial encounter for open fracture
S42.115A	Nondisplaced fracture of body of scapula, left shoulder, initial encounter for closed fracture
S42.115B	Nondisplaced fracture of body of scapula, left shoulder, initial encounter for open fracture
S42.116A	Nondisplaced fracture of body of scapula, unspecified shoulder, initial encounter for closed fracture
S42.116B	Nondisplaced fracture of body of scapula, unspecified shoulder, initial encounter for open fracture
S42.121A	Displaced fracture of acromial process, right shoulder, initial encounter for closed fracture
S42.121B	Displaced fracture of acromial process, right shoulder, initial encounter for open fracture
S42.122A	Displaced fracture of acromial process, left shoulder, initial encounter for closed fracture
S42.122B	Displaced fracture of acromial process, left shoulder, initial encounter for open fracture
S42.123A	Displaced fracture of acromial process, unspecified shoulder, initial encounter for closed fracture
S42.123B	Displaced fracture of acromial process, unspecified shoulder, initial encounter for open fracture
S42.124A	Nondisplaced fracture of acromial process, right shoulder, initial encounter for closed fracture
S42.124B	Nondisplaced fracture of acromial process, right shoulder, initial encounter for open fracture
S42.125A	Nondisplaced fracture of acromial process, left shoulder, initial encounter for closed fracture
S42.125B	Nondisplaced fracture of acromial process, left shoulder, initial encounter for open fracture
S42.126A	Nondisplaced fracture of acromial process, unspecified shoulder, initial encounter for closed fracture
S42.126B	Nondisplaced fracture of acromial process, unspecified shoulder, initial encounter for open fracture
S42.131A	Displaced fracture of coracoid process, right shoulder, initial encounter for closed fracture
S42.131B	Displaced fracture of coracoid process, right shoulder, initial encounter for open fracture
S42.132A	Displaced fracture of coracoid process, left shoulder, initial encounter for closed fracture
S42.132B	Displaced fracture of coracoid process, left shoulder, initial encounter for open fracture
S42.133A	Displaced fracture of coracoid process, unspecified shoulder, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.133B	Displaced fracture of coracoid process, unspecified shoulder, initial encounter for open fracture
S42.134A	Nondisplaced fracture of coracoid process, right shoulder, initial encounter for closed fracture
S42.134B	Nondisplaced fracture of coracoid process, right shoulder, initial encounter for open fracture
S42.135A	Nondisplaced fracture of coracoid process, left shoulder, initial encounter for closed fracture
S42.135B	Nondisplaced fracture of coracoid process, left shoulder, initial encounter for open fracture
S42.136A	Nondisplaced fracture of coracoid process, unspecified shoulder, initial encounter for closed fracture
S42.136B	Nondisplaced fracture of coracoid process, unspecified shoulder, initial encounter for open fracture
S42.141A	Displaced fracture of glenoid cavity of scapula, right shoulder, initial encounter for closed fracture
S42.141B	Displaced fracture of glenoid cavity of scapula, right shoulder, initial encounter for open fracture
S42.142A	Displaced fracture of glenoid cavity of scapula, left shoulder, initial encounter for closed fracture
S42.142B	Displaced fracture of glenoid cavity of scapula, left shoulder, initial encounter for open fracture
S42.143A	Displaced fracture of glenoid cavity of scapula, unspecified shoulder, initial encounter for closed fracture
S42.143B	Displaced fracture of glenoid cavity of scapula, unspecified shoulder, initial encounter for open fracture
S42.144A	Nondisplaced fracture of glenoid cavity of scapula, right shoulder, initial encounter for closed fracture
S42.144B	Nondisplaced fracture of glenoid cavity of scapula, right shoulder, initial encounter for open fracture
S42.145A	Nondisplaced fracture of glenoid cavity of scapula, left shoulder, initial encounter for closed fracture
S42.145B	Nondisplaced fracture of glenoid cavity of scapula, left shoulder, initial encounter for open fracture
S42.146A	Nondisplaced fracture of glenoid cavity of scapula, unspecified shoulder, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.146B	Nondisplaced fracture of glenoid cavity of scapula, unspecified shoulder, initial encounter for open fracture
S42.151A	Displaced fracture of neck of scapula, right shoulder, initial encounter for closed fracture
S42.151B	Displaced fracture of neck of scapula, right shoulder, initial encounter for open fracture
S42.152A	Displaced fracture of neck of scapula, left shoulder, initial encounter for closed fracture
S42.152B	Displaced fracture of neck of scapula, left shoulder, initial encounter for open fracture
S42.153A	Displaced fracture of neck of scapula, unspecified shoulder, initial encounter for closed fracture
S42.153B	Displaced fracture of neck of scapula, unspecified shoulder, initial encounter for open fracture
S42.154A	Nondisplaced fracture of neck of scapula, right shoulder, initial encounter for closed fracture
S42.154B	Nondisplaced fracture of neck of scapula, right shoulder, initial encounter for open fracture
S42.155A	Nondisplaced fracture of neck of scapula, left shoulder, initial encounter for closed fracture
S42.155B	Nondisplaced fracture of neck of scapula, left shoulder, initial encounter for open fracture
S42.156A	Nondisplaced fracture of neck of scapula, unspecified shoulder, initial encounter for closed fracture
S42.156B	Nondisplaced fracture of neck of scapula, unspecified shoulder, initial encounter for open fracture
S42.191A	Fracture of other part of scapula, right shoulder, initial encounter for closed fracture
S42.191B	Fracture of other part of scapula, right shoulder, initial encounter for open fracture
S42.192A	Fracture of other part of scapula, left shoulder, initial encounter for closed fracture
S42.192B	Fracture of other part of scapula, left shoulder, initial encounter for open fracture
S42.199A	Fracture of other part of scapula, unspecified shoulder, initial encounter for closed fracture
S42.199B	Fracture of other part of scapula, unspecified shoulder, initial encounter for open fracture
S42.201A	Unspecified fracture of upper end of right humerus, initial encounter for closed fracture
S42.201B	Unspecified fracture of upper end of right humerus, initial encounter for open fracture
S42.202A	Unspecified fracture of upper end of left humerus, initial encounter for closed fracture
S42.202B	Unspecified fracture of upper end of left humerus, initial encounter for open fracture
S42.209A	Unspecified fracture of upper end of unspecified humerus, initial encounter for closed fracture
S42.209B	Unspecified fracture of upper end of unspecified humerus, initial encounter for open fracture

NCD 190.16

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April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.211A	Unspecified displaced fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.211B	Unspecified displaced fracture of surgical neck of right humerus, initial encounter for open fracture
S42.212A	Unspecified displaced fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.212B	Unspecified displaced fracture of surgical neck of left humerus, initial encounter for open fracture
S42.213A	Unspecified displaced fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.213B	Unspecified displaced fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.214A	Unspecified nondisplaced fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.214B	Unspecified nondisplaced fracture of surgical neck of right humerus, initial encounter for open fracture
S42.215A	Unspecified nondisplaced fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.215B	Unspecified nondisplaced fracture of surgical neck of left humerus, initial encounter for open fracture
S42.216A	Unspecified nondisplaced fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.216B	Unspecified nondisplaced fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.221A	2-part displaced fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.221B	2-part displaced fracture of surgical neck of right humerus, initial encounter for open fracture
S42.222A	2-part displaced fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.222B	2-part displaced fracture of surgical neck of left humerus, initial encounter for open fracture
S42.223A	2-part displaced fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.223B	2-part displaced fracture of surgical neck of unspecified humerus, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.224A	2-part nondisplaced fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.224B	2-part nondisplaced fracture of surgical neck of right humerus, initial encounter for open fracture
S42.225A	2-part nondisplaced fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.225B	2-part nondisplaced fracture of surgical neck of left humerus, initial encounter for open fracture
S42.226A	2-part nondisplaced fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.226B	2-part nondisplaced fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.231A	3-part fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.231B	3-part fracture of surgical neck of right humerus, initial encounter for open fracture
S42.232A	3-part fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.232B	3-part fracture of surgical neck of left humerus, initial encounter for open fracture
S42.239A	3-part fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.239B	3-part fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.241A	4-part fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.241B	4-part fracture of surgical neck of right humerus, initial encounter for open fracture
S42.242A	4-part fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.242B	4-part fracture of surgical neck of left humerus, initial encounter for open fracture
S42.249A	4-part fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.249B	4-part fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.251A	Displaced fracture of greater tuberosity of right humerus, initial encounter for closed fracture
S42.251B	Displaced fracture of greater tuberosity of right humerus, initial encounter for open fracture
S42.252A	Displaced fracture of greater tuberosity of left humerus, initial encounter for closed fracture
S42.252B	Displaced fracture of greater tuberosity of left humerus, initial encounter for open fracture
S42.253A	Displaced fracture of greater tuberosity of unspecified humerus, initial encounter for closed fracture
S42.253B	Displaced fracture of greater tuberosity of unspecified humerus, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.254A	Nondisplaced fracture of greater tuberosity of right humerus, initial encounter for closed fracture
S42.254B	Nondisplaced fracture of greater tuberosity of right humerus, initial encounter for open fracture
S42.255A	Nondisplaced fracture of greater tuberosity of left humerus, initial encounter for closed fracture
S42.255B	Nondisplaced fracture of greater tuberosity of left humerus, initial encounter for open fracture
S42.256A	Nondisplaced fracture of greater tuberosity of unspecified humerus, initial encounter for closed fracture
S42.256B	Nondisplaced fracture of greater tuberosity of unspecified humerus, initial encounter for open fracture
S42.261A	Displaced fracture of lesser tuberosity of right humerus, initial encounter for closed fracture
S42.261B	Displaced fracture of lesser tuberosity of right humerus, initial encounter for open fracture
S42.262A	Displaced fracture of lesser tuberosity of left humerus, initial encounter for closed fracture
S42.262B	Displaced fracture of lesser tuberosity of left humerus, initial encounter for open fracture
S42.263A	Displaced fracture of lesser tuberosity of unspecified humerus, initial encounter for closed fracture
S42.263B	Displaced fracture of lesser tuberosity of unspecified humerus, initial encounter for open fracture
S42.264A	Nondisplaced fracture of lesser tuberosity of right humerus, initial encounter for closed fracture
S42.264B	Nondisplaced fracture of lesser tuberosity of right humerus, initial encounter for open fracture
S42.265A	Nondisplaced fracture of lesser tuberosity of left humerus, initial encounter for closed fracture
S42.265B	Nondisplaced fracture of lesser tuberosity of left humerus, initial encounter for open fracture
S42.266A	Nondisplaced fracture of lesser tuberosity of unspecified humerus, initial encounter for closed fracture
S42.266B	Nondisplaced fracture of lesser tuberosity of unspecified humerus, initial encounter for open fracture
S42.271A	Torus fracture of upper end of right humerus, initial encounter for closed fracture
S42.272A	Torus fracture of upper end of left humerus, initial encounter for closed fracture
S42.279A	Torus fracture of upper end of unspecified humerus, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.291A	Other displaced fracture of upper end of right humerus, initial encounter for closed fracture
S42.291B	Other displaced fracture of upper end of right humerus, initial encounter for open fracture
S42.292A	Other displaced fracture of upper end of left humerus, initial encounter for closed fracture
S42.292B	Other displaced fracture of upper end of left humerus, initial encounter for open fracture
S42.293A	Other displaced fracture of upper end of unspecified humerus, initial encounter for closed fracture
S42.293B	Other displaced fracture of upper end of unspecified humerus, initial encounter for open fracture
S42.294A	Other nondisplaced fracture of upper end of right humerus, initial encounter for closed fracture
S42.294B	Other nondisplaced fracture of upper end of right humerus, initial encounter for open fracture
S42.295A	Other nondisplaced fracture of upper end of left humerus, initial encounter for closed fracture
S42.295B	Other nondisplaced fracture of upper end of left humerus, initial encounter for open fracture
S42.296A	Other nondisplaced fracture of upper end of unspecified humerus, initial encounter for closed fracture
S42.296B	Other nondisplaced fracture of upper end of unspecified humerus, initial encounter for open fracture
S42.301A	Unspecified fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.301B	Unspecified fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.302A	Unspecified fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.302B	Unspecified fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.309A	Unspecified fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.309B	Unspecified fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.311A	Greenstick fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.312A	Greenstick fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.319A	Greenstick fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.321A	Displaced transverse fracture of shaft of humerus, right arm, initial encounter for closed fracture



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.321B	Displaced transverse fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.322A	Displaced transverse fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.322B	Displaced transverse fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.323A	Displaced transverse fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.323B	Displaced transverse fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.324A	Nondisplaced transverse fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.324B	Nondisplaced transverse fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.325A	Nondisplaced transverse fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.325B	Nondisplaced transverse fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.326A	Nondisplaced transverse fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.326B	Nondisplaced transverse fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.331A	Displaced oblique fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.331B	Displaced oblique fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.332A	Displaced oblique fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.332B	Displaced oblique fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.333A	Displaced oblique fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.333B	Displaced oblique fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.334A	Nondisplaced oblique fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.334B	Nondisplaced oblique fracture of shaft of humerus, right arm, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.335A	Nondisplaced oblique fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.335B	Nondisplaced oblique fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.336A	Nondisplaced oblique fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.336B	Nondisplaced oblique fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.341A	Displaced spiral fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.341B	Displaced spiral fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.342A	Displaced spiral fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.342B	Displaced spiral fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.343A	Displaced spiral fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.343B	Displaced spiral fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.344A	Nondisplaced spiral fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.344B	Nondisplaced spiral fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.345A	Nondisplaced spiral fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.345B	Nondisplaced spiral fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.346A	Nondisplaced spiral fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.346B	Nondisplaced spiral fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.351A	Displaced comminuted fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.351B	Displaced comminuted fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.352A	Displaced comminuted fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.352B	Displaced comminuted fracture of shaft of humerus, left arm, initial encounter for open fracture

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.353A	Displaced comminuted fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.353B	Displaced comminuted fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.354A	Nondisplaced comminuted fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.354B	Nondisplaced comminuted fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.355A	Nondisplaced comminuted fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.355B	Nondisplaced comminuted fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.356A	Nondisplaced comminuted fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.356B	Nondisplaced comminuted fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.361A	Displaced segmental fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.361B	Displaced segmental fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.362A	Displaced segmental fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.362B	Displaced segmental fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.363A	Displaced segmental fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.363B	Displaced segmental fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.364A	Nondisplaced segmental fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.364B	Nondisplaced segmental fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.365A	Nondisplaced segmental fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.365B	Nondisplaced segmental fracture of shaft of humerus, left arm, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.366A	Nondisplaced segmental fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.366B	Nondisplaced segmental fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.391A	Other fracture of shaft of right humerus, initial encounter for closed fracture
S42.391B	Other fracture of shaft of right humerus, initial encounter for open fracture
S42.392A	Other fracture of shaft of left humerus, initial encounter for closed fracture
S42.392B	Other fracture of shaft of left humerus, initial encounter for open fracture
S42.399A	Other fracture of shaft of unspecified humerus, initial encounter for closed fracture
S42.399B	Other fracture of shaft of unspecified humerus, initial encounter for open fracture
S42.401A	Unspecified fracture of lower end of right humerus, initial encounter for closed fracture
S42.401B	Unspecified fracture of lower end of right humerus, initial encounter for open fracture
S42.402A	Unspecified fracture of lower end of left humerus, initial encounter for closed fracture
S42.402B	Unspecified fracture of lower end of left humerus, initial encounter for open fracture
S42.409A	Unspecified fracture of lower end of unspecified humerus, initial encounter for closed fracture
S42.409B	Unspecified fracture of lower end of unspecified humerus, initial encounter for open fracture
S42.411A	Displaced simple supracondylar fracture without intercondylar fracture of right humerus, initial encounter for closed fracture
S42.411B	Displaced simple supracondylar fracture without intercondylar fracture of right humerus, initial encounter for open fracture
S42.412A	Displaced simple supracondylar fracture without intercondylar fracture of left humerus, initial encounter for closed fracture
S42.412B	Displaced simple supracondylar fracture without intercondylar fracture of left humerus, initial encounter for open fracture
S42.413A	Displaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.413B	Displaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for open fracture
S42.414A	Nondisplaced simple supracondylar fracture without intercondylar fracture of right humerus, initial encounter for closed fracture
S42.414B	Nondisplaced simple supracondylar fracture without intercondylar fracture of right humerus, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.415A	Nondisplaced simple supracondylar fracture without intercondylar fracture of left humerus, initial encounter for closed fracture
S42.415B	Nondisplaced simple supracondylar fracture without intercondylar fracture of left humerus, initial encounter for open fracture
S42.416A	Nondisplaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.416B	Nondisplaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for open fracture
S42.421A	Displaced comminuted supracondylar fracture without intercondylar fracture of right humerus, initial encounter for closed fracture
S42.421B	Displaced comminuted supracondylar fracture without intercondylar fracture of right humerus, initial encounter for open fracture
S42.422A	Displaced comminuted supracondylar fracture without intercondylar fracture of left humerus, initial encounter for closed fracture
S42.422B	Displaced comminuted supracondylar fracture without intercondylar fracture of left humerus, initial encounter for open fracture
S42.423A	Displaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.423B	Displaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for open fracture
S42.424A	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of right humerus, initial encounter for closed fracture
S42.424B	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of right humerus, initial encounter for open fracture
S42.425A	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of left humerus, initial encounter for closed fracture
S42.425B	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of left humerus, initial encounter for open fracture
S42.426A	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.426B	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for open fracture
S42.431A	Displaced fracture (avulsion) of lateral epicondyle of right humerus, initial encounter for closed fracture
S42.431B	Displaced fracture (avulsion) of lateral epicondyle of right humerus, initial encounter for open fracture

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.432A	Displaced fracture (avulsion) of lateral epicondyle of left humerus, initial encounter for closed fracture
S42.432B	Displaced fracture (avulsion) of lateral epicondyle of left humerus, initial encounter for open fracture
S42.433A	Displaced fracture (avulsion) of lateral epicondyle of unspecified humerus, initial encounter for closed fracture
S42.433B	Displaced fracture (avulsion) of lateral epicondyle of unspecified humerus, initial encounter for open fracture
S42.434A	Nondisplaced fracture (avulsion) of lateral epicondyle of right humerus, initial encounter for closed fracture
S42.434B	Nondisplaced fracture (avulsion) of lateral epicondyle of right humerus, initial encounter for open fracture
S42.435A	Nondisplaced fracture (avulsion) of lateral epicondyle of left humerus, initial encounter for closed fracture
S42.435B	Nondisplaced fracture (avulsion) of lateral epicondyle of left humerus, initial encounter for open fracture
S42.436A	Nondisplaced fracture (avulsion) of lateral epicondyle of unspecified humerus, initial encounter for closed fracture
S42.436B	Nondisplaced fracture (avulsion) of lateral epicondyle of unspecified humerus, initial encounter for open fracture
S42.441A	Displaced fracture (avulsion) of medial epicondyle of right humerus, initial encounter for closed fracture
S42.441B	Displaced fracture (avulsion) of medial epicondyle of right humerus, initial encounter for open fracture
S42.442A	Displaced fracture (avulsion) of medial epicondyle of left humerus, initial encounter for closed fracture
S42.442B	Displaced fracture (avulsion) of medial epicondyle of left humerus, initial encounter for open fracture
S42.443A	Displaced fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for closed fracture
S42.443B	Displaced fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for open fracture
S42.444A	Nondisplaced fracture (avulsion) of medial epicondyle of right humerus, initial encounter for closed fracture
S42.444B	Nondisplaced fracture (avulsion) of medial epicondyle of right humerus, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.445A	Nondisplaced fracture (avulsion) of medial epicondyle of left humerus, initial encounter for closed fracture
S42.445B	Nondisplaced fracture (avulsion) of medial epicondyle of left humerus, initial encounter for open fracture
S42.446A	Nondisplaced fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for closed fracture
S42.446B	Nondisplaced fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for open fracture
S42.447A	Incarcerated fracture (avulsion) of medial epicondyle of right humerus, initial encounter for closed fracture
S42.447B	Incarcerated fracture (avulsion) of medial epicondyle of right humerus, initial encounter for open fracture
S42.448A	Incarcerated fracture (avulsion) of medial epicondyle of left humerus, initial encounter for closed fracture
S42.448B	Incarcerated fracture (avulsion) of medial epicondyle of left humerus, initial encounter for open fracture
S42.449A	Incarcerated fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for closed fracture
S42.449B	Incarcerated fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for open fracture
S42.451A	Displaced fracture of lateral condyle of right humerus, initial encounter for closed fracture
S42.451B	Displaced fracture of lateral condyle of right humerus, initial encounter for open fracture
S42.452A	Displaced fracture of lateral condyle of left humerus, initial encounter for closed fracture
S42.452B	Displaced fracture of lateral condyle of left humerus, initial encounter for open fracture
S42.453A	Displaced fracture of lateral condyle of unspecified humerus, initial encounter for closed fracture
S42.453B	Displaced fracture of lateral condyle of unspecified humerus, initial encounter for open fracture
S42.454A	Nondisplaced fracture of lateral condyle of right humerus, initial encounter for closed fracture
S42.454B	Nondisplaced fracture of lateral condyle of right humerus, initial encounter for open fracture
S42.455A	Nondisplaced fracture of lateral condyle of left humerus, initial encounter for closed fracture
S42.455B	Nondisplaced fracture of lateral condyle of left humerus, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.456A	Nondisplaced fracture of lateral condyle of unspecified humerus, initial encounter for closed fracture
S42.456B	Nondisplaced fracture of lateral condyle of unspecified humerus, initial encounter for open fracture
S42.461A	Displaced fracture of medial condyle of right humerus, initial encounter for closed fracture
S42.461B	Displaced fracture of medial condyle of right humerus, initial encounter for open fracture
S42.462A	Displaced fracture of medial condyle of left humerus, initial encounter for closed fracture
S42.462B	Displaced fracture of medial condyle of left humerus, initial encounter for open fracture
S42.463A	Displaced fracture of medial condyle of unspecified humerus, initial encounter for closed fracture
S42.463B	Displaced fracture of medial condyle of unspecified humerus, initial encounter for open fracture
S42.464A	Nondisplaced fracture of medial condyle of right humerus, initial encounter for closed fracture
S42.464B	Nondisplaced fracture of medial condyle of right humerus, initial encounter for open fracture
S42.465A	Nondisplaced fracture of medial condyle of left humerus, initial encounter for closed fracture
S42.465B	Nondisplaced fracture of medial condyle of left humerus, initial encounter for open fracture
S42.466A	Nondisplaced fracture of medial condyle of unspecified humerus, initial encounter for closed fracture
S42.466B	Nondisplaced fracture of medial condyle of unspecified humerus, initial encounter for open fracture
S42.471A	Displaced transcondylar fracture of right humerus, initial encounter for closed fracture
S42.471B	Displaced transcondylar fracture of right humerus, initial encounter for open fracture
S42.472A	Displaced transcondylar fracture of left humerus, initial encounter for closed fracture
S42.472B	Displaced transcondylar fracture of left humerus, initial encounter for open fracture
S42.473A	Displaced transcondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.473B	Displaced transcondylar fracture of unspecified humerus, initial encounter for open fracture
S42.474A	Nondisplaced transcondylar fracture of right humerus, initial encounter for closed fracture
S42.474B	Nondisplaced transcondylar fracture of right humerus, initial encounter for open fracture
S42.475A	Nondisplaced transcondylar fracture of left humerus, initial encounter for closed fracture
S42.475B	Nondisplaced transcondylar fracture of left humerus, initial encounter for open fracture

NCD 190.16

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S42.476A	Nondisplaced transcondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.476B	Nondisplaced transcondylar fracture of unspecified humerus, initial encounter for open fracture
S42.481A	Torus fracture of lower end of right humerus, initial encounter for closed fracture
S42.482A	Torus fracture of lower end of left humerus, initial encounter for closed fracture
S42.489A	Torus fracture of lower end of unspecified humerus, initial encounter for closed fracture
S42.491A	Other displaced fracture of lower end of right humerus, initial encounter for closed fracture
S42.491B	Other displaced fracture of lower end of right humerus, initial encounter for open fracture
S42.492A	Other displaced fracture of lower end of left humerus, initial encounter for closed fracture
S42.492B	Other displaced fracture of lower end of left humerus, initial encounter for open fracture
S42.493A	Other displaced fracture of lower end of unspecified humerus, initial encounter for closed fracture
S42.493B	Other displaced fracture of lower end of unspecified humerus, initial encounter for open fracture
S42.494A	Other nondisplaced fracture of lower end of right humerus, initial encounter for closed fracture
S42.494B	Other nondisplaced fracture of lower end of right humerus, initial encounter for open fracture
S42.495A	Other nondisplaced fracture of lower end of left humerus, initial encounter for closed fracture
S42.495B	Other nondisplaced fracture of lower end of left humerus, initial encounter for open fracture
S42.496A	Other nondisplaced fracture of lower end of unspecified humerus, initial encounter for closed fracture
S42.496B	Other nondisplaced fracture of lower end of unspecified humerus, initial encounter for open fracture
S42.90XA	Fracture of unspecified shoulder girdle, part unspecified, initial encounter for closed fracture
S42.90XB	Fracture of unspecified shoulder girdle, part unspecified, initial encounter for open fracture
S42.91XA	Fracture of right shoulder girdle, part unspecified, initial encounter for closed fracture
S42.91XB	Fracture of right shoulder girdle, part unspecified, initial encounter for open fracture
S42.92XA	Fracture of left shoulder girdle, part unspecified, initial encounter for closed fracture
S42.92XB	Fracture of left shoulder girdle, part unspecified, initial encounter for open fracture
S45.001A	Unspecified injury of axillary artery, right side, initial encounter

NCD 190.16

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S45.002A	Unspecified injury of axillary artery, left side, initial encounter
S45.009A	Unspecified injury of axillary artery, unspecified side, initial encounter
S45.011A	Laceration of axillary artery, right side, initial encounter
S45.012A	Laceration of axillary artery, left side, initial encounter
S45.019A	Laceration of axillary artery, unspecified side, initial encounter
S45.091A	Other specified injury of axillary artery, right side, initial encounter
S45.092A	Other specified injury of axillary artery, left side, initial encounter
S45.099A	Other specified injury of axillary artery, unspecified side, initial encounter
S45.101A	Unspecified injury of brachial artery, right side, initial encounter
S45.102A	Unspecified injury of brachial artery, left side, initial encounter
S45.109A	Unspecified injury of brachial artery, unspecified side, initial encounter
S45.111A	Laceration of brachial artery, right side, initial encounter
S45.112A	Laceration of brachial artery, left side, initial encounter
S45.119A	Laceration of brachial artery, unspecified side, initial encounter
S45.191A	Other specified injury of brachial artery, right side, initial encounter
S45.192A	Other specified injury of brachial artery, left side, initial encounter
S45.199A	Other specified injury of brachial artery, unspecified side, initial encounter
S45.201A	Unspecified injury of axillary or brachial vein, right side, initial encounter
S45.202A	Unspecified injury of axillary or brachial vein, left side, initial encounter
S45.209A	Unspecified injury of axillary or brachial vein, unspecified side, initial encounter
S45.211A	Laceration of axillary or brachial vein, right side, initial encounter
S45.212A	Laceration of axillary or brachial vein, left side, initial encounter
S45.219A	Laceration of axillary or brachial vein, unspecified side, initial encounter
S45.291A	Other specified injury of axillary or brachial vein, right side, initial encounter
S45.292A	Other specified injury of axillary or brachial vein, left side, initial encounter
S45.299A	Other specified injury of axillary or brachial vein, unspecified side, initial encounter
S45.301A	Unspecified injury of superficial vein at shoulder and upper arm level, right arm, initial encounter
S45.302A	Unspecified injury of superficial vein at shoulder and upper arm level, left arm, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S45.309A	Unspecified injury of superficial vein at shoulder and upper arm level, unspecified arm, initial encounter
S45.311A	Laceration of superficial vein at shoulder and upper arm level, right arm, initial encounter
S45.312A	Laceration of superficial vein at shoulder and upper arm level, left arm, initial encounter
S45.319A	Laceration of superficial vein at shoulder and upper arm level, unspecified arm, initial encounter
S45.391A	Other specified injury of superficial vein at shoulder and upper arm level, right arm, initial encounter
S45.392A	Other specified injury of superficial vein at shoulder and upper arm level, left arm, initial encounter
S45.399A	Other specified injury of superficial vein at shoulder and upper arm level, unspecified arm, initial encounter
S45.801A	Unspecified injury of other specified blood vessels at shoulder and upper arm level, right arm, initial encounter
S45.802A	Unspecified injury of other specified blood vessels at shoulder and upper arm level, left arm, initial encounter
S45.809A	Unspecified injury of other specified blood vessels at shoulder and upper arm level, unspecified arm, initial encounter
S45.811A	Laceration of other specified blood vessels at shoulder and upper arm level, right arm, initial encounter
S45.812A	Laceration of other specified blood vessels at shoulder and upper arm level, left arm, initial encounter
S45.819A	Laceration of other specified blood vessels at shoulder and upper arm level, unspecified arm, initial encounter
S45.891A	Other specified injury of other specified blood vessels at shoulder and upper arm level, right arm, initial encounter
S45.892A	Other specified injury of other specified blood vessels at shoulder and upper arm level, left arm, initial encounter
S45.899A	Other specified injury of other specified blood vessels at shoulder and upper arm level, unspecified arm, initial encounter
S45.901A	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, right arm, initial encounter
S45.902A	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, left arm, initial encounter
S45.909A	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, unspecified arm, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S45.911A	Laceration of unspecified blood vessel at shoulder and upper arm level, right arm, initial encounter
S45.912A	Laceration of unspecified blood vessel at shoulder and upper arm level, left arm, initial encounter
S45.919A	Laceration of unspecified blood vessel at shoulder and upper arm level, unspecified arm, initial encounter
S45.991A	Other specified injury of unspecified blood vessel at shoulder and upper arm level, right arm, initial encounter
S45.992A	Other specified injury of unspecified blood vessel at shoulder and upper arm level, left arm, initial encounter
S45.999A	Other specified injury of unspecified blood vessel at shoulder and upper arm level, unspecified arm, initial encounter
S47.1XXA	Crushing injury of right shoulder and upper arm, initial encounter
S47.2XXA	Crushing injury of left shoulder and upper arm, initial encounter
S47.9XXA	Crushing injury of shoulder and upper arm, unspecified arm, initial encounter
S49.001A	Unspecified physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.002A	Unspecified physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.009A	Unspecified physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.011A	Salter-Harris Type I physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.012A	Salter-Harris Type I physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.019A	Salter-Harris Type I physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.021A	Salter-Harris Type II physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.022A	Salter-Harris Type II physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.029A	Salter-Harris Type II physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.031A	Salter-Harris Type III physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
S49.032A	Salter-Harris Type III physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.039A	Salter-Harris Type III physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.041A	Salter-Harris Type IV physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.042A	Salter-Harris Type IV physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.049A	Salter-Harris Type IV physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.091A	Other physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.092A	Other physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.099A	Other physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.101A	Unspecified physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.102A	Unspecified physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.109A	Unspecified physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.111A	Salter-Harris Type I physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.112A	Salter-Harris Type I physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.119A	Salter-Harris Type I physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.121A	Salter-Harris Type II physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.122A	Salter-Harris Type II physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.129A	Salter-Harris Type II physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.131A	Salter-Harris Type III physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S49.132A	Salter-Harris Type III physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.139A	Salter-Harris Type III physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.141A	Salter-Harris Type IV physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.142A	Salter-Harris Type IV physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.149A	Salter-Harris Type IV physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.191A	Other physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.192A	Other physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.199A	Other physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S50.00XA	Contusion of unspecified elbow, initial encounter
S50.01XA	Contusion of right elbow, initial encounter
S50.02XA	Contusion of left elbow, initial encounter
S50.10XA	Contusion of unspecified forearm, initial encounter
S50.11XA	Contusion of right forearm, initial encounter
S50.12XA	Contusion of left forearm, initial encounter
S52.001B	Unspecified fracture of upper end of right ulna, initial encounter for open fracture type I or II
S52.001C	Unspecified fracture of upper end of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.002B	Unspecified fracture of upper end of left ulna, initial encounter for open fracture type I or II
S52.002C	Unspecified fracture of upper end of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.009B	Unspecified fracture of upper end of unspecified ulna, initial encounter for open fracture type I or II
S52.009C	Unspecified fracture of upper end of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.021B	Displaced fracture of olecranon process without intraarticular extension of right ulna, initial encounter for open fracture type I or II



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.021C	Displaced fracture of olecranon process without intraarticular extension of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.022B	Displaced fracture of olecranon process without intraarticular extension of left ulna, initial encounter for open fracture type I or II
S52.022C	Displaced fracture of olecranon process without intraarticular extension of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.023B	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, initial encounter for open fracture type I or II
S52.023C	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.024B	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, initial encounter for open fracture type I or II
S52.024C	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.025B	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, initial encounter for open fracture type I or II
S52.025C	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.026B	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, initial encounter for open fracture type I or II
S52.026C	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.031B	Displaced fracture of olecranon process with intraarticular extension of right ulna, initial encounter for open fracture type I or II
S52.031C	Displaced fracture of olecranon process with intraarticular extension of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.032B	Displaced fracture of olecranon process with intraarticular extension of left ulna, initial encounter for open fracture type I or II
S52.032C	Displaced fracture of olecranon process with intraarticular extension of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.033B	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, initial encounter for open fracture type I or II
S52.033C	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.034B	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, initial encounter for open fracture type I or II



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Code	Description
S52.034C	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.035B	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, initial encounter for open fracture type I or II
S52.035C	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.036B	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, initial encounter for open fracture type I or II
S52.036C	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.041B	Displaced fracture of coronoid process of right ulna, initial encounter for open fracture type I or II
S52.041C	Displaced fracture of coronoid process of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.042B	Displaced fracture of coronoid process of left ulna, initial encounter for open fracture type I or II
S52.042C	Displaced fracture of coronoid process of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.043B	Displaced fracture of coronoid process of unspecified ulna, initial encounter for open fracture type I or II
S52.043C	Displaced fracture of coronoid process of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.044B	Nondisplaced fracture of coronoid process of right ulna, initial encounter for open fracture type I or II
S52.044C	Nondisplaced fracture of coronoid process of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.045B	Nondisplaced fracture of coronoid process of left ulna, initial encounter for open fracture type I or II
S52.045C	Nondisplaced fracture of coronoid process of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.046B	Nondisplaced fracture of coronoid process of unspecified ulna, initial encounter for open fracture type I or II
S52.046C	Nondisplaced fracture of coronoid process of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.091B	Other fracture of upper end of right ulna, initial encounter for open fracture type I or II



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Code	Description
S52.091C	Other fracture of upper end of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.092B	Other fracture of upper end of left ulna, initial encounter for open fracture type I or II
S52.092C	Other fracture of upper end of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.099B	Other fracture of upper end of unspecified ulna, initial encounter for open fracture type I or II
S52.099C	Other fracture of upper end of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.101B	Unspecified fracture of upper end of right radius, initial encounter for open fracture type I or II
S52.101C	Unspecified fracture of upper end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.102B	Unspecified fracture of upper end of left radius, initial encounter for open fracture type I or II
S52.102C	Unspecified fracture of upper end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.109B	Unspecified fracture of upper end of unspecified radius, initial encounter for open fracture type I or II
S52.109C	Unspecified fracture of upper end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.121B	Displaced fracture of head of right radius, initial encounter for open fracture type I or II
S52.121C	Displaced fracture of head of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.122B	Displaced fracture of head of left radius, initial encounter for open fracture type I or II
S52.122C	Displaced fracture of head of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.123B	Displaced fracture of head of unspecified radius, initial encounter for open fracture type I or II
S52.123C	Displaced fracture of head of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.124B	Nondisplaced fracture of head of right radius, initial encounter for open fracture type I or II
S52.124C	Nondisplaced fracture of head of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.125B	Nondisplaced fracture of head of left radius, initial encounter for open fracture type I or II



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Code	Description
S52.125C	Nondisplaced fracture of head of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.126B	Nondisplaced fracture of head of unspecified radius, initial encounter for open fracture type I or II
S52.126C	Nondisplaced fracture of head of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.131B	Displaced fracture of neck of right radius, initial encounter for open fracture type I or II
S52.131C	Displaced fracture of neck of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.132B	Displaced fracture of neck of left radius, initial encounter for open fracture type I or II
S52.132C	Displaced fracture of neck of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.133B	Displaced fracture of neck of unspecified radius, initial encounter for open fracture type I or II
S52.133C	Displaced fracture of neck of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.134B	Nondisplaced fracture of neck of right radius, initial encounter for open fracture type I or II
S52.134C	Nondisplaced fracture of neck of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.135B	Nondisplaced fracture of neck of left radius, initial encounter for open fracture type I or II
S52.135C	Nondisplaced fracture of neck of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.136B	Nondisplaced fracture of neck of unspecified radius, initial encounter for open fracture type I or II
S52.136C	Nondisplaced fracture of neck of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.181B	Other fracture of upper end of right radius, initial encounter for open fracture type I or II
S52.181C	Other fracture of upper end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.182B	Other fracture of upper end of left radius, initial encounter for open fracture type I or II
S52.182C	Other fracture of upper end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.189B	Other fracture of upper end of unspecified radius, initial encounter for open fracture type I or II



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Code	Description
S52.189C	Other fracture of upper end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.201B	Unspecified fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.201C	Unspecified fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.202B	Unspecified fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.202C	Unspecified fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.209B	Unspecified fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.209C	Unspecified fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.221B	Displaced transverse fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.221C	Displaced transverse fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.222B	Displaced transverse fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.222C	Displaced transverse fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.223B	Displaced transverse fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.223C	Displaced transverse fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.224B	Nondisplaced transverse fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.224C	Nondisplaced transverse fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.225B	Nondisplaced transverse fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.225C	Nondisplaced transverse fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.226B	Nondisplaced transverse fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.226C	Nondisplaced transverse fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.231B	Displaced oblique fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.231C	Displaced oblique fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.232B	Displaced oblique fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.232C	Displaced oblique fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.233B	Displaced oblique fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.233C	Displaced oblique fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.234B	Nondisplaced oblique fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.234C	Nondisplaced oblique fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.235B	Nondisplaced oblique fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.235C	Nondisplaced oblique fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.236B	Nondisplaced oblique fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.236C	Nondisplaced oblique fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.241B	Displaced spiral fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.241C	Displaced spiral fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.242B	Displaced spiral fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.242C	Displaced spiral fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.243B	Displaced spiral fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.243C	Displaced spiral fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.244B	Nondisplaced spiral fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.244C	Nondisplaced spiral fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.245B	Nondisplaced spiral fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.245C	Nondisplaced spiral fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.246B	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.246C	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.251B	Displaced comminuted fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.251C	Displaced comminuted fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.252B	Displaced comminuted fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.252C	Displaced comminuted fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.253B	Displaced comminuted fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.253C	Displaced comminuted fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.254B	Nondisplaced comminuted fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.254C	Nondisplaced comminuted fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.255B	Nondisplaced comminuted fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.255C	Nondisplaced comminuted fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.256B	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.256C	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.261B	Displaced segmental fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.261C	Displaced segmental fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.262B	Displaced segmental fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.262C	Displaced segmental fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.263B	Displaced segmental fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.263C	Displaced segmental fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.264B	Nondisplaced segmental fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.264C	Nondisplaced segmental fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.265B	Nondisplaced segmental fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.265C	Nondisplaced segmental fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.266B	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.266C	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.271B	Monteggia's fracture of right ulna, initial encounter for open fracture type I or II
S52.271C	Monteggia's fracture of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.272B	Monteggia's fracture of left ulna, initial encounter for open fracture type I or II
S52.272C	Monteggia's fracture of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.279B	Monteggia's fracture of unspecified ulna, initial encounter for open fracture type I or II
S52.279C	Monteggia's fracture of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.281B	Bent bone of right ulna, initial encounter for open fracture type I or II
S52.281C	Bent bone of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.282B	Bent bone of left ulna, initial encounter for open fracture type I or II
S52.282C	Bent bone of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.283B	Bent bone of unspecified ulna, initial encounter for open fracture type I or II
S52.283C	Bent bone of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.291B	Other fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.291C	Other fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.292B	Other fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.292C	Other fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.299B	Other fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.299C	Other fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.301B	Unspecified fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.301C	Unspecified fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.302B	Unspecified fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.302C	Unspecified fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.309B	Unspecified fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.309C	Unspecified fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.321B	Displaced transverse fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.321C	Displaced transverse fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.322B	Displaced transverse fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.322C	Displaced transverse fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.323B	Displaced transverse fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.323C	Displaced transverse fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.324B	Nondisplaced transverse fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.324C	Nondisplaced transverse fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC

NCD 190.16

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.325B	Nondisplaced transverse fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.325C	Nondisplaced transverse fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.326B	Nondisplaced transverse fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.326C	Nondisplaced transverse fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.331B	Displaced oblique fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.331C	Displaced oblique fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.332B	Displaced oblique fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.332C	Displaced oblique fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.333B	Displaced oblique fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.333C	Displaced oblique fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.334B	Nondisplaced oblique fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.334C	Nondisplaced oblique fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.335B	Nondisplaced oblique fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.335C	Nondisplaced oblique fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.336B	Nondisplaced oblique fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.336C	Nondisplaced oblique fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.341B	Displaced spiral fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.341C	Displaced spiral fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.342B	Displaced spiral fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.342C	Displaced spiral fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.343B	Displaced spiral fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.343C	Displaced spiral fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.344B	Nondisplaced spiral fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.344C	Nondisplaced spiral fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.345B	Nondisplaced spiral fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.345C	Nondisplaced spiral fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.346B	Nondisplaced spiral fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.346C	Nondisplaced spiral fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.351B	Displaced comminuted fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.351C	Displaced comminuted fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.352B	Displaced comminuted fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.352C	Displaced comminuted fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.353B	Displaced comminuted fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.353C	Displaced comminuted fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.354B	Nondisplaced comminuted fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.354C	Nondisplaced comminuted fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.355B	Nondisplaced comminuted fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.355C	Nondisplaced comminuted fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.356B	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.356C	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.361B	Displaced segmental fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.361C	Displaced segmental fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.362B	Displaced segmental fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.362C	Displaced segmental fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.363B	Displaced segmental fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.363C	Displaced segmental fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.364B	Nondisplaced segmental fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.364C	Nondisplaced segmental fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.365B	Nondisplaced segmental fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.365C	Nondisplaced segmental fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.366B	Nondisplaced segmental fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.366C	Nondisplaced segmental fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.371B	Galeazzi's fracture of right radius, initial encounter for open fracture type I or II
S52.371C	Galeazzi's fracture of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.372B	Galeazzi's fracture of left radius, initial encounter for open fracture type I or II
S52.372C	Galeazzi's fracture of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.379B	Galeazzi's fracture of unspecified radius, initial encounter for open fracture type I or II
S52.379C	Galeazzi's fracture of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.381B	Bent bone of right radius, initial encounter for open fracture type I or II
S52.381C	Bent bone of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.382B	Bent bone of left radius, initial encounter for open fracture type I or II
S52.382C	Bent bone of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.389B	Bent bone of unspecified radius, initial encounter for open fracture type I or II
S52.389C	Bent bone of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.391B	Other fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.391C	Other fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.392B	Other fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.392C	Other fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.399B	Other fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.399C	Other fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.501B	Unspecified fracture of the lower end of right radius, initial encounter for open fracture type I or II
S52.501C	Unspecified fracture of the lower end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.502B	Unspecified fracture of the lower end of left radius, initial encounter for open fracture type I or II
S52.502C	Unspecified fracture of the lower end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.509B	Unspecified fracture of the lower end of unspecified radius, initial encounter for open fracture type I or II
S52.509C	Unspecified fracture of the lower end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.511B	Displaced fracture of right radial styloid process, initial encounter for open fracture type I or II
S52.511C	Displaced fracture of right radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.512B	Displaced fracture of left radial styloid process, initial encounter for open fracture type I or II
S52.512C	Displaced fracture of left radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.513B	Displaced fracture of unspecified radial styloid process, initial encounter for open fracture type I or II
S52.513C	Displaced fracture of unspecified radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.514B	Nondisplaced fracture of right radial styloid process, initial encounter for open fracture type I or II
S52.514C	Nondisplaced fracture of right radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.515B	Nondisplaced fracture of left radial styloid process, initial encounter for open fracture type I or II
S52.515C	Nondisplaced fracture of left radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.516B	Nondisplaced fracture of unspecified radial styloid process, initial encounter for open fracture type I or II
S52.516C	Nondisplaced fracture of unspecified radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.531B	Colles' fracture of right radius, initial encounter for open fracture type I or II
S52.531C	Colles' fracture of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.532B	Colles' fracture of left radius, initial encounter for open fracture type I or II
S52.532C	Colles' fracture of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.539B	Colles' fracture of unspecified radius, initial encounter for open fracture type I or II
S52.539C	Colles' fracture of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.541B	Smith's fracture of right radius, initial encounter for open fracture type I or II
S52.541C	Smith's fracture of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.542B	Smith's fracture of left radius, initial encounter for open fracture type I or II
S52.542C	Smith's fracture of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.549B	Smith's fracture of unspecified radius, initial encounter for open fracture type I or II
S52.549C	Smith's fracture of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.551B	Other extraarticular fracture of lower end of right radius, initial encounter for open fracture type I or II
S52.551C	Other extraarticular fracture of lower end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.552B	Other extraarticular fracture of lower end of left radius, initial encounter for open fracture type I or II
S52.552C	Other extraarticular fracture of lower end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.559B	Other extraarticular fracture of lower end of unspecified radius, initial encounter for open fracture type I or II
S52.559C	Other extraarticular fracture of lower end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.561B	Barton's fracture of right radius, initial encounter for open fracture type I or II
S52.561C	Barton's fracture of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.562B	Barton's fracture of left radius, initial encounter for open fracture type I or II
S52.562C	Barton's fracture of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.569B	Barton's fracture of unspecified radius, initial encounter for open fracture type I or II
S52.569C	Barton's fracture of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.571B	Other intraarticular fracture of lower end of right radius, initial encounter for open fracture type I or II
S52.571C	Other intraarticular fracture of lower end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.572B	Other intraarticular fracture of lower end of left radius, initial encounter for open fracture type I or II
S52.572C	Other intraarticular fracture of lower end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.579B	Other intraarticular fracture of lower end of unspecified radius, initial encounter for open fracture type I or II
S52.579C	Other intraarticular fracture of lower end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.591B	Other fractures of lower end of right radius, initial encounter for open fracture type I or II
S52.591C	Other fractures of lower end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.592B	Other fractures of lower end of left radius, initial encounter for open fracture type I or II



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.592C	Other fractures of lower end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.599B	Other fractures of lower end of unspecified radius, initial encounter for open fracture type I or II
S52.599C	Other fractures of lower end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.601B	Unspecified fracture of lower end of right ulna, initial encounter for open fracture type I or II
S52.601C	Unspecified fracture of lower end of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.602B	Unspecified fracture of lower end of left ulna, initial encounter for open fracture type I or II
S52.602C	Unspecified fracture of lower end of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.609B	Unspecified fracture of lower end of unspecified ulna, initial encounter for open fracture type I or II
S52.609C	Unspecified fracture of lower end of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.611B	Displaced fracture of right ulna styloid process, initial encounter for open fracture type I or II
S52.611C	Displaced fracture of right ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.612B	Displaced fracture of left ulna styloid process, initial encounter for open fracture type I or II
S52.612C	Displaced fracture of left ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.613B	Displaced fracture of unspecified ulna styloid process, initial encounter for open fracture type I or II
S52.613C	Displaced fracture of unspecified ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.614B	Nondisplaced fracture of right ulna styloid process, initial encounter for open fracture type I or II
S52.614C	Nondisplaced fracture of right ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.615B	Nondisplaced fracture of left ulna styloid process, initial encounter for open fracture type I or II
S52.615C	Nondisplaced fracture of left ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S52.616B	Nondisplaced fracture of unspecified ulna styloid process, initial encounter for open fracture type I or II
S52.616C	Nondisplaced fracture of unspecified ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.691B	Other fracture of lower end of right ulna, initial encounter for open fracture type I or II
S52.691C	Other fracture of lower end of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.692B	Other fracture of lower end of left ulna, initial encounter for open fracture type I or II
S52.692C	Other fracture of lower end of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.699B	Other fracture of lower end of unspecified ulna, initial encounter for open fracture type I or II
S52.699C	Other fracture of lower end of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.90XA	Unspecified fracture of unspecified forearm, initial encounter for closed fracture
S52.90XB	Unspecified fracture of unspecified forearm, initial encounter for open fracture type I or II
S52.90XC	Unspecified fracture of unspecified forearm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.91XA	Unspecified fracture of right forearm, initial encounter for closed fracture
S52.91XB	Unspecified fracture of right forearm, initial encounter for open fracture type I or II
S52.91XC	Unspecified fracture of right forearm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.92XA	Unspecified fracture of left forearm, initial encounter for closed fracture
S52.92XB	Unspecified fracture of left forearm, initial encounter for open fracture type I or II
S52.92XC	Unspecified fracture of left forearm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S55.001A	Unspecified injury of ulnar artery at forearm level, right arm, initial encounter
S55.002A	Unspecified injury of ulnar artery at forearm level, left arm, initial encounter
S55.009A	Unspecified injury of ulnar artery at forearm level, unspecified arm, initial encounter
S55.011A	Laceration of ulnar artery at forearm level, right arm, initial encounter
S55.012A	Laceration of ulnar artery at forearm level, left arm, initial encounter
S55.019A	Laceration of ulnar artery at forearm level, unspecified arm, initial encounter
S55.091A	Other specified injury of ulnar artery at forearm level, right arm, initial encounter
S55.092A	Other specified injury of ulnar artery at forearm level, left arm, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S55.099A	Other specified injury of ulnar artery at forearm level, unspecified arm, initial encounter
S55.101A	Unspecified injury of radial artery at forearm level, right arm, initial encounter
S55.102A	Unspecified injury of radial artery at forearm level, left arm, initial encounter
S55.109A	Unspecified injury of radial artery at forearm level, unspecified arm, initial encounter
S55.111A	Laceration of radial artery at forearm level, right arm, initial encounter
S55.112A	Laceration of radial artery at forearm level, left arm, initial encounter
S55.119A	Laceration of radial artery at forearm level, unspecified arm, initial encounter
S55.191A	Other specified injury of radial artery at forearm level, right arm, initial encounter
S55.192A	Other specified injury of radial artery at forearm level, left arm, initial encounter
S55.199A	Other specified injury of radial artery at forearm level, unspecified arm, initial encounter
S55.201A	Unspecified injury of vein at forearm level, right arm, initial encounter
S55.202A	Unspecified injury of vein at forearm level, left arm, initial encounter
S55.209A	Unspecified injury of vein at forearm level, unspecified arm, initial encounter
S55.211A	Laceration of vein at forearm level, right arm, initial encounter
S55.212A	Laceration of vein at forearm level, left arm, initial encounter
S55.219A	Laceration of vein at forearm level, unspecified arm, initial encounter
S55.291A	Other specified injury of vein at forearm level, right arm, initial encounter
S55.292A	Other specified injury of vein at forearm level, left arm, initial encounter
S55.299A	Other specified injury of vein at forearm level, unspecified arm, initial encounter
S55.801A	Unspecified injury of other blood vessels at forearm level, right arm, initial encounter
S55.802A	Unspecified injury of other blood vessels at forearm level, left arm, initial encounter
S55.809A	Unspecified injury of other blood vessels at forearm level, unspecified arm, initial encounter
S55.811A	Laceration of other blood vessels at forearm level, right arm, initial encounter
S55.812A	Laceration of other blood vessels at forearm level, left arm, initial encounter
S55.819A	Laceration of other blood vessels at forearm level, unspecified arm, initial encounter
S55.891A	Other specified injury of other blood vessels at forearm level, right arm, initial encounter
S55.892A	Other specified injury of other blood vessels at forearm level, left arm, initial encounter
S55.899A	Other specified injury of other blood vessels at forearm level, unspecified arm, initial encounter
S55.901A	Unspecified injury of unspecified blood vessel at forearm level, right arm, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S55.902A	Unspecified injury of unspecified blood vessel at forearm level, left arm, initial encounter
S55.909A	Unspecified injury of unspecified blood vessel at forearm level, unspecified arm, initial encounter
S55.911A	Laceration of unspecified blood vessel at forearm level, right arm, initial encounter
S55.912A	Laceration of unspecified blood vessel at forearm level, left arm, initial encounter
S55.919A	Laceration of unspecified blood vessel at forearm level, unspecified arm, initial encounter
S55.991A	Other specified injury of unspecified blood vessel at forearm level, right arm, initial encounter
S55.992A	Other specified injury of unspecified blood vessel at forearm level, left arm, initial encounter
S55.999A	Other specified injury of unspecified blood vessel at forearm level, unspecified arm, initial encounter
S57.00XA	Crushing injury of unspecified elbow, initial encounter
S57.01XA	Crushing injury of right elbow, initial encounter
S57.02XA	Crushing injury of left elbow, initial encounter
S57.80XA	Crushing injury of unspecified forearm, initial encounter
S57.81XA	Crushing injury of right forearm, initial encounter
S57.82XA	Crushing injury of left forearm, initial encounter
S60.00XA	Contusion of unspecified finger without damage to nail, initial encounter
S60.011A	Contusion of right thumb without damage to nail, initial encounter
S60.012A	Contusion of left thumb without damage to nail, initial encounter
S60.019A	Contusion of unspecified thumb without damage to nail, initial encounter
S60.021A	Contusion of right index finger without damage to nail, initial encounter
S60.022A	Contusion of left index finger without damage to nail, initial encounter
S60.029A	Contusion of unspecified index finger without damage to nail, initial encounter
S60.031A	Contusion of right middle finger without damage to nail, initial encounter
S60.032A	Contusion of left middle finger without damage to nail, initial encounter
S60.039A	Contusion of unspecified middle finger without damage to nail, initial encounter
S60.041A	Contusion of right ring finger without damage to nail, initial encounter
S60.042A	Contusion of left ring finger without damage to nail, initial encounter
S60.049A	Contusion of unspecified ring finger without damage to nail, initial encounter
S60.051A	Contusion of right little finger without damage to nail, initial encounter

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***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
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Code	Description
S60.052A	Contusion of left little finger without damage to nail, initial encounter
S60.059A	Contusion of unspecified little finger without damage to nail, initial encounter
S60.10XA	Contusion of unspecified finger with damage to nail, initial encounter
S60.111A	Contusion of right thumb with damage to nail, initial encounter
S60.112A	Contusion of left thumb with damage to nail, initial encounter
S60.119A	Contusion of unspecified thumb with damage to nail, initial encounter
S60.121A	Contusion of right index finger with damage to nail, initial encounter
S60.122A	Contusion of left index finger with damage to nail, initial encounter
S60.129A	Contusion of unspecified index finger with damage to nail, initial encounter
S60.131A	Contusion of right middle finger with damage to nail, initial encounter
S60.132A	Contusion of left middle finger with damage to nail, initial encounter
S60.139A	Contusion of unspecified middle finger with damage to nail, initial encounter
S60.141A	Contusion of right ring finger with damage to nail, initial encounter
S60.142A	Contusion of left ring finger with damage to nail, initial encounter
S60.149A	Contusion of unspecified ring finger with damage to nail, initial encounter
S60.151A	Contusion of right little finger with damage to nail, initial encounter
S60.152A	Contusion of left little finger with damage to nail, initial encounter
S60.159A	Contusion of unspecified little finger with damage to nail, initial encounter
S60.211A	Contusion of right wrist, initial encounter
S60.212A	Contusion of left wrist, initial encounter
S60.219A	Contusion of unspecified wrist, initial encounter
S60.221A	Contusion of right hand, initial encounter
S60.222A	Contusion of left hand, initial encounter
S60.229A	Contusion of unspecified hand, initial encounter
S65.001A	Unspecified injury of ulnar artery at wrist and hand level of right arm, initial encounter
S65.002A	Unspecified injury of ulnar artery at wrist and hand level of left arm, initial encounter
S65.009A	Unspecified injury of ulnar artery at wrist and hand level of unspecified arm, initial encounter
S65.011A	Laceration of ulnar artery at wrist and hand level of right arm, initial encounter
S65.012A	Laceration of ulnar artery at wrist and hand level of left arm, initial encounter
S65.019A	Laceration of ulnar artery at wrist and hand level of unspecified arm, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S65.091A	Other specified injury of ulnar artery at wrist and hand level of right arm, initial encounter
S65.092A	Other specified injury of ulnar artery at wrist and hand level of left arm, initial encounter
S65.099A	Other specified injury of ulnar artery at wrist and hand level of unspecified arm, initial encounter
S65.101A	Unspecified injury of radial artery at wrist and hand level of right arm, initial encounter
S65.102A	Unspecified injury of radial artery at wrist and hand level of left arm, initial encounter
S65.109A	Unspecified injury of radial artery at wrist and hand level of unspecified arm, initial encounter
S65.111A	Laceration of radial artery at wrist and hand level of right arm, initial encounter
S65.112A	Laceration of radial artery at wrist and hand level of left arm, initial encounter
S65.119A	Laceration of radial artery at wrist and hand level of unspecified arm, initial encounter
S65.191A	Other specified injury of radial artery at wrist and hand level of right arm, initial encounter
S65.192A	Other specified injury of radial artery at wrist and hand level of left arm, initial encounter
S65.199A	Other specified injury of radial artery at wrist and hand level of unspecified arm, initial encounter
S65.201A	Unspecified injury of superficial palmar arch of right hand, initial encounter
S65.202A	Unspecified injury of superficial palmar arch of left hand, initial encounter
S65.209A	Unspecified injury of superficial palmar arch of unspecified hand, initial encounter
S65.211A	Laceration of superficial palmar arch of right hand, initial encounter
S65.212A	Laceration of superficial palmar arch of left hand, initial encounter
S65.219A	Laceration of superficial palmar arch of unspecified hand, initial encounter
S65.291A	Other specified injury of superficial palmar arch of right hand, initial encounter
S65.292A	Other specified injury of superficial palmar arch of left hand, initial encounter
S65.299A	Other specified injury of superficial palmar arch of unspecified hand, initial encounter
S65.301A	Unspecified injury of deep palmar arch of right hand, initial encounter
S65.302A	Unspecified injury of deep palmar arch of left hand, initial encounter
S65.309A	Unspecified injury of deep palmar arch of unspecified hand, initial encounter
S65.311A	Laceration of deep palmar arch of right hand, initial encounter
S65.312A	Laceration of deep palmar arch of left hand, initial encounter
S65.319A	Laceration of deep palmar arch of unspecified hand, initial encounter
S65.391A	Other specified injury of deep palmar arch of right hand, initial encounter



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S65.392A	Other specified injury of deep palmar arch of left hand, initial encounter
S65.399A	Other specified injury of deep palmar arch of unspecified hand, initial encounter
S65.401A	Unspecified injury of blood vessel of right thumb, initial encounter
S65.402A	Unspecified injury of blood vessel of left thumb, initial encounter
S65.409A	Unspecified injury of blood vessel of unspecified thumb, initial encounter
S65.411A	Laceration of blood vessel of right thumb, initial encounter
S65.412A	Laceration of blood vessel of left thumb, initial encounter
S65.419A	Laceration of blood vessel of unspecified thumb, initial encounter
S65.491A	Other specified injury of blood vessel of right thumb, initial encounter
S65.492A	Other specified injury of blood vessel of left thumb, initial encounter
S65.499A	Other specified injury of blood vessel of unspecified thumb, initial encounter
S65.500A	Unspecified injury of blood vessel of right index finger, initial encounter
S65.501A	Unspecified injury of blood vessel of left index finger, initial encounter
S65.502A	Unspecified injury of blood vessel of right middle finger, initial encounter
S65.503A	Unspecified injury of blood vessel of left middle finger, initial encounter
S65.504A	Unspecified injury of blood vessel of right ring finger, initial encounter
S65.505A	Unspecified injury of blood vessel of left ring finger, initial encounter
S65.506A	Unspecified injury of blood vessel of right little finger, initial encounter
S65.507A	Unspecified injury of blood vessel of left little finger, initial encounter
S65.508A	Unspecified injury of blood vessel of other finger, initial encounter
S65.509A	Unspecified injury of blood vessel of unspecified finger, initial encounter
S65.510A	Laceration of blood vessel of right index finger, initial encounter
S65.511A	Laceration of blood vessel of left index finger, initial encounter
S65.512A	Laceration of blood vessel of right middle finger, initial encounter
S65.513A	Laceration of blood vessel of left middle finger, initial encounter
S65.514A	Laceration of blood vessel of right ring finger, initial encounter
S65.515A	Laceration of blood vessel of left ring finger, initial encounter
S65.516A	Laceration of blood vessel of right little finger, initial encounter
S65.517A	Laceration of blood vessel of left little finger, initial encounter
S65.518A	Laceration of blood vessel of other finger, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S65.519A	Laceration of blood vessel of unspecified finger, initial encounter
S65.590A	Other specified injury of blood vessel of right index finger, initial encounter
S65.591A	Other specified injury of blood vessel of left index finger, initial encounter
S65.592A	Other specified injury of blood vessel of right middle finger, initial encounter
S65.593A	Other specified injury of blood vessel of left middle finger, initial encounter
S65.594A	Other specified injury of blood vessel of right ring finger, initial encounter
S65.595A	Other specified injury of blood vessel of left ring finger, initial encounter
S65.596A	Other specified injury of blood vessel of right little finger, initial encounter
S65.597A	Other specified injury of blood vessel of left little finger, initial encounter
S65.598A	Other specified injury of blood vessel of other finger, initial encounter
S65.599A	Other specified injury of blood vessel of unspecified finger, initial encounter
S65.801A	Unspecified injury of other blood vessels at wrist and hand level of right arm, initial encounter
S65.802A	Unspecified injury of other blood vessels at wrist and hand level of left arm, initial encounter
S65.809A	Unspecified injury of other blood vessels at wrist and hand level of unspecified arm, initial encounter
S65.811A	Laceration of other blood vessels at wrist and hand level of right arm, initial encounter
S65.812A	Laceration of other blood vessels at wrist and hand level of left arm, initial encounter
S65.819A	Laceration of other blood vessels at wrist and hand level of unspecified arm, initial encounter
S65.891A	Other specified injury of other blood vessels at wrist and hand level of right arm, initial encounter
S65.892A	Other specified injury of other blood vessels at wrist and hand level of left arm, initial encounter
S65.899A	Other specified injury of other blood vessels at wrist and hand level of unspecified arm, initial encounter
S65.901A	Unspecified injury of unspecified blood vessel at wrist and hand level of right arm, initial encounter
S65.902A	Unspecified injury of unspecified blood vessel at wrist and hand level of left arm, initial encounter
S65.909A	Unspecified injury of unspecified blood vessel at wrist and hand level of unspecified arm, initial encounter
S65.911A	Laceration of unspecified blood vessel at wrist and hand level of right arm, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S65.912A	Laceration of unspecified blood vessel at wrist and hand level of left arm, initial encounter
S65.919A	Laceration of unspecified blood vessel at wrist and hand level of unspecified arm, initial encounter
S65.991A	Other specified injury of unspecified blood vessel at wrist and hand of right arm, initial encounter
S65.992A	Other specified injury of unspecified blood vessel at wrist and hand of left arm, initial encounter
S65.999A	Other specified injury of unspecified blood vessel at wrist and hand of unspecified arm, initial encounter
S67.00XA	Crushing injury of unspecified thumb, initial encounter
S67.01XA	Crushing injury of right thumb, initial encounter
S67.02XA	Crushing injury of left thumb, initial encounter
S67.10XA	Crushing injury of unspecified finger(s), initial encounter
S67.190A	Crushing injury of right index finger, initial encounter
S67.191A	Crushing injury of left index finger, initial encounter
S67.192A	Crushing injury of right middle finger, initial encounter
S67.193A	Crushing injury of left middle finger, initial encounter
S67.194A	Crushing injury of right ring finger, initial encounter
S67.195A	Crushing injury of left ring finger, initial encounter
S67.196A	Crushing injury of right little finger, initial encounter
S67.197A	Crushing injury of left little finger, initial encounter
S67.198A	Crushing injury of other finger, initial encounter
S67.20XA	Crushing injury of unspecified hand, initial encounter
S67.21XA	Crushing injury of right hand, initial encounter
S67.22XA	Crushing injury of left hand, initial encounter
S67.30XA	Crushing injury of unspecified wrist, initial encounter
S67.31XA	Crushing injury of right wrist, initial encounter
S67.32XA	Crushing injury of left wrist, initial encounter
S67.40XA	Crushing injury of unspecified wrist and hand, initial encounter
S67.41XA	Crushing injury of right wrist and hand, initial encounter
S67.42XA	Crushing injury of left wrist and hand, initial encounter



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Code	Description
S67.90XA	Crushing injury of unspecified part(s) of unspecified wrist, hand and fingers, initial encounter
S67.91XA	Crushing injury of unspecified part(s) of right wrist, hand and fingers, initial encounter
S67.92XA	Crushing injury of unspecified part(s) of left wrist, hand and fingers, initial encounter
S70.00XA	Contusion of unspecified hip, initial encounter
S70.01XA	Contusion of right hip, initial encounter
S70.02XA	Contusion of left hip, initial encounter
S70.10XA	Contusion of unspecified thigh, initial encounter
S70.11XA	Contusion of right thigh, initial encounter
S70.12XA	Contusion of left thigh, initial encounter
S72.001A	Fracture of unspecified part of neck of right femur, initial encounter for closed fracture
S72.001B	Fracture of unspecified part of neck of right femur, initial encounter for open fracture type I or II
S72.001C	Fracture of unspecified part of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.002A	Fracture of unspecified part of neck of left femur, initial encounter for closed fracture
S72.002B	Fracture of unspecified part of neck of left femur, initial encounter for open fracture type I or II
S72.002C	Fracture of unspecified part of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.009A	Fracture of unspecified part of neck of unspecified femur, initial encounter for closed fracture
S72.009B	Fracture of unspecified part of neck of unspecified femur, initial encounter for open fracture type I or II
S72.009C	Fracture of unspecified part of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.011A	Unspecified intracapsular fracture of right femur, initial encounter for closed fracture
S72.011B	Unspecified intracapsular fracture of right femur, initial encounter for open fracture type I or II
S72.011C	Unspecified intracapsular fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.012A	Unspecified intracapsular fracture of left femur, initial encounter for closed fracture
S72.012B	Unspecified intracapsular fracture of left femur, initial encounter for open fracture type I or II



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.012C	Unspecified intracapsular fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.019A	Unspecified intracapsular fracture of unspecified femur, initial encounter for closed fracture
S72.019B	Unspecified intracapsular fracture of unspecified femur, initial encounter for open fracture type I or II
S72.019C	Unspecified intracapsular fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.021A	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for closed fracture
S72.021B	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type I or II
S72.021C	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.022A	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for closed fracture
S72.022B	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type I or II
S72.022C	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.023A	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for closed fracture
S72.023B	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type I or II
S72.023C	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.024A	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for closed fracture
S72.024B	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type I or II
S72.024C	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.025A	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for closed fracture
S72.025B	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type I or II



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Code	Description
S72.025C	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.026A	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for closed fracture
S72.026B	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type I or II
S72.026C	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.031A	Displaced midcervical fracture of right femur, initial encounter for closed fracture
S72.031B	Displaced midcervical fracture of right femur, initial encounter for open fracture type I or II
S72.031C	Displaced midcervical fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.032A	Displaced midcervical fracture of left femur, initial encounter for closed fracture
S72.032B	Displaced midcervical fracture of left femur, initial encounter for open fracture type I or II
S72.032C	Displaced midcervical fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.033A	Displaced midcervical fracture of unspecified femur, initial encounter for closed fracture
S72.033B	Displaced midcervical fracture of unspecified femur, initial encounter for open fracture type I or II
S72.033C	Displaced midcervical fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.034A	Nondisplaced midcervical fracture of right femur, initial encounter for closed fracture
S72.034B	Nondisplaced midcervical fracture of right femur, initial encounter for open fracture type I or II
S72.034C	Nondisplaced midcervical fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.035A	Nondisplaced midcervical fracture of left femur, initial encounter for closed fracture
S72.035B	Nondisplaced midcervical fracture of left femur, initial encounter for open fracture type I or II
S72.035C	Nondisplaced midcervical fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.036A	Nondisplaced midcervical fracture of unspecified femur, initial encounter for closed fracture
S72.036B	Nondisplaced midcervical fracture of unspecified femur, initial encounter for open fracture type I or II



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Code	Description
S72.036C	Nondisplaced midcervical fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.041A	Displaced fracture of base of neck of right femur, initial encounter for closed fracture
S72.041B	Displaced fracture of base of neck of right femur, initial encounter for open fracture type I or II
S72.041C	Displaced fracture of base of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.042A	Displaced fracture of base of neck of left femur, initial encounter for closed fracture
S72.042B	Displaced fracture of base of neck of left femur, initial encounter for open fracture type I or II
S72.042C	Displaced fracture of base of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.043A	Displaced fracture of base of neck of unspecified femur, initial encounter for closed fracture
S72.043B	Displaced fracture of base of neck of unspecified femur, initial encounter for open fracture type I or II
S72.043C	Displaced fracture of base of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.044A	Nondisplaced fracture of base of neck of right femur, initial encounter for closed fracture
S72.044B	Nondisplaced fracture of base of neck of right femur, initial encounter for open fracture type I or II
S72.044C	Nondisplaced fracture of base of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.045A	Nondisplaced fracture of base of neck of left femur, initial encounter for closed fracture
S72.045B	Nondisplaced fracture of base of neck of left femur, initial encounter for open fracture type I or II
S72.045C	Nondisplaced fracture of base of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.046A	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for closed fracture
S72.046B	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for open fracture type I or II
S72.046C	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.051A	Unspecified fracture of head of right femur, initial encounter for closed fracture



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Code	Description
S72.051B	Unspecified fracture of head of right femur, initial encounter for open fracture type I or II
S72.051C	Unspecified fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.052A	Unspecified fracture of head of left femur, initial encounter for closed fracture
S72.052B	Unspecified fracture of head of left femur, initial encounter for open fracture type I or II
S72.052C	Unspecified fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.059A	Unspecified fracture of head of unspecified femur, initial encounter for closed fracture
S72.059B	Unspecified fracture of head of unspecified femur, initial encounter for open fracture type I or II
S72.059C	Unspecified fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.061A	Displaced articular fracture of head of right femur, initial encounter for closed fracture
S72.061B	Displaced articular fracture of head of right femur, initial encounter for open fracture type I or II
S72.061C	Displaced articular fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.062A	Displaced articular fracture of head of left femur, initial encounter for closed fracture
S72.062B	Displaced articular fracture of head of left femur, initial encounter for open fracture type I or II
S72.062C	Displaced articular fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.063A	Displaced articular fracture of head of unspecified femur, initial encounter for closed fracture
S72.063B	Displaced articular fracture of head of unspecified femur, initial encounter for open fracture type I or II
S72.063C	Displaced articular fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.064A	Nondisplaced articular fracture of head of right femur, initial encounter for closed fracture
S72.064B	Nondisplaced articular fracture of head of right femur, initial encounter for open fracture type I or II
S72.064C	Nondisplaced articular fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.065A	Nondisplaced articular fracture of head of left femur, initial encounter for closed fracture



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Code	Description
S72.065B	Nondisplaced articular fracture of head of left femur, initial encounter for open fracture type I or II
S72.065C	Nondisplaced articular fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.066A	Nondisplaced articular fracture of head of unspecified femur, initial encounter for closed fracture
S72.066B	Nondisplaced articular fracture of head of unspecified femur, initial encounter for open fracture type I or II
S72.066C	Nondisplaced articular fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.091A	Other fracture of head and neck of right femur, initial encounter for closed fracture
S72.091B	Other fracture of head and neck of right femur, initial encounter for open fracture type I or II
S72.091C	Other fracture of head and neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.092A	Other fracture of head and neck of left femur, initial encounter for closed fracture
S72.092B	Other fracture of head and neck of left femur, initial encounter for open fracture type I or II
S72.092C	Other fracture of head and neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.099A	Other fracture of head and neck of unspecified femur, initial encounter for closed fracture
S72.099B	Other fracture of head and neck of unspecified femur, initial encounter for open fracture type I or II
S72.099C	Other fracture of head and neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.101A	Unspecified trochanteric fracture of right femur, initial encounter for closed fracture
S72.101B	Unspecified trochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.101C	Unspecified trochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.102A	Unspecified trochanteric fracture of left femur, initial encounter for closed fracture
S72.102B	Unspecified trochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.102C	Unspecified trochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.109A	Unspecified trochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.109B	Unspecified trochanteric fracture of unspecified femur, initial encounter for open fracture type I or II

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Code	Description
S72.109C	Unspecified trochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.111A	Displaced fracture of greater trochanter of right femur, initial encounter for closed fracture
S72.111B	Displaced fracture of greater trochanter of right femur, initial encounter for open fracture type I or II
S72.111C	Displaced fracture of greater trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.112A	Displaced fracture of greater trochanter of left femur, initial encounter for closed fracture
S72.112B	Displaced fracture of greater trochanter of left femur, initial encounter for open fracture type I or II
S72.112C	Displaced fracture of greater trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.113A	Displaced fracture of greater trochanter of unspecified femur, initial encounter for closed fracture
S72.113B	Displaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type I or II
S72.113C	Displaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.114A	Nondisplaced fracture of greater trochanter of right femur, initial encounter for closed fracture
S72.114B	Nondisplaced fracture of greater trochanter of right femur, initial encounter for open fracture type I or II
S72.114C	Nondisplaced fracture of greater trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.115A	Nondisplaced fracture of greater trochanter of left femur, initial encounter for closed fracture
S72.115B	Nondisplaced fracture of greater trochanter of left femur, initial encounter for open fracture type I or II
S72.115C	Nondisplaced fracture of greater trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.116A	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for closed fracture
S72.116B	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type I or II
S72.116C	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.121A	Displaced fracture of lesser trochanter of right femur, initial encounter for closed fracture
S72.121B	Displaced fracture of lesser trochanter of right femur, initial encounter for open fracture type I or II
S72.121C	Displaced fracture of lesser trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.122A	Displaced fracture of lesser trochanter of left femur, initial encounter for closed fracture
S72.122B	Displaced fracture of lesser trochanter of left femur, initial encounter for open fracture type I or II
S72.122C	Displaced fracture of lesser trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.123A	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for closed fracture
S72.123B	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type I or II
S72.123C	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.124A	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for closed fracture
S72.124B	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for open fracture type I or II
S72.124C	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.125A	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for closed fracture
S72.125B	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for open fracture type I or II
S72.125C	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.126A	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for closed fracture
S72.126B	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type I or II
S72.126C	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.131A	Displaced apophyseal fracture of right femur, initial encounter for closed fracture
S72.131B	Displaced apophyseal fracture of right femur, initial encounter for open fracture type I or II



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Code	Description
S72.131C	Displaced apophyseal fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.132A	Displaced apophyseal fracture of left femur, initial encounter for closed fracture
S72.132B	Displaced apophyseal fracture of left femur, initial encounter for open fracture type I or II
S72.132C	Displaced apophyseal fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.133A	Displaced apophyseal fracture of unspecified femur, initial encounter for closed fracture
S72.133B	Displaced apophyseal fracture of unspecified femur, initial encounter for open fracture type I or II
S72.133C	Displaced apophyseal fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.134A	Nondisplaced apophyseal fracture of right femur, initial encounter for closed fracture
S72.134B	Nondisplaced apophyseal fracture of right femur, initial encounter for open fracture type I or II
S72.134C	Nondisplaced apophyseal fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.135A	Nondisplaced apophyseal fracture of left femur, initial encounter for closed fracture
S72.135B	Nondisplaced apophyseal fracture of left femur, initial encounter for open fracture type I or II
S72.135C	Nondisplaced apophyseal fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.136A	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for closed fracture
S72.136B	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for open fracture type I or II
S72.136C	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.141A	Displaced intertrochanteric fracture of right femur, initial encounter for closed fracture
S72.141B	Displaced intertrochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.141C	Displaced intertrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.142A	Displaced intertrochanteric fracture of left femur, initial encounter for closed fracture
S72.142B	Displaced intertrochanteric fracture of left femur, initial encounter for open fracture type I or II

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Code	Description
S72.142C	Displaced intertrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.143A	Displaced intertrochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.143B	Displaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II
S72.143C	Displaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.144A	Nondisplaced intertrochanteric fracture of right femur, initial encounter for closed fracture
S72.144B	Nondisplaced intertrochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.144C	Nondisplaced intertrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.145A	Nondisplaced intertrochanteric fracture of left femur, initial encounter for closed fracture
S72.145B	Nondisplaced intertrochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.145C	Nondisplaced intertrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.146A	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.146B	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II
S72.146C	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.21XA	Displaced subtrochanteric fracture of right femur, initial encounter for closed fracture
S72.21XB	Displaced subtrochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.21XC	Displaced subtrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.22XA	Displaced subtrochanteric fracture of left femur, initial encounter for closed fracture
S72.22XB	Displaced subtrochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.22XC	Displaced subtrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.23XA	Displaced subtrochanteric fracture of unspecified femur, initial encounter for closed fracture

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Code	Description
S72.23XB	Displaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II
S72.23XC	Displaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.24XA	Nondisplaced subtrochanteric fracture of right femur, initial encounter for closed fracture
S72.24XB	Nondisplaced subtrochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.24XC	Nondisplaced subtrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.25XA	Nondisplaced subtrochanteric fracture of left femur, initial encounter for closed fracture
S72.25XB	Nondisplaced subtrochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.25XC	Nondisplaced subtrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.26XA	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.26XB	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II
S72.26XC	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.301A	Unspecified fracture of shaft of right femur, initial encounter for closed fracture
S72.301B	Unspecified fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.301C	Unspecified fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.302A	Unspecified fracture of shaft of left femur, initial encounter for closed fracture
S72.302B	Unspecified fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.302C	Unspecified fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.309A	Unspecified fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.309B	Unspecified fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.309C	Unspecified fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.321A	Displaced transverse fracture of shaft of right femur, initial encounter for closed fracture



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Code	Description
S72.321B	Displaced transverse fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.321C	Displaced transverse fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.322A	Displaced transverse fracture of shaft of left femur, initial encounter for closed fracture
S72.322B	Displaced transverse fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.322C	Displaced transverse fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.323A	Displaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.323B	Displaced transverse fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.323C	Displaced transverse fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.324A	Nondisplaced transverse fracture of shaft of right femur, initial encounter for closed fracture
S72.324B	Nondisplaced transverse fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.324C	Nondisplaced transverse fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.325A	Nondisplaced transverse fracture of shaft of left femur, initial encounter for closed fracture
S72.325B	Nondisplaced transverse fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.325C	Nondisplaced transverse fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.326A	Nondisplaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.326B	Nondisplaced transverse fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.326C	Nondisplaced transverse fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.331A	Displaced oblique fracture of shaft of right femur, initial encounter for closed fracture
S72.331B	Displaced oblique fracture of shaft of right femur, initial encounter for open fracture type I or II



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Code	Description
S72.331C	Displaced oblique fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.332A	Displaced oblique fracture of shaft of left femur, initial encounter for closed fracture
S72.332B	Displaced oblique fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.332C	Displaced oblique fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.333A	Displaced oblique fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.333B	Displaced oblique fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.333C	Displaced oblique fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.334A	Nondisplaced oblique fracture of shaft of right femur, initial encounter for closed fracture
S72.334B	Nondisplaced oblique fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.334C	Nondisplaced oblique fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.335A	Nondisplaced oblique fracture of shaft of left femur, initial encounter for closed fracture
S72.335B	Nondisplaced oblique fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.335C	Nondisplaced oblique fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.336A	Nondisplaced oblique fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.336B	Nondisplaced oblique fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.336C	Nondisplaced oblique fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.341A	Displaced spiral fracture of shaft of right femur, initial encounter for closed fracture
S72.341B	Displaced spiral fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.341C	Displaced spiral fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.342A	Displaced spiral fracture of shaft of left femur, initial encounter for closed fracture



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Code	Description
S72.342B	Displaced spiral fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.342C	Displaced spiral fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.343A	Displaced spiral fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.343B	Displaced spiral fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.343C	Displaced spiral fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.344A	Nondisplaced spiral fracture of shaft of right femur, initial encounter for closed fracture
S72.344B	Nondisplaced spiral fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.344C	Nondisplaced spiral fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.345A	Nondisplaced spiral fracture of shaft of left femur, initial encounter for closed fracture
S72.345B	Nondisplaced spiral fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.345C	Nondisplaced spiral fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.346A	Nondisplaced spiral fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.346B	Nondisplaced spiral fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.346C	Nondisplaced spiral fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.351A	Displaced comminuted fracture of shaft of right femur, initial encounter for closed fracture
S72.351B	Displaced comminuted fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.351C	Displaced comminuted fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.352A	Displaced comminuted fracture of shaft of left femur, initial encounter for closed fracture
S72.352B	Displaced comminuted fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.352C	Displaced comminuted fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.353A	Displaced comminuted fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.353B	Displaced comminuted fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.353C	Displaced comminuted fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.354A	Nondisplaced comminuted fracture of shaft of right femur, initial encounter for closed fracture
S72.354B	Nondisplaced comminuted fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.354C	Nondisplaced comminuted fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.355A	Nondisplaced comminuted fracture of shaft of left femur, initial encounter for closed fracture
S72.355B	Nondisplaced comminuted fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.355C	Nondisplaced comminuted fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.356A	Nondisplaced comminuted fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.356B	Nondisplaced comminuted fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.356C	Nondisplaced comminuted fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.361A	Displaced segmental fracture of shaft of right femur, initial encounter for closed fracture
S72.361B	Displaced segmental fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.361C	Displaced segmental fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.362A	Displaced segmental fracture of shaft of left femur, initial encounter for closed fracture
S72.362B	Displaced segmental fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.362C	Displaced segmental fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.363A	Displaced segmental fracture of shaft of unspecified femur, initial encounter for closed fracture



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Code	Description
S72.363B	Displaced segmental fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.363C	Displaced segmental fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.364A	Nondisplaced segmental fracture of shaft of right femur, initial encounter for closed fracture
S72.364B	Nondisplaced segmental fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.364C	Nondisplaced segmental fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.365A	Nondisplaced segmental fracture of shaft of left femur, initial encounter for closed fracture
S72.365B	Nondisplaced segmental fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.365C	Nondisplaced segmental fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.366A	Nondisplaced segmental fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.366B	Nondisplaced segmental fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.366C	Nondisplaced segmental fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.391A	Other fracture of shaft of right femur, initial encounter for closed fracture
S72.391B	Other fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.391C	Other fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.392A	Other fracture of shaft of left femur, initial encounter for closed fracture
S72.392B	Other fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.392C	Other fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.399A	Other fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.399B	Other fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.399C	Other fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.401A	Unspecified fracture of lower end of right femur, initial encounter for closed fracture
S72.401B	Unspecified fracture of lower end of right femur, initial encounter for open fracture type I or II



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Code	Description
S72.401C	Unspecified fracture of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.402A	Unspecified fracture of lower end of left femur, initial encounter for closed fracture
S72.402B	Unspecified fracture of lower end of left femur, initial encounter for open fracture type I or II
S72.402C	Unspecified fracture of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.409A	Unspecified fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.409B	Unspecified fracture of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.409C	Unspecified fracture of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.411A	Displaced unspecified condyle fracture of lower end of right femur, initial encounter for closed fracture
S72.411B	Displaced unspecified condyle fracture of lower end of right femur, initial encounter for open fracture type I or II
S72.411C	Displaced unspecified condyle fracture of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.412A	Displaced unspecified condyle fracture of lower end of left femur, initial encounter for closed fracture
S72.412B	Displaced unspecified condyle fracture of lower end of left femur, initial encounter for open fracture type I or II
S72.412C	Displaced unspecified condyle fracture of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.413A	Displaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.413B	Displaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.413C	Displaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.414A	Nondisplaced unspecified condyle fracture of lower end of right femur, initial encounter for closed fracture
S72.414B	Nondisplaced unspecified condyle fracture of lower end of right femur, initial encounter for open fracture type I or II
S72.414C	Nondisplaced unspecified condyle fracture of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.415A	Nondisplaced unspecified condyle fracture of lower end of left femur, initial encounter for closed fracture
S72.415B	Nondisplaced unspecified condyle fracture of lower end of left femur, initial encounter for open fracture type I or II
S72.415C	Nondisplaced unspecified condyle fracture of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.416A	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.416B	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.416C	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.421A	Displaced fracture of lateral condyle of right femur, initial encounter for closed fracture
S72.421B	Displaced fracture of lateral condyle of right femur, initial encounter for open fracture type I or II
S72.421C	Displaced fracture of lateral condyle of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.422A	Displaced fracture of lateral condyle of left femur, initial encounter for closed fracture
S72.422B	Displaced fracture of lateral condyle of left femur, initial encounter for open fracture type I or II
S72.422C	Displaced fracture of lateral condyle of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.423A	Displaced fracture of lateral condyle of unspecified femur, initial encounter for closed fracture
S72.423B	Displaced fracture of lateral condyle of unspecified femur, initial encounter for open fracture type I or II
S72.423C	Displaced fracture of lateral condyle of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.424A	Nondisplaced fracture of lateral condyle of right femur, initial encounter for closed fracture
S72.424B	Nondisplaced fracture of lateral condyle of right femur, initial encounter for open fracture type I or II
S72.424C	Nondisplaced fracture of lateral condyle of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.425A	Nondisplaced fracture of lateral condyle of left femur, initial encounter for closed fracture
S72.425B	Nondisplaced fracture of lateral condyle of left femur, initial encounter for open fracture type I or II



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Code	Description
S72.425C	Nondisplaced fracture of lateral condyle of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.426A	Nondisplaced fracture of lateral condyle of unspecified femur, initial encounter for closed fracture
S72.426B	Nondisplaced fracture of lateral condyle of unspecified femur, initial encounter for open fracture type I or II
S72.426C	Nondisplaced fracture of lateral condyle of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.431A	Displaced fracture of medial condyle of right femur, initial encounter for closed fracture
S72.431B	Displaced fracture of medial condyle of right femur, initial encounter for open fracture type I or II
S72.431C	Displaced fracture of medial condyle of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.432A	Displaced fracture of medial condyle of left femur, initial encounter for closed fracture
S72.432B	Displaced fracture of medial condyle of left femur, initial encounter for open fracture type I or II
S72.432C	Displaced fracture of medial condyle of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.433A	Displaced fracture of medial condyle of unspecified femur, initial encounter for closed fracture
S72.433B	Displaced fracture of medial condyle of unspecified femur, initial encounter for open fracture type I or II
S72.433C	Displaced fracture of medial condyle of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.434A	Nondisplaced fracture of medial condyle of right femur, initial encounter for closed fracture
S72.434B	Nondisplaced fracture of medial condyle of right femur, initial encounter for open fracture type I or II
S72.434C	Nondisplaced fracture of medial condyle of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.435A	Nondisplaced fracture of medial condyle of left femur, initial encounter for closed fracture
S72.435B	Nondisplaced fracture of medial condyle of left femur, initial encounter for open fracture type I or II
S72.435C	Nondisplaced fracture of medial condyle of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.436A	Nondisplaced fracture of medial condyle of unspecified femur, initial encounter for closed fracture

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Code	Description
S72.436B	Nondisplaced fracture of medial condyle of unspecified femur, initial encounter for open fracture type I or II
S72.436C	Nondisplaced fracture of medial condyle of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.441A	Displaced fracture of lower epiphysis (separation) of right femur, initial encounter for closed fracture
S72.441B	Displaced fracture of lower epiphysis (separation) of right femur, initial encounter for open fracture type I or II
S72.441C	Displaced fracture of lower epiphysis (separation) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.442A	Displaced fracture of lower epiphysis (separation) of left femur, initial encounter for closed fracture
S72.442B	Displaced fracture of lower epiphysis (separation) of left femur, initial encounter for open fracture type I or II
S72.442C	Displaced fracture of lower epiphysis (separation) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.443A	Displaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for closed fracture
S72.443B	Displaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for open fracture type I or II
S72.443C	Displaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.444A	Nondisplaced fracture of lower epiphysis (separation) of right femur, initial encounter for closed fracture
S72.444B	Nondisplaced fracture of lower epiphysis (separation) of right femur, initial encounter for open fracture type I or II
S72.444C	Nondisplaced fracture of lower epiphysis (separation) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.445A	Nondisplaced fracture of lower epiphysis (separation) of left femur, initial encounter for closed fracture
S72.445B	Nondisplaced fracture of lower epiphysis (separation) of left femur, initial encounter for open fracture type I or II
S72.445C	Nondisplaced fracture of lower epiphysis (separation) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.446A	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for closed fracture



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Code	Description
S72.446B	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for open fracture type I or II
S72.446C	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.451A	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for closed fracture
S72.451B	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for open fracture type I or II
S72.451C	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.452A	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for closed fracture
S72.452B	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for open fracture type I or II
S72.452C	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.453A	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for closed fracture
S72.453B	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.453C	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.454A	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for closed fracture
S72.454B	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for open fracture type I or II
S72.454C	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.455A	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for closed fracture
S72.455B	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for open fracture type I or II
S72.455C	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.456A	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for closed fracture



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Code	Description
S72.456B	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.456C	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.461A	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for closed fracture
S72.461B	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for open fracture type I or II
S72.461C	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.462A	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for closed fracture
S72.462B	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for open fracture type I or II
S72.462C	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.463A	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for closed fracture
S72.463B	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.463C	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.464A	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for closed fracture
S72.464B	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for open fracture type I or II
S72.464C	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.465A	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for closed fracture
S72.465B	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for open fracture type I or II
S72.465C	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.466A	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for closed fracture



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Code	Description
S72.466B	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.466C	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.471A	Torus fracture of lower end of right femur, initial encounter for closed fracture
S72.472A	Torus fracture of lower end of left femur, initial encounter for closed fracture
S72.479A	Torus fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.491A	Other fracture of lower end of right femur, initial encounter for closed fracture
S72.491B	Other fracture of lower end of right femur, initial encounter for open fracture type I or II
S72.491C	Other fracture of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.492A	Other fracture of lower end of left femur, initial encounter for closed fracture
S72.492B	Other fracture of lower end of left femur, initial encounter for open fracture type I or II
S72.492C	Other fracture of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.499A	Other fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.499B	Other fracture of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.499C	Other fracture of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.8X1A	Other fracture of right femur, initial encounter for closed fracture
S72.8X1B	Other fracture of right femur, initial encounter for open fracture type I or II
S72.8X1C	Other fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.8X2A	Other fracture of left femur, initial encounter for closed fracture
S72.8X2B	Other fracture of left femur, initial encounter for open fracture type I or II
S72.8X2C	Other fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.8X9A	Other fracture of unspecified femur, initial encounter for closed fracture
S72.8X9B	Other fracture of unspecified femur, initial encounter for open fracture type I or II
S72.8X9C	Other fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.90XA	Unspecified fracture of unspecified femur, initial encounter for closed fracture
S72.90XB	Unspecified fracture of unspecified femur, initial encounter for open fracture type I or II
S72.90XC	Unspecified fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
*S72.90XE	*Unspecified fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.91XA	Unspecified fracture of right femur, initial encounter for closed fracture
S72.91XB	Unspecified fracture of right femur, initial encounter for open fracture type I or II
S72.91XC	Unspecified fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
*S72.91XE	*Unspecified fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.92XA	Unspecified fracture of left femur, initial encounter for closed fracture
S72.92XB	Unspecified fracture of left femur, initial encounter for open fracture type I or II
S72.92XC	Unspecified fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
*S72.92XE	*Unspecified fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S75.001A	Unspecified injury of femoral artery, right leg, initial encounter
S75.002A	Unspecified injury of femoral artery, left leg, initial encounter
S75.009A	Unspecified injury of femoral artery, unspecified leg, initial encounter
S75.011A	Minor laceration of femoral artery, right leg, initial encounter
S75.012A	Minor laceration of femoral artery, left leg, initial encounter
S75.019A	Minor laceration of femoral artery, unspecified leg, initial encounter
S75.021A	Major laceration of femoral artery, right leg, initial encounter
S75.022A	Major laceration of femoral artery, left leg, initial encounter
S75.029A	Major laceration of femoral artery, unspecified leg, initial encounter
S75.091A	Other specified injury of femoral artery, right leg, initial encounter
S75.092A	Other specified injury of femoral artery, left leg, initial encounter
S75.099A	Other specified injury of femoral artery, unspecified leg, initial encounter
S75.101A	Unspecified injury of femoral vein at hip and thigh level, right leg, initial encounter
S75.102A	Unspecified injury of femoral vein at hip and thigh level, left leg, initial encounter
S75.109A	Unspecified injury of femoral vein at hip and thigh level, unspecified leg, initial encounter
S75.111A	Minor laceration of femoral vein at hip and thigh level, right leg, initial encounter
S75.112A	Minor laceration of femoral vein at hip and thigh level, left leg, initial encounter
S75.119A	Minor laceration of femoral vein at hip and thigh level, unspecified leg, initial encounter
S75.121A	Major laceration of femoral vein at hip and thigh level, right leg, initial encounter



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Code	Description
S75.122A	Major laceration of femoral vein at hip and thigh level, left leg, initial encounter
S75.129A	Major laceration of femoral vein at hip and thigh level, unspecified leg, initial encounter
S75.191A	Other specified injury of femoral vein at hip and thigh level, right leg, initial encounter
S75.192A	Other specified injury of femoral vein at hip and thigh level, left leg, initial encounter
S75.199A	Other specified injury of femoral vein at hip and thigh level, unspecified leg, initial encounter
S75.201A	Unspecified injury of greater saphenous vein at hip and thigh level, right leg, initial encounter
S75.202A	Unspecified injury of greater saphenous vein at hip and thigh level, left leg, initial encounter
S75.209A	Unspecified injury of greater saphenous vein at hip and thigh level, unspecified leg, initial encounter
S75.211A	Minor laceration of greater saphenous vein at hip and thigh level, right leg, initial encounter
S75.212A	Minor laceration of greater saphenous vein at hip and thigh level, left leg, initial encounter
S75.219A	Minor laceration of greater saphenous vein at hip and thigh level, unspecified leg, initial encounter
S75.221A	Major laceration of greater saphenous vein at hip and thigh level, right leg, initial encounter
S75.222A	Major laceration of greater saphenous vein at hip and thigh level, left leg, initial encounter
S75.229A	Major laceration of greater saphenous vein at hip and thigh level, unspecified leg, initial encounter
S75.291A	Other specified injury of greater saphenous vein at hip and thigh level, right leg, initial encounter
S75.292A	Other specified injury of greater saphenous vein at hip and thigh level, left leg, initial encounter
S75.299A	Other specified injury of greater saphenous vein at hip and thigh level, unspecified leg, initial encounter
S75.801A	Unspecified injury of other blood vessels at hip and thigh level, right leg, initial encounter
S75.802A	Unspecified injury of other blood vessels at hip and thigh level, left leg, initial encounter
S75.809A	Unspecified injury of other blood vessels at hip and thigh level, unspecified leg, initial encounter
S75.811A	Laceration of other blood vessels at hip and thigh level, right leg, initial encounter
S75.812A	Laceration of other blood vessels at hip and thigh level, left leg, initial encounter
S75.819A	Laceration of other blood vessels at hip and thigh level, unspecified leg, initial encounter



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Code	Description
S75.891A	Other specified injury of other blood vessels at hip and thigh level, right leg, initial encounter
S75.892A	Other specified injury of other blood vessels at hip and thigh level, left leg, initial encounter
S75.899A	Other specified injury of other blood vessels at hip and thigh level, unspecified leg, initial encounter
S75.901A	Unspecified injury of unspecified blood vessel at hip and thigh level, right leg, initial encounter
S75.902A	Unspecified injury of unspecified blood vessel at hip and thigh level, left leg, initial encounter
S75.909A	Unspecified injury of unspecified blood vessel at hip and thigh level, unspecified leg, initial encounter
S75.911A	Laceration of unspecified blood vessel at hip and thigh level, right leg, initial encounter
S75.912A	Laceration of unspecified blood vessel at hip and thigh level, left leg, initial encounter
S75.919A	Laceration of unspecified blood vessel at hip and thigh level, unspecified leg, initial encounter
S75.991A	Other specified injury of unspecified blood vessel at hip and thigh level, right leg, initial encounter
S75.992A	Other specified injury of unspecified blood vessel at hip and thigh level, left leg, initial encounter
S75.999A	Other specified injury of unspecified blood vessel at hip and thigh level, unspecified leg, initial encounter
S77.00XA	Crushing injury of unspecified hip, initial encounter
S77.01XA	Crushing injury of right hip, initial encounter
S77.02XA	Crushing injury of left hip, initial encounter
S77.10XA	Crushing injury of unspecified thigh, initial encounter
S77.11XA	Crushing injury of right thigh, initial encounter
S77.12XA	Crushing injury of left thigh, initial encounter
S77.20XA	Crushing injury of unspecified hip with thigh, initial encounter
S77.21XA	Crushing injury of right hip with thigh, initial encounter
S77.22XA	Crushing injury of left hip with thigh, initial encounter
S79.001A	Unspecified physeal fracture of upper end of right femur, initial encounter for closed fracture
S79.002A	Unspecified physeal fracture of upper end of left femur, initial encounter for closed fracture



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Code	Description
S79.009A	Unspecified physeal fracture of upper end of unspecified femur, initial encounter for closed fracture
S79.011A	Salter-Harris Type I physeal fracture of upper end of right femur, initial encounter for closed fracture
S79.012A	Salter-Harris Type I physeal fracture of upper end of left femur, initial encounter for closed fracture
S79.019A	Salter-Harris Type I physeal fracture of upper end of unspecified femur, initial encounter for closed fracture
S79.091A	Other physeal fracture of upper end of right femur, initial encounter for closed fracture
S79.092A	Other physeal fracture of upper end of left femur, initial encounter for closed fracture
S79.099A	Other physeal fracture of upper end of unspecified femur, initial encounter for closed fracture
S79.101A	Unspecified physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.102A	Unspecified physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.109A	Unspecified physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.111A	Salter-Harris Type I physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.112A	Salter-Harris Type I physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.119A	Salter-Harris Type I physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.121A	Salter-Harris Type II physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.122A	Salter-Harris Type II physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.129A	Salter-Harris Type II physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.131A	Salter-Harris Type III physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.132A	Salter-Harris Type III physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.139A	Salter-Harris Type III physeal fracture of lower end of unspecified femur, initial encounter for closed fracture



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Code	Description
S79.141A	Salter-Harris Type IV physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.142A	Salter-Harris Type IV physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.149A	Salter-Harris Type IV physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.191A	Other physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.192A	Other physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.199A	Other physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S80.00XA	Contusion of unspecified knee, initial encounter
S80.01XA	Contusion of right knee, initial encounter
S80.02XA	Contusion of left knee, initial encounter
S80.10XA	Contusion of unspecified lower leg, initial encounter
S80.11XA	Contusion of right lower leg, initial encounter
S80.12XA	Contusion of left lower leg, initial encounter
S82.101A	Unspecified fracture of upper end of right tibia, initial encounter for closed fracture
S82.101B	Unspecified fracture of upper end of right tibia, initial encounter for open fracture type I or II
S82.101C	Unspecified fracture of upper end of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.102A	Unspecified fracture of upper end of left tibia, initial encounter for closed fracture
S82.102B	Unspecified fracture of upper end of left tibia, initial encounter for open fracture type I or II
S82.102C	Unspecified fracture of upper end of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.109A	Unspecified fracture of upper end of unspecified tibia, initial encounter for closed fracture
S82.109B	Unspecified fracture of upper end of unspecified tibia, initial encounter for open fracture type I or II
S82.109C	Unspecified fracture of upper end of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.111A	Displaced fracture of right tibial spine, initial encounter for closed fracture
S82.111B	Displaced fracture of right tibial spine, initial encounter for open fracture type I or II
S82.111C	Displaced fracture of right tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S82.112A	Displaced fracture of left tibial spine, initial encounter for closed fracture
S82.112B	Displaced fracture of left tibial spine, initial encounter for open fracture type I or II
S82.112C	Displaced fracture of left tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.113A	Displaced fracture of unspecified tibial spine, initial encounter for closed fracture
S82.113B	Displaced fracture of unspecified tibial spine, initial encounter for open fracture type I or II
S82.113C	Displaced fracture of unspecified tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.114A	Nondisplaced fracture of right tibial spine, initial encounter for closed fracture
S82.114B	Nondisplaced fracture of right tibial spine, initial encounter for open fracture type I or II
S82.114C	Nondisplaced fracture of right tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.115A	Nondisplaced fracture of left tibial spine, initial encounter for closed fracture
S82.115B	Nondisplaced fracture of left tibial spine, initial encounter for open fracture type I or II
S82.115C	Nondisplaced fracture of left tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.116A	Nondisplaced fracture of unspecified tibial spine, initial encounter for closed fracture
S82.116B	Nondisplaced fracture of unspecified tibial spine, initial encounter for open fracture type I or II
S82.116C	Nondisplaced fracture of unspecified tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.121A	Displaced fracture of lateral condyle of right tibia, initial encounter for closed fracture
S82.121B	Displaced fracture of lateral condyle of right tibia, initial encounter for open fracture type I or II
S82.121C	Displaced fracture of lateral condyle of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.122A	Displaced fracture of lateral condyle of left tibia, initial encounter for closed fracture
S82.122B	Displaced fracture of lateral condyle of left tibia, initial encounter for open fracture type I or II
S82.122C	Displaced fracture of lateral condyle of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.123A	Displaced fracture of lateral condyle of unspecified tibia, initial encounter for closed fracture



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Code	Description
S82.123B	Displaced fracture of lateral condyle of unspecified tibia, initial encounter for open fracture type I or II
S82.123C	Displaced fracture of lateral condyle of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.124A	Nondisplaced fracture of lateral condyle of right tibia, initial encounter for closed fracture
S82.124B	Nondisplaced fracture of lateral condyle of right tibia, initial encounter for open fracture type I or II
S82.124C	Nondisplaced fracture of lateral condyle of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.125A	Nondisplaced fracture of lateral condyle of left tibia, initial encounter for closed fracture
S82.125B	Nondisplaced fracture of lateral condyle of left tibia, initial encounter for open fracture type I or II
S82.125C	Nondisplaced fracture of lateral condyle of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.126A	Nondisplaced fracture of lateral condyle of unspecified tibia, initial encounter for closed fracture
S82.126B	Nondisplaced fracture of lateral condyle of unspecified tibia, initial encounter for open fracture type I or II
S82.126C	Nondisplaced fracture of lateral condyle of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.131A	Displaced fracture of medial condyle of right tibia, initial encounter for closed fracture
S82.131B	Displaced fracture of medial condyle of right tibia, initial encounter for open fracture type I or II
S82.131C	Displaced fracture of medial condyle of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.132A	Displaced fracture of medial condyle of left tibia, initial encounter for closed fracture
S82.132B	Displaced fracture of medial condyle of left tibia, initial encounter for open fracture type I or II
S82.132C	Displaced fracture of medial condyle of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.133A	Displaced fracture of medial condyle of unspecified tibia, initial encounter for closed fracture
S82.133B	Displaced fracture of medial condyle of unspecified tibia, initial encounter for open fracture type I or II
S82.133C	Displaced fracture of medial condyle of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S82.134A	Nondisplaced fracture of medial condyle of right tibia, initial encounter for closed fracture
S82.134B	Nondisplaced fracture of medial condyle of right tibia, initial encounter for open fracture type I or II
S82.134C	Nondisplaced fracture of medial condyle of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.135A	Nondisplaced fracture of medial condyle of left tibia, initial encounter for closed fracture
S82.135B	Nondisplaced fracture of medial condyle of left tibia, initial encounter for open fracture type I or II
S82.135C	Nondisplaced fracture of medial condyle of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.136A	Nondisplaced fracture of medial condyle of unspecified tibia, initial encounter for closed fracture
S82.136B	Nondisplaced fracture of medial condyle of unspecified tibia, initial encounter for open fracture type I or II
S82.136C	Nondisplaced fracture of medial condyle of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.141A	Displaced bicondylar fracture of right tibia, initial encounter for closed fracture
S82.141B	Displaced bicondylar fracture of right tibia, initial encounter for open fracture type I or II
S82.141C	Displaced bicondylar fracture of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.142A	Displaced bicondylar fracture of left tibia, initial encounter for closed fracture
S82.142B	Displaced bicondylar fracture of left tibia, initial encounter for open fracture type I or II
S82.142C	Displaced bicondylar fracture of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.143A	Displaced bicondylar fracture of unspecified tibia, initial encounter for closed fracture
S82.143B	Displaced bicondylar fracture of unspecified tibia, initial encounter for open fracture type I or II
S82.143C	Displaced bicondylar fracture of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.144A	Nondisplaced bicondylar fracture of right tibia, initial encounter for closed fracture
S82.144B	Nondisplaced bicondylar fracture of right tibia, initial encounter for open fracture type I or II
S82.144C	Nondisplaced bicondylar fracture of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.145A	Nondisplaced bicondylar fracture of left tibia, initial encounter for closed fracture



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Code	Description
S82.145B	Nondisplaced bicondylar fracture of left tibia, initial encounter for open fracture type I or II
S82.145C	Nondisplaced bicondylar fracture of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.146A	Nondisplaced bicondylar fracture of unspecified tibia, initial encounter for closed fracture
S82.146B	Nondisplaced bicondylar fracture of unspecified tibia, initial encounter for open fracture type I or II
S82.146C	Nondisplaced bicondylar fracture of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.151A	Displaced fracture of right tibial tuberosity, initial encounter for closed fracture
S82.151B	Displaced fracture of right tibial tuberosity, initial encounter for open fracture type I or II
S82.151C	Displaced fracture of right tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.152A	Displaced fracture of left tibial tuberosity, initial encounter for closed fracture
S82.152B	Displaced fracture of left tibial tuberosity, initial encounter for open fracture type I or II
S82.152C	Displaced fracture of left tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.153A	Displaced fracture of unspecified tibial tuberosity, initial encounter for closed fracture
S82.153B	Displaced fracture of unspecified tibial tuberosity, initial encounter for open fracture type I or II
S82.153C	Displaced fracture of unspecified tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.154A	Nondisplaced fracture of right tibial tuberosity, initial encounter for closed fracture
S82.154B	Nondisplaced fracture of right tibial tuberosity, initial encounter for open fracture type I or II
S82.154C	Nondisplaced fracture of right tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.155A	Nondisplaced fracture of left tibial tuberosity, initial encounter for closed fracture
S82.155B	Nondisplaced fracture of left tibial tuberosity, initial encounter for open fracture type I or II
S82.155C	Nondisplaced fracture of left tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.156A	Nondisplaced fracture of unspecified tibial tuberosity, initial encounter for closed fracture
S82.156B	Nondisplaced fracture of unspecified tibial tuberosity, initial encounter for open fracture type I or II
S82.156C	Nondisplaced fracture of unspecified tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S82.161A	Torus fracture of upper end of right tibia, initial encounter for closed fracture
S82.162A	Torus fracture of upper end of left tibia, initial encounter for closed fracture
S82.169A	Torus fracture of upper end of unspecified tibia, initial encounter for closed fracture
S82.191A	Other fracture of upper end of right tibia, initial encounter for closed fracture
S82.191B	Other fracture of upper end of right tibia, initial encounter for open fracture type I or II
S82.191C	Other fracture of upper end of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.192A	Other fracture of upper end of left tibia, initial encounter for closed fracture
S82.192B	Other fracture of upper end of left tibia, initial encounter for open fracture type I or II
S82.192C	Other fracture of upper end of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.199A	Other fracture of upper end of unspecified tibia, initial encounter for closed fracture
S82.199B	Other fracture of upper end of unspecified tibia, initial encounter for open fracture type I or II
S82.199C	Other fracture of upper end of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.201A	Unspecified fracture of shaft of right tibia, initial encounter for closed fracture
S82.201B	Unspecified fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.201C	Unspecified fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.202A	Unspecified fracture of shaft of left tibia, initial encounter for closed fracture
S82.202B	Unspecified fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.202C	Unspecified fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.209A	Unspecified fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.209B	Unspecified fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.209C	Unspecified fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.221A	Displaced transverse fracture of shaft of right tibia, initial encounter for closed fracture
S82.221B	Displaced transverse fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.221C	Displaced transverse fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.222A	Displaced transverse fracture of shaft of left tibia, initial encounter for closed fracture
S82.222B	Displaced transverse fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.222C	Displaced transverse fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.223A	Displaced transverse fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.223B	Displaced transverse fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.223C	Displaced transverse fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.224A	Nondisplaced transverse fracture of shaft of right tibia, initial encounter for closed fracture
S82.224B	Nondisplaced transverse fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.224C	Nondisplaced transverse fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.225A	Nondisplaced transverse fracture of shaft of left tibia, initial encounter for closed fracture
S82.225B	Nondisplaced transverse fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.225C	Nondisplaced transverse fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.226A	Nondisplaced transverse fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.226B	Nondisplaced transverse fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.226C	Nondisplaced transverse fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.231A	Displaced oblique fracture of shaft of right tibia, initial encounter for closed fracture
S82.231B	Displaced oblique fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.231C	Displaced oblique fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.232A	Displaced oblique fracture of shaft of left tibia, initial encounter for closed fracture
S82.232B	Displaced oblique fracture of shaft of left tibia, initial encounter for open fracture type I or II



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Code	Description
S82.232C	Displaced oblique fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.233A	Displaced oblique fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.233B	Displaced oblique fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.233C	Displaced oblique fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.234A	Nondisplaced oblique fracture of shaft of right tibia, initial encounter for closed fracture
S82.234B	Nondisplaced oblique fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.234C	Nondisplaced oblique fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.235A	Nondisplaced oblique fracture of shaft of left tibia, initial encounter for closed fracture
S82.235B	Nondisplaced oblique fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.235C	Nondisplaced oblique fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.236A	Nondisplaced oblique fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.236B	Nondisplaced oblique fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.236C	Nondisplaced oblique fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.241A	Displaced spiral fracture of shaft of right tibia, initial encounter for closed fracture
S82.241B	Displaced spiral fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.241C	Displaced spiral fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.242A	Displaced spiral fracture of shaft of left tibia, initial encounter for closed fracture
S82.242B	Displaced spiral fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.242C	Displaced spiral fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.243A	Displaced spiral fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.243B	Displaced spiral fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II



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Code	Description
S82.243C	Displaced spiral fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.244A	Nondisplaced spiral fracture of shaft of right tibia, initial encounter for closed fracture
S82.244B	Nondisplaced spiral fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.244C	Nondisplaced spiral fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.245A	Nondisplaced spiral fracture of shaft of left tibia, initial encounter for closed fracture
S82.245B	Nondisplaced spiral fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.245C	Nondisplaced spiral fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.246A	Nondisplaced spiral fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.246B	Nondisplaced spiral fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.246C	Nondisplaced spiral fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.251A	Displaced comminuted fracture of shaft of right tibia, initial encounter for closed fracture
S82.251B	Displaced comminuted fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.251C	Displaced comminuted fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.252A	Displaced comminuted fracture of shaft of left tibia, initial encounter for closed fracture
S82.252B	Displaced comminuted fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.252C	Displaced comminuted fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.253A	Displaced comminuted fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.253B	Displaced comminuted fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.253C	Displaced comminuted fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.254A	Nondisplaced comminuted fracture of shaft of right tibia, initial encounter for closed fracture

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Code	Description
S82.254B	Nondisplaced comminuted fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.254C	Nondisplaced comminuted fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.255A	Nondisplaced comminuted fracture of shaft of left tibia, initial encounter for closed fracture
S82.255B	Nondisplaced comminuted fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.255C	Nondisplaced comminuted fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.256A	Nondisplaced comminuted fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.256B	Nondisplaced comminuted fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.256C	Nondisplaced comminuted fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.261A	Displaced segmental fracture of shaft of right tibia, initial encounter for closed fracture
S82.261B	Displaced segmental fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.261C	Displaced segmental fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.262A	Displaced segmental fracture of shaft of left tibia, initial encounter for closed fracture
S82.262B	Displaced segmental fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.262C	Displaced segmental fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.263A	Displaced segmental fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.263B	Displaced segmental fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.263C	Displaced segmental fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.264A	Nondisplaced segmental fracture of shaft of right tibia, initial encounter for closed fracture
S82.264B	Nondisplaced segmental fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.264C	Nondisplaced segmental fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S82.265A	Nondisplaced segmental fracture of shaft of left tibia, initial encounter for closed fracture
S82.265B	Nondisplaced segmental fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.265C	Nondisplaced segmental fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.266A	Nondisplaced segmental fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.266B	Nondisplaced segmental fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.266C	Nondisplaced segmental fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.291A	Other fracture of shaft of right tibia, initial encounter for closed fracture
S82.291B	Other fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.291C	Other fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.292A	Other fracture of shaft of left tibia, initial encounter for closed fracture
S82.292B	Other fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.292C	Other fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.299A	Other fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.299B	Other fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.299C	Other fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.311A	Torus fracture of lower end of right tibia, initial encounter for closed fracture
S82.312A	Torus fracture of lower end of left tibia, initial encounter for closed fracture
S82.319A	Torus fracture of lower end of unspecified tibia, initial encounter for closed fracture
S82.401A	Unspecified fracture of shaft of right fibula, initial encounter for closed fracture
S82.401B	Unspecified fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.401C	Unspecified fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.402A	Unspecified fracture of shaft of left fibula, initial encounter for closed fracture
S82.402B	Unspecified fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.402C	Unspecified fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.409A	Unspecified fracture of shaft of unspecified fibula, initial encounter for closed fracture



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Code	Description
S82.409B	Unspecified fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.409C	Unspecified fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.421A	Displaced transverse fracture of shaft of right fibula, initial encounter for closed fracture
S82.421B	Displaced transverse fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.421C	Displaced transverse fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.422A	Displaced transverse fracture of shaft of left fibula, initial encounter for closed fracture
S82.422B	Displaced transverse fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.422C	Displaced transverse fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.423A	Displaced transverse fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.423B	Displaced transverse fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.423C	Displaced transverse fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.424A	Nondisplaced transverse fracture of shaft of right fibula, initial encounter for closed fracture
S82.424B	Nondisplaced transverse fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.424C	Nondisplaced transverse fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.425A	Nondisplaced transverse fracture of shaft of left fibula, initial encounter for closed fracture
S82.425B	Nondisplaced transverse fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.425C	Nondisplaced transverse fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.426A	Nondisplaced transverse fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.426B	Nondisplaced transverse fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.426C	Nondisplaced transverse fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S82.431A	Displaced oblique fracture of shaft of right fibula, initial encounter for closed fracture
S82.431B	Displaced oblique fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.431C	Displaced oblique fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.432A	Displaced oblique fracture of shaft of left fibula, initial encounter for closed fracture
S82.432B	Displaced oblique fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.432C	Displaced oblique fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.433A	Displaced oblique fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.433B	Displaced oblique fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.433C	Displaced oblique fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.434A	Nondisplaced oblique fracture of shaft of right fibula, initial encounter for closed fracture
S82.434B	Nondisplaced oblique fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.434C	Nondisplaced oblique fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.435A	Nondisplaced oblique fracture of shaft of left fibula, initial encounter for closed fracture
S82.435B	Nondisplaced oblique fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.435C	Nondisplaced oblique fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.436A	Nondisplaced oblique fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.436B	Nondisplaced oblique fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.436C	Nondisplaced oblique fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.441A	Displaced spiral fracture of shaft of right fibula, initial encounter for closed fracture
S82.441B	Displaced spiral fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.441C	Displaced spiral fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S82.442A	Displaced spiral fracture of shaft of left fibula, initial encounter for closed fracture
S82.442B	Displaced spiral fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.442C	Displaced spiral fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.443A	Displaced spiral fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.443B	Displaced spiral fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.443C	Displaced spiral fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.444A	Nondisplaced spiral fracture of shaft of right fibula, initial encounter for closed fracture
S82.444B	Nondisplaced spiral fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.444C	Nondisplaced spiral fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.445A	Nondisplaced spiral fracture of shaft of left fibula, initial encounter for closed fracture
S82.445B	Nondisplaced spiral fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.445C	Nondisplaced spiral fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.446A	Nondisplaced spiral fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.446B	Nondisplaced spiral fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.446C	Nondisplaced spiral fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.451A	Displaced comminuted fracture of shaft of right fibula, initial encounter for closed fracture
S82.451B	Displaced comminuted fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.451C	Displaced comminuted fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.452A	Displaced comminuted fracture of shaft of left fibula, initial encounter for closed fracture
S82.452B	Displaced comminuted fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.452C	Displaced comminuted fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S82.453A	Displaced comminuted fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.453B	Displaced comminuted fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.453C	Displaced comminuted fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.454A	Nondisplaced comminuted fracture of shaft of right fibula, initial encounter for closed fracture
S82.454B	Nondisplaced comminuted fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.454C	Nondisplaced comminuted fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.455A	Nondisplaced comminuted fracture of shaft of left fibula, initial encounter for closed fracture
S82.455B	Nondisplaced comminuted fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.455C	Nondisplaced comminuted fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.456A	Nondisplaced comminuted fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.456B	Nondisplaced comminuted fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.456C	Nondisplaced comminuted fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.461A	Displaced segmental fracture of shaft of right fibula, initial encounter for closed fracture
S82.461B	Displaced segmental fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.461C	Displaced segmental fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.462A	Displaced segmental fracture of shaft of left fibula, initial encounter for closed fracture
S82.462B	Displaced segmental fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.462C	Displaced segmental fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.463A	Displaced segmental fracture of shaft of unspecified fibula, initial encounter for closed fracture



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Code	Description
S82.463B	Displaced segmental fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.463C	Displaced segmental fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.464A	Nondisplaced segmental fracture of shaft of right fibula, initial encounter for closed fracture
S82.464B	Nondisplaced segmental fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.464C	Nondisplaced segmental fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.465A	Nondisplaced segmental fracture of shaft of left fibula, initial encounter for closed fracture
S82.465B	Nondisplaced segmental fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.465C	Nondisplaced segmental fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.466A	Nondisplaced segmental fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.466B	Nondisplaced segmental fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.466C	Nondisplaced segmental fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.491A	Other fracture of shaft of right fibula, initial encounter for closed fracture
S82.491B	Other fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.491C	Other fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.492A	Other fracture of shaft of left fibula, initial encounter for closed fracture
S82.492B	Other fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.492C	Other fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.499A	Other fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.499B	Other fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.499C	Other fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.811A	Torus fracture of upper end of right fibula, initial encounter for closed fracture
S82.812A	Torus fracture of upper end of left fibula, initial encounter for closed fracture
S82.819A	Torus fracture of upper end of unspecified fibula, initial encounter for closed fracture
S82.821A	Torus fracture of lower end of right fibula, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.822A	Torus fracture of lower end of left fibula, initial encounter for closed fracture
S82.829A	Torus fracture of lower end of unspecified fibula, initial encounter for closed fracture
S82.831A	Other fracture of upper and lower end of right fibula, initial encounter for closed fracture
S82.831B	Other fracture of upper and lower end of right fibula, initial encounter for open fracture type I or II
S82.831C	Other fracture of upper and lower end of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.832A	Other fracture of upper and lower end of left fibula, initial encounter for closed fracture
S82.832B	Other fracture of upper and lower end of left fibula, initial encounter for open fracture type I or II
S82.832C	Other fracture of upper and lower end of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.839A	Other fracture of upper and lower end of unspecified fibula, initial encounter for closed fracture
S82.839B	Other fracture of upper and lower end of unspecified fibula, initial encounter for open fracture type I or II
S82.839C	Other fracture of upper and lower end of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.861A	Displaced Maisonneuve's fracture of right leg, initial encounter for closed fracture
S82.861B	Displaced Maisonneuve's fracture of right leg, initial encounter for open fracture type I or II
S82.861C	Displaced Maisonneuve's fracture of right leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.862A	Displaced Maisonneuve's fracture of left leg, initial encounter for closed fracture
S82.862B	Displaced Maisonneuve's fracture of left leg, initial encounter for open fracture type I or II
S82.862C	Displaced Maisonneuve's fracture of left leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.863A	Displaced Maisonneuve's fracture of unspecified leg, initial encounter for closed fracture
S82.863B	Displaced Maisonneuve's fracture of unspecified leg, initial encounter for open fracture type I or II
S82.863C	Displaced Maisonneuve's fracture of unspecified leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.864A	Nondisplaced Maisonneuve's fracture of right leg, initial encounter for closed fracture
S82.864B	Nondisplaced Maisonneuve's fracture of right leg, initial encounter for open fracture type I or II



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S82.864C	Nondisplaced Maisonneuve's fracture of right leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.865A	Nondisplaced Maisonneuve's fracture of left leg, initial encounter for closed fracture
S82.865B	Nondisplaced Maisonneuve's fracture of left leg, initial encounter for open fracture type I or II
S82.865C	Nondisplaced Maisonneuve's fracture of left leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.866A	Nondisplaced Maisonneuve's fracture of unspecified leg, initial encounter for closed fracture
S82.866B	Nondisplaced Maisonneuve's fracture of unspecified leg, initial encounter for open fracture type I or II
S82.866C	Nondisplaced Maisonneuve's fracture of unspecified leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.90XA	Unspecified fracture of unspecified lower leg, initial encounter for closed fracture
S82.90XB	Unspecified fracture of unspecified lower leg, initial encounter for open fracture type I or II
S82.90XC	Unspecified fracture of unspecified lower leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.91XA	Unspecified fracture of right lower leg, initial encounter for closed fracture
S82.91XB	Unspecified fracture of right lower leg, initial encounter for open fracture type I or II
S82.91XC	Unspecified fracture of right lower leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.92XA	Unspecified fracture of left lower leg, initial encounter for closed fracture
S82.92XB	Unspecified fracture of left lower leg, initial encounter for open fracture type I or II
S82.92XC	Unspecified fracture of left lower leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S85.001A	Unspecified injury of popliteal artery, right leg, initial encounter
S85.002A	Unspecified injury of popliteal artery, left leg, initial encounter
S85.009A	Unspecified injury of popliteal artery, unspecified leg, initial encounter
S85.011A	Laceration of popliteal artery, right leg, initial encounter
S85.012A	Laceration of popliteal artery, left leg, initial encounter
S85.019A	Laceration of popliteal artery, unspecified leg, initial encounter
S85.091A	Other specified injury of popliteal artery, right leg, initial encounter
S85.092A	Other specified injury of popliteal artery, left leg, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S85.099A	Other specified injury of popliteal artery, unspecified leg, initial encounter
S85.101A	Unspecified injury of unspecified tibial artery, right leg, initial encounter
S85.102A	Unspecified injury of unspecified tibial artery, left leg, initial encounter
S85.109A	Unspecified injury of unspecified tibial artery, unspecified leg, initial encounter
S85.111A	Laceration of unspecified tibial artery, right leg, initial encounter
S85.112A	Laceration of unspecified tibial artery, left leg, initial encounter
S85.119A	Laceration of unspecified tibial artery, unspecified leg, initial encounter
S85.121A	Other specified injury of unspecified tibial artery, right leg, initial encounter
S85.122A	Other specified injury of unspecified tibial artery, left leg, initial encounter
S85.129A	Other specified injury of unspecified tibial artery, unspecified leg, initial encounter
S85.131A	Unspecified injury of anterior tibial artery, right leg, initial encounter
S85.132A	Unspecified injury of anterior tibial artery, left leg, initial encounter
S85.139A	Unspecified injury of anterior tibial artery, unspecified leg, initial encounter
S85.141A	Laceration of anterior tibial artery, right leg, initial encounter
S85.142A	Laceration of anterior tibial artery, left leg, initial encounter
S85.149A	Laceration of anterior tibial artery, unspecified leg, initial encounter
S85.151A	Other specified injury of anterior tibial artery, right leg, initial encounter
S85.152A	Other specified injury of anterior tibial artery, left leg, initial encounter
S85.159A	Other specified injury of anterior tibial artery, unspecified leg, initial encounter
S85.161A	Unspecified injury of posterior tibial artery, right leg, initial encounter
S85.162A	Unspecified injury of posterior tibial artery, left leg, initial encounter
S85.169A	Unspecified injury of posterior tibial artery, unspecified leg, initial encounter
S85.171A	Laceration of posterior tibial artery, right leg, initial encounter
S85.172A	Laceration of posterior tibial artery, left leg, initial encounter
S85.179A	Laceration of posterior tibial artery, unspecified leg, initial encounter
S85.181A	Other specified injury of posterior tibial artery, right leg, initial encounter
S85.182A	Other specified injury of posterior tibial artery, left leg, initial encounter
S85.189A	Other specified injury of posterior tibial artery, unspecified leg, initial encounter
S85.201A	Unspecified injury of peroneal artery, right leg, initial encounter
S85.202A	Unspecified injury of peroneal artery, left leg, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S85.209A	Unspecified injury of peroneal artery, unspecified leg, initial encounter
S85.211A	Laceration of peroneal artery, right leg, initial encounter
S85.212A	Laceration of peroneal artery, left leg, initial encounter
S85.219A	Laceration of peroneal artery, unspecified leg, initial encounter
S85.291A	Other specified injury of peroneal artery, right leg, initial encounter
S85.292A	Other specified injury of peroneal artery, left leg, initial encounter
S85.299A	Other specified injury of peroneal artery, unspecified leg, initial encounter
S85.301A	Unspecified injury of greater saphenous vein at lower leg level, right leg, initial encounter
S85.302A	Unspecified injury of greater saphenous vein at lower leg level, left leg, initial encounter
S85.309A	Unspecified injury of greater saphenous vein at lower leg level, unspecified leg, initial encounter
S85.311A	Laceration of greater saphenous vein at lower leg level, right leg, initial encounter
S85.312A	Laceration of greater saphenous vein at lower leg level, left leg, initial encounter
S85.319A	Laceration of greater saphenous vein at lower leg level, unspecified leg, initial encounter
S85.391A	Other specified injury of greater saphenous vein at lower leg level, right leg, initial encounter
S85.392A	Other specified injury of greater saphenous vein at lower leg level, left leg, initial encounter
S85.399A	Other specified injury of greater saphenous vein at lower leg level, unspecified leg, initial encounter
S85.401A	Unspecified injury of lesser saphenous vein at lower leg level, right leg, initial encounter
S85.402A	Unspecified injury of lesser saphenous vein at lower leg level, left leg, initial encounter
S85.409A	Unspecified injury of lesser saphenous vein at lower leg level, unspecified leg, initial encounter
S85.411A	Laceration of lesser saphenous vein at lower leg level, right leg, initial encounter
S85.412A	Laceration of lesser saphenous vein at lower leg level, left leg, initial encounter
S85.419A	Laceration of lesser saphenous vein at lower leg level, unspecified leg, initial encounter
S85.491A	Other specified injury of lesser saphenous vein at lower leg level, right leg, initial encounter
S85.492A	Other specified injury of lesser saphenous vein at lower leg level, left leg, initial encounter
S85.499A	Other specified injury of lesser saphenous vein at lower leg level, unspecified leg, initial encounter
S85.501A	Unspecified injury of popliteal vein, right leg, initial encounter
S85.502A	Unspecified injury of popliteal vein, left leg, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S85.509A	Unspecified injury of popliteal vein, unspecified leg, initial encounter
S85.511A	Laceration of popliteal vein, right leg, initial encounter
S85.512A	Laceration of popliteal vein, left leg, initial encounter
S85.519A	Laceration of popliteal vein, unspecified leg, initial encounter
S85.591A	Other specified injury of popliteal vein, right leg, initial encounter
S85.592A	Other specified injury of popliteal vein, left leg, initial encounter
S85.599A	Other specified injury of popliteal vein, unspecified leg, initial encounter
S85.801A	Unspecified injury of other blood vessels at lower leg level, right leg, initial encounter
S85.802A	Unspecified injury of other blood vessels at lower leg level, left leg, initial encounter
S85.809A	Unspecified injury of other blood vessels at lower leg level, unspecified leg, initial encounter
S85.811A	Laceration of other blood vessels at lower leg level, right leg, initial encounter
S85.812A	Laceration of other blood vessels at lower leg level, left leg, initial encounter
S85.819A	Laceration of other blood vessels at lower leg level, unspecified leg, initial encounter
S85.891A	Other specified injury of other blood vessels at lower leg level, right leg, initial encounter
S85.892A	Other specified injury of other blood vessels at lower leg level, left leg, initial encounter
S85.899A	Other specified injury of other blood vessels at lower leg level, unspecified leg, initial encounter
S85.901A	Unspecified injury of unspecified blood vessel at lower leg level, right leg, initial encounter
S85.902A	Unspecified injury of unspecified blood vessel at lower leg level, left leg, initial encounter
S85.909A	Unspecified injury of unspecified blood vessel at lower leg level, unspecified leg, initial encounter
S85.911A	Laceration of unspecified blood vessel at lower leg level, right leg, initial encounter
S85.912A	Laceration of unspecified blood vessel at lower leg level, left leg, initial encounter
S85.919A	Laceration of unspecified blood vessel at lower leg level, unspecified leg, initial encounter
S85.991A	Other specified injury of unspecified blood vessel at lower leg level, right leg, initial encounter
S85.992A	Other specified injury of unspecified blood vessel at lower leg level, left leg, initial encounter
S85.999A	Other specified injury of unspecified blood vessel at lower leg level, unspecified leg, initial encounter
S87.00XA	Crushing injury of unspecified knee, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S87.01XA	Crushing injury of right knee, initial encounter
S87.02XA	Crushing injury of left knee, initial encounter
S87.80XA	Crushing injury of unspecified lower leg, initial encounter
S87.81XA	Crushing injury of right lower leg, initial encounter
S87.82XA	Crushing injury of left lower leg, initial encounter
S89.001A	Unspecified physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.002A	Unspecified physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.009A	Unspecified physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.011A	Salter-Harris Type I physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.012A	Salter-Harris Type I physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.019A	Salter-Harris Type I physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.021A	Salter-Harris Type II physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.022A	Salter-Harris Type II physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.029A	Salter-Harris Type II physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.031A	Salter-Harris Type III physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.032A	Salter-Harris Type III physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.039A	Salter-Harris Type III physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.041A	Salter-Harris Type IV physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.042A	Salter-Harris Type IV physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.049A	Salter-Harris Type IV physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.091A	Other physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.092A	Other physeal fracture of upper end of left tibia, initial encounter for closed fracture

NCD 190.16

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S89.099A	Other physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.201A	Unspecified physeal fracture of upper end of right fibula, initial encounter for closed fracture
S89.202A	Unspecified physeal fracture of upper end of left fibula, initial encounter for closed fracture
S89.209A	Unspecified physeal fracture of upper end of unspecified fibula, initial encounter for closed fracture
S89.211A	Salter-Harris Type I physeal fracture of upper end of right fibula, initial encounter for closed fracture
S89.212A	Salter-Harris Type I physeal fracture of upper end of left fibula, initial encounter for closed fracture
S89.219A	Salter-Harris Type I physeal fracture of upper end of unspecified fibula, initial encounter for closed fracture
S89.221A	Salter-Harris Type II physeal fracture of upper end of right fibula, initial encounter for closed fracture
S89.222A	Salter-Harris Type II physeal fracture of upper end of left fibula, initial encounter for closed fracture
S89.229A	Salter-Harris Type II physeal fracture of upper end of unspecified fibula, initial encounter for closed fracture
S89.291A	Other physeal fracture of upper end of right fibula, initial encounter for closed fracture
S89.292A	Other physeal fracture of upper end of left fibula, initial encounter for closed fracture
S89.299A	Other physeal fracture of upper end of unspecified fibula, initial encounter for closed fracture
S90.00XA	Contusion of unspecified ankle, initial encounter
S90.01XA	Contusion of right ankle, initial encounter
S90.02XA	Contusion of left ankle, initial encounter
S90.111A	Contusion of right great toe without damage to nail, initial encounter
S90.112A	Contusion of left great toe without damage to nail, initial encounter
S90.119A	Contusion of unspecified great toe without damage to nail, initial encounter
S90.121A	Contusion of right lesser toe(s) without damage to nail, initial encounter
S90.122A	Contusion of left lesser toe(s) without damage to nail, initial encounter
S90.129A	Contusion of unspecified lesser toe(s) without damage to nail, initial encounter
S90.211A	Contusion of right great toe with damage to nail, initial encounter
S90.212A	Contusion of left great toe with damage to nail, initial encounter

NCD 190.16

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S90.219A	Contusion of unspecified great toe with damage to nail, initial encounter
S90.221A	Contusion of right lesser toe(s) with damage to nail, initial encounter
S90.222A	Contusion of left lesser toe(s) with damage to nail, initial encounter
S90.229A	Contusion of unspecified lesser toe(s) with damage to nail, initial encounter
S90.30XA	Contusion of unspecified foot, initial encounter
S90.31XA	Contusion of right foot, initial encounter
S90.32XA	Contusion of left foot, initial encounter
*S92.812A	*Other fracture of left foot, initial encounter for closed fracture
*S92.812B	*Other fracture of left foot, initial encounter for open fracture
*S92.819A	*Other fracture of unspecified foot, initial encounter for closed fracture
*S92.819B	*Other fracture of unspecified foot, initial encounter for open fracture
S95.001A	Unspecified injury of dorsal artery of right foot, initial encounter
S95.002A	Unspecified injury of dorsal artery of left foot, initial encounter
S95.009A	Unspecified injury of dorsal artery of unspecified foot, initial encounter
S95.011A	Laceration of dorsal artery of right foot, initial encounter
S95.012A	Laceration of dorsal artery of left foot, initial encounter
S95.019A	Laceration of dorsal artery of unspecified foot, initial encounter
S95.091A	Other specified injury of dorsal artery of right foot, initial encounter
S95.092A	Other specified injury of dorsal artery of left foot, initial encounter
S95.099A	Other specified injury of dorsal artery of unspecified foot, initial encounter
S95.101A	Unspecified injury of plantar artery of right foot, initial encounter
S95.102A	Unspecified injury of plantar artery of left foot, initial encounter
S95.109A	Unspecified injury of plantar artery of unspecified foot, initial encounter
S95.111A	Laceration of plantar artery of right foot, initial encounter
S95.112A	Laceration of plantar artery of left foot, initial encounter
S95.119A	Laceration of plantar artery of unspecified foot, initial encounter
S95.191A	Other specified injury of plantar artery of right foot, initial encounter
S95.192A	Other specified injury of plantar artery of left foot, initial encounter
S95.199A	Other specified injury of plantar artery of unspecified foot, initial encounter
S95.201A	Unspecified injury of dorsal vein of right foot, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S95.202A	Unspecified injury of dorsal vein of left foot, initial encounter
S95.209A	Unspecified injury of dorsal vein of unspecified foot, initial encounter
S95.211A	Laceration of dorsal vein of right foot, initial encounter
S95.212A	Laceration of dorsal vein of left foot, initial encounter
S95.219A	Laceration of dorsal vein of unspecified foot, initial encounter
S95.291A	Other specified injury of dorsal vein of right foot, initial encounter
S95.292A	Other specified injury of dorsal vein of left foot, initial encounter
S95.299A	Other specified injury of dorsal vein of unspecified foot, initial encounter
S95.801A	Unspecified injury of other blood vessels at ankle and foot level, right leg, initial encounter
S95.802A	Unspecified injury of other blood vessels at ankle and foot level, left leg, initial encounter
S95.809A	Unspecified injury of other blood vessels at ankle and foot level, unspecified leg, initial encounter
S95.811A	Laceration of other blood vessels at ankle and foot level, right leg, initial encounter
S95.812A	Laceration of other blood vessels at ankle and foot level, left leg, initial encounter
S95.819A	Laceration of other blood vessels at ankle and foot level, unspecified leg, initial encounter
S95.891A	Other specified injury of other blood vessels at ankle and foot level, right leg, initial encounter
S95.892A	Other specified injury of other blood vessels at ankle and foot level, left leg, initial encounter
S95.899A	Other specified injury of other blood vessels at ankle and foot level, unspecified leg, initial encounter
S95.901A	Unspecified injury of unspecified blood vessel at ankle and foot level, right leg, initial encounter
S95.902A	Unspecified injury of unspecified blood vessel at ankle and foot level, left leg, initial encounter
S95.909A	Unspecified injury of unspecified blood vessel at ankle and foot level, unspecified leg, initial encounter
S95.911A	Laceration of unspecified blood vessel at ankle and foot level, right leg, initial encounter
S95.912A	Laceration of unspecified blood vessel at ankle and foot level, left leg, initial encounter
S95.919A	Laceration of unspecified blood vessel at ankle and foot level, unspecified leg, initial encounter
S95.991A	Other specified injury of unspecified blood vessel at ankle and foot level, right leg, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S95.992A	Other specified injury of unspecified blood vessel at ankle and foot level, left leg, initial encounter
S95.999A	Other specified injury of unspecified blood vessel at ankle and foot level, unspecified leg, initial encounter
S97.00XA	Crushing injury of unspecified ankle, initial encounter
S97.01XA	Crushing injury of right ankle, initial encounter
S97.02XA	Crushing injury of left ankle, initial encounter
S97.101A	Crushing injury of unspecified right toe(s), initial encounter
S97.102A	Crushing injury of unspecified left toe(s), initial encounter
S97.109A	Crushing injury of unspecified toe(s), initial encounter
S97.111A	Crushing injury of right great toe, initial encounter
S97.112A	Crushing injury of left great toe, initial encounter
S97.119A	Crushing injury of unspecified great toe, initial encounter
S97.121A	Crushing injury of right lesser toe(s), initial encounter
S97.122A	Crushing injury of left lesser toe(s), initial encounter
S97.129A	Crushing injury of unspecified lesser toe(s), initial encounter
S97.80XA	Crushing injury of unspecified foot, initial encounter
S97.81XA	Crushing injury of right foot, initial encounter
S97.82XA	Crushing injury of left foot, initial encounter
*S99.001A	*Unspecified physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.002A	*Unspecified physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.002B	*Unspecified physeal fracture of left calcaneus, initial encounter for open fracture
*S99.009A	*Unspecified physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.009B	*Unspecified physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.011B	*Salter-Harris Type I physeal fracture of right calcaneus, initial encounter for open fracture
*S99.011D	*Salter-Harris Type I physeal fracture of right calcaneus, subsequent encounter for fracture with routine healing
*S99.012A	*Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.012B	*Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for open fracture
*S99.019A	*Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.019B	*Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.021A	*Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.021B	*Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for open fracture
*S99.022A	*Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.022B	*Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for open fracture
*S99.029A	*Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.029B	*Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.031B	*Salter-Harris Type III physeal fracture of right calcaneus, initial encounter for open fracture
*S99.031D	*Salter-Harris Type III physeal fracture of right calcaneus, subsequent encounter for fracture with routine healing
*S99.032A	*Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.032B	*Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for open fracture
*S99.039A	*Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.039B	*Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.041A	*Salter-Harris Type IV physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.041B	*Salter-Harris Type IV physeal fracture of right calcaneus, initial encounter for open fracture
*S99.042A	*Salter-Harris Type IV physeal fracture of left calcaneus, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.042B	*Salter-Harris Type IV physeal fracture of left calcaneus, initial encounter for open fracture
*S99.049A	*Salter-Harris Type IV physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.049B	*Salter-Harris Type IV physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.091A	*Other physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.091B	*Other physeal fracture of right calcaneus, initial encounter for open fracture
*S99.092A	*Other physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.092B	*Other physeal fracture of left calcaneus, initial encounter for open fracture
*S99.099A	*Other physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.101A	*Unspecified physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.102A	*Unspecified physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.102B	*Unspecified physeal fracture of left metatarsal, initial encounter for open fracture
*S99.109A	*Unspecified physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.109B	*Unspecified physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.111A	*Salter-Harris Type I physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.111B	*Salter-Harris Type I physeal fracture of right metatarsal, initial encounter for open fracture
*S99.112A	*Salter-Harris Type I physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.112B	*Salter-Harris Type I physeal fracture of left metatarsal, initial encounter for open fracture
*S99.119A	*Salter-Harris Type I physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.119B	*Salter-Harris Type I physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.121A	*Salter-Harris Type II physeal fracture of right metatarsal, initial encounter for closed fracture



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Code	Description
*S99.121B	*Salter-Harris Type II physeal fracture of right metatarsal, initial encounter for open fracture
*S99.122A	*Salter-Harris Type II physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.122B	*Salter-Harris Type II physeal fracture of left metatarsal, initial encounter for open fracture
*S99.129A	*Salter-Harris Type II physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.129B	*Salter-Harris Type II physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.131A	*Salter-Harris Type III physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.131B	*Salter-Harris Type III physeal fracture of right metatarsal, initial encounter for open fracture
*S99.132A	*Salter-Harris Type III physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.132B	*Salter-Harris Type III physeal fracture of left metatarsal, initial encounter for open fracture
*S99.139A	*Salter-Harris Type III physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.139B	*Salter-Harris Type III physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.141A	*Salter-Harris Type IV physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.141B	*Salter-Harris Type IV physeal fracture of right metatarsal, initial encounter for open fracture
*S99.142A	*Salter-Harris Type IV physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.142B	*Salter-Harris Type IV physeal fracture of left metatarsal, initial encounter for open fracture
*S99.149A	*Salter-Harris Type IV physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.149B	*Salter-Harris Type IV physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.192A	*Other physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.192B	*Other physeal fracture of left metatarsal, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.199A	*Other physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.199B	*Other physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.201A	*Unspecified physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.201B	*Unspecified physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.202A	*Unspecified physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.202B	*Unspecified physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.209A	*Unspecified physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.209B	*Unspecified physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.211A	*Salter-Harris Type I physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.211B	*Salter-Harris Type I physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.212A	*Salter-Harris Type I physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.212B	*Salter-Harris Type I physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.219A	*Salter-Harris Type I physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.219B	*Salter-Harris Type I physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.221A	*Salter-Harris Type II physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.221B	*Salter-Harris Type II physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.222A	*Salter-Harris Type II physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.222B	*Salter-Harris Type II physeal fracture of phalanx of left toe, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.229A	*Salter-Harris Type II physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.229B	*Salter-Harris Type II physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.231A	*Salter-Harris Type III physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.231B	*Salter-Harris Type III physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.232A	*Salter-Harris Type III physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.232B	*Salter-Harris Type III physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.239A	*Salter-Harris Type III physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.239B	*Salter-Harris Type III physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.241A	*Salter-Harris Type IV physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.241B	*Salter-Harris Type IV physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.242A	*Salter-Harris Type IV physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.242B	*Salter-Harris Type IV physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.249A	*Salter-Harris Type IV physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.249B	*Salter-Harris Type IV physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.291A	*Other physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.291B	*Other physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.292A	*Other physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.292B	*Other physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.299A	*Other physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.299B	*Other physeal fracture of phalanx of unspecified toe, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
T14.8	Other injury of unspecified body region
T14.90	Injury, unspecified
T36.0X5A	Adverse effect of penicillins, initial encounter
T36.1X5A	Adverse effect of cephalosporins and other beta-lactam antibiotics, initial encounter
T36.2X5A	Adverse effect of chloramphenicol group, initial encounter
T36.3X5A	Adverse effect of macrolides, initial encounter
T36.4X5A	Adverse effect of tetracyclines, initial encounter
T36.6X5A	Adverse effect of rifampicins, initial encounter
T36.7X5A	Adverse effect of antifungal antibiotics, systemically used, initial encounter
T36.8X5A	Adverse effect of other systemic antibiotics, initial encounter
T36.95XA	Adverse effect of unspecified systemic antibiotic, initial encounter
T37.0X5A	Adverse effect of sulfonamides, initial encounter
T37.1X5A	Adverse effect of antimycobacterial drugs, initial encounter
T37.2X5A	Adverse effect of antimalarials and drugs acting on other blood protozoa, initial encounter
T37.3X5A	Adverse effect of other antiprotozoal drugs, initial encounter
T37.4X5A	Adverse effect of anthelmintics, initial encounter
T37.5X5A	Adverse effect of antiviral drugs, initial encounter
T37.8X5A	Adverse effect of other specified systemic anti-infectives and antiparasitics, initial encounter
T37.95XA	Adverse effect of unspecified systemic anti-infective and antiparasitic, initial encounter
T38.0X5A	Adverse effect of glucocorticoids and synthetic analogues, initial encounter
T38.1X5A	Adverse effect of thyroid hormones and substitutes, initial encounter
T38.2X5A	Adverse effect of antithyroid drugs, initial encounter
T38.4X5A	Adverse effect of oral contraceptives, initial encounter
T38.5X5A	Adverse effect of other estrogens and progestogens, initial encounter
T38.6X5A	Adverse effect of antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, initial encounter
T38.7X5A	Adverse effect of androgens and anabolic congeners, initial encounter
T38.805A	Adverse effect of unspecified hormones and synthetic substitutes, initial encounter
T38.815A	Adverse effect of anterior pituitary [adenohypophyseal] hormones, initial encounter
T38.895A	Adverse effect of other hormones and synthetic substitutes, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T38.905A	Adverse effect of unspecified hormone antagonists, initial encounter
T38.995A	Adverse effect of other hormone antagonists, initial encounter
T39.015A	Adverse effect of aspirin, initial encounter
T39.095A	Adverse effect of salicylates, initial encounter
T39.2X5A	Adverse effect of pyrazolone derivatives, initial encounter
T39.315A	Adverse effect of propionic acid derivatives, initial encounter
T39.395A	Adverse effect of other nonsteroidal anti-inflammatory drugs [NSAID], initial encounter
T39.4X5A	Adverse effect of antirheumatics, not elsewhere classified, initial encounter
T39.8X5A	Adverse effect of other nonopioid analgesics and antipyretics, not elsewhere classified, initial encounter
T39.95XA	Adverse effect of unspecified nonopioid analgesic, antipyretic and antirheumatic, initial encounter
T40.0X5A	Adverse effect of opium, initial encounter
T40.2X5A	Adverse effect of other opioids, initial encounter
T40.3X5A	Adverse effect of methadone, initial encounter
T40.4X5A	Adverse effect of other synthetic narcotics, initial encounter
T40.5X5A	Adverse effect of cocaine, initial encounter
T40.605A	Adverse effect of unspecified narcotics, initial encounter
T40.695A	Adverse effect of other narcotics, initial encounter
T40.7X5A	Adverse effect of cannabis (derivatives), initial encounter
T40.905A	Adverse effect of unspecified psychodysleptics [hallucinogens], initial encounter
T40.995A	Adverse effect of other psychodysleptics [hallucinogens], initial encounter
T42.0X5A	Adverse effect of hydantoin derivatives, initial encounter
T42.1X5A	Adverse effect of iminostilbenes, initial encounter
T42.2X5A	Adverse effect of succinimides and oxazolidinediones, initial encounter
T42.3X5A	Adverse effect of barbiturates, initial encounter
T42.4X5A	Adverse effect of benzodiazepines, initial encounter
T42.5X5A	Adverse effect of mixed antiepileptics, initial encounter
T42.6X5A	Adverse effect of other antiepileptic and sedative-hypnotic drugs, initial encounter
T42.75XA	Adverse effect of unspecified antiepileptic and sedative-hypnotic drugs, initial encounter



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Code	Description
T42.8X5A	Adverse effect of antiparkinsonism drugs and other central muscle-tone depressants, initial encounter
T43.015A	Adverse effect of tricyclic antidepressants, initial encounter
T43.025A	Adverse effect of tetracyclic antidepressants, initial encounter
T43.205A	Adverse effect of unspecified antidepressants, initial encounter
T43.295A	Adverse effect of other antidepressants, initial encounter
T43.3X5A	Adverse effect of phenothiazine antipsychotics and neuroleptics, initial encounter
T43.4X5A	Adverse effect of butyrophenone and thiothixene neuroleptics, initial encounter
T43.505A	Adverse effect of unspecified antipsychotics and neuroleptics, initial encounter
T43.595A	Adverse effect of other antipsychotics and neuroleptics, initial encounter
T43.605A	Adverse effect of unspecified psychostimulants, initial encounter
T43.625A	Adverse effect of amphetamines, initial encounter
T43.635A	Adverse effect of methylphenidate, initial encounter
T43.695A	Adverse effect of other psychostimulants, initial encounter
T43.8X5A	Adverse effect of other psychotropic drugs, initial encounter
T43.95XA	Adverse effect of unspecified psychotropic drug, initial encounter
T44.7X5A	Adverse effect of beta-adrenoreceptor antagonists, initial encounter
T45.1X5A	Adverse effect of antineoplastic and immunosuppressive drugs, initial encounter
T45.2X5A	Adverse effect of vitamins, initial encounter
T45.4X5A	Adverse effect of iron and its compounds, initial encounter
T45.511A	Poisoning by anticoagulants, accidental (unintentional), initial encounter
T45.512A	Poisoning by anticoagulants, intentional self-harm, initial encounter
T45.513A	Poisoning by anticoagulants, assault, initial encounter
T45.514A	Poisoning by anticoagulants, undetermined, initial encounter
T45.515A	Adverse effect of anticoagulants, initial encounter
T45.521A	Poisoning by antithrombotic drugs, accidental (unintentional), initial encounter
T45.522A	Poisoning by antithrombotic drugs, intentional self-harm, initial encounter
T45.523A	Poisoning by antithrombotic drugs, assault, initial encounter
T45.524A	Poisoning by antithrombotic drugs, undetermined, initial encounter
T45.525A	Adverse effect of antithrombotic drugs, initial encounter
T45.605A	Adverse effect of unspecified fibrinolysis-affecting drugs, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T45.615A	Adverse effect of thrombolytic drugs, initial encounter
T45.625A	Adverse effect of hemostatic drug, initial encounter
T45.695A	Adverse effect of other fibrinolysis-affecting drugs, initial encounter
T45.7X1A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, accidental (unintentional), initial encounter
T45.7X2A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, intentional self-harm, initial encounter
T45.7X3A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, assault, initial encounter
T45.7X4A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, undetermined, initial encounter
T45.7X5A	Adverse effect of anticoagulant antagonists, vitamin K and other coagulants, initial encounter
T45.8X1A	Poisoning by other primarily systemic and hematological agents, accidental (unintentional), initial encounter
T45.8X5A	Adverse effect of other primarily systemic and hematological agents, initial encounter
T45.95XA	Adverse effect of unspecified primarily systemic and hematological agent, initial encounter
T46.1X5A	Adverse effect of calcium-channel blockers, initial encounter
T46.2X5A	Adverse effect of other antidysrhythmic drugs, initial encounter
T46.3X5A	Adverse effect of coronary vasodilators, initial encounter
T46.4X5A	Adverse effect of angiotensin-converting-enzyme inhibitors, initial encounter
T46.5X5A	Adverse effect of other antihypertensive drugs, initial encounter
T46.6X5A	Adverse effect of antihyperlipidemic and antiarteriosclerotic drugs, initial encounter
T46.7X5A	Adverse effect of peripheral vasodilators, initial encounter
T46.8X5A	Adverse effect of antivaricose drugs, including sclerosing agents, initial encounter
T46.905A	Adverse effect of unspecified agents primarily affecting the cardiovascular system, initial encounter
T46.995A	Adverse effect of other agents primarily affecting the cardiovascular system, initial encounter
T48.0X5A	Adverse effect of oxytocic drugs, initial encounter
T48.1X5A	Adverse effect of skeletal muscle relaxants [neuromuscular blocking agents], initial encounter
T49.1X5A	Adverse effect of antipruritics, initial encounter



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Code	Description
T50.4X5A	Adverse effect of drugs affecting uric acid metabolism, initial encounter
T50.6X5A	Adverse effect of antidotes and chelating agents, initial encounter
T50.7X5A	Adverse effect of analeptics and opioid receptor antagonists, initial encounter
T50.905A	Adverse effect of unspecified drugs, medicaments and biological substances, initial encounter
T50.995A	Adverse effect of other drugs, medicaments and biological substances, initial encounter
T50.A15A	Adverse effect of pertussis vaccine, including combinations with a pertussis component, initial encounter
T50.B95A	Adverse effect of other viral vaccines, initial encounter
T50.Z15A	Adverse effect of immunoglobulin, initial encounter
T50.Z95A	Adverse effect of other vaccines and biological substances, initial encounter
T51.0X1A	Toxic effect of ethanol, accidental (unintentional), initial encounter
T51.0X2A	Toxic effect of ethanol, intentional self-harm, initial encounter
T51.0X3A	Toxic effect of ethanol, assault, initial encounter
T51.0X4A	Toxic effect of ethanol, undetermined, initial encounter
T63.001A	Toxic effect of unspecified snake venom, accidental (unintentional), initial encounter
T63.002A	Toxic effect of unspecified snake venom, intentional self-harm, initial encounter
T63.003A	Toxic effect of unspecified snake venom, assault, initial encounter
T63.004A	Toxic effect of unspecified snake venom, undetermined, initial encounter
T63.011A	Toxic effect of rattlesnake venom, accidental (unintentional), initial encounter
T63.012A	Toxic effect of rattlesnake venom, intentional self-harm, initial encounter
T63.013A	Toxic effect of rattlesnake venom, assault, initial encounter
T63.014A	Toxic effect of rattlesnake venom, undetermined, initial encounter
T63.021A	Toxic effect of coral snake venom, accidental (unintentional), initial encounter
T63.022A	Toxic effect of coral snake venom, intentional self-harm, initial encounter
T63.023A	Toxic effect of coral snake venom, assault, initial encounter
T63.024A	Toxic effect of coral snake venom, undetermined, initial encounter
T63.031A	Toxic effect of taipan venom, accidental (unintentional), initial encounter
T63.032A	Toxic effect of taipan venom, intentional self-harm, initial encounter
T63.033A	Toxic effect of taipan venom, assault, initial encounter
T63.034A	Toxic effect of taipan venom, undetermined, initial encounter



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Code	Description
T63.041A	Toxic effect of cobra venom, accidental (unintentional), initial encounter
T63.042A	Toxic effect of cobra venom, intentional self-harm, initial encounter
T63.043A	Toxic effect of cobra venom, assault, initial encounter
T63.044A	Toxic effect of cobra venom, undetermined, initial encounter
T63.061A	Toxic effect of venom of other North and South American snake, accidental (unintentional), initial encounter
T63.062A	Toxic effect of venom of other North and South American snake, intentional self-harm, initial encounter
T63.063A	Toxic effect of venom of other North and South American snake, assault, initial encounter
T63.064A	Toxic effect of venom of other North and South American snake, undetermined, initial encounter
T63.071A	Toxic effect of venom of other Australian snake, accidental (unintentional), initial encounter
T63.072A	Toxic effect of venom of other Australian snake, intentional self-harm, initial encounter
T63.073A	Toxic effect of venom of other Australian snake, assault, initial encounter
T63.074A	Toxic effect of venom of other Australian snake, undetermined, initial encounter
T63.081A	Toxic effect of venom of other African and Asian snake, accidental (unintentional), initial encounter
T63.082A	Toxic effect of venom of other African and Asian snake, intentional self-harm, initial encounter
T63.083A	Toxic effect of venom of other African and Asian snake, assault, initial encounter
T63.084A	Toxic effect of venom of other African and Asian snake, undetermined, initial encounter
T63.091A	Toxic effect of venom of other snake, accidental (unintentional), initial encounter
T63.092A	Toxic effect of venom of other snake, intentional self-harm, initial encounter
T63.093A	Toxic effect of venom of other snake, assault, initial encounter
T63.094A	Toxic effect of venom of other snake, undetermined, initial encounter
T63.111A	Toxic effect of venom of gila monster, accidental (unintentional), initial encounter
T63.112A	Toxic effect of venom of gila monster, intentional self-harm, initial encounter
T63.113A	Toxic effect of venom of gila monster, assault, initial encounter
T63.114A	Toxic effect of venom of gila monster, undetermined, initial encounter
T63.121A	Toxic effect of venom of other venomous lizard, accidental (unintentional), initial encounter
T63.122A	Toxic effect of venom of other venomous lizard, intentional self-harm, initial encounter
T63.123A	Toxic effect of venom of other venomous lizard, assault, initial encounter

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
T63.124A	Toxic effect of venom of other venomous lizard, undetermined, initial encounter
T63.191A	Toxic effect of venom of other reptiles, accidental (unintentional), initial encounter
T63.192A	Toxic effect of venom of other reptiles, intentional self-harm, initial encounter
T63.193A	Toxic effect of venom of other reptiles, assault, initial encounter
T63.194A	Toxic effect of venom of other reptiles, undetermined, initial encounter
T63.2X1A	Toxic effect of venom of scorpion, accidental (unintentional), initial encounter
T63.2X2A	Toxic effect of venom of scorpion, intentional self-harm, initial encounter
T63.2X3A	Toxic effect of venom of scorpion, assault, initial encounter
T63.2X4A	Toxic effect of venom of scorpion, undetermined, initial encounter
T63.301A	Toxic effect of unspecified spider venom, accidental (unintentional), initial encounter
T63.302A	Toxic effect of unspecified spider venom, intentional self-harm, initial encounter
T63.303A	Toxic effect of unspecified spider venom, assault, initial encounter
T63.304A	Toxic effect of unspecified spider venom, undetermined, initial encounter
T63.311A	Toxic effect of venom of black widow spider, accidental (unintentional), initial encounter
T63.312A	Toxic effect of venom of black widow spider, intentional self-harm, initial encounter
T63.313A	Toxic effect of venom of black widow spider, assault, initial encounter
T63.314A	Toxic effect of venom of black widow spider, undetermined, initial encounter
T63.321A	Toxic effect of venom of tarantula, accidental (unintentional), initial encounter
T63.322A	Toxic effect of venom of tarantula, intentional self-harm, initial encounter
T63.323A	Toxic effect of venom of tarantula, assault, initial encounter
T63.324A	Toxic effect of venom of tarantula, undetermined, initial encounter
T63.331A	Toxic effect of venom of brown recluse spider, accidental (unintentional), initial encounter
T63.332A	Toxic effect of venom of brown recluse spider, intentional self-harm, initial encounter
T63.333A	Toxic effect of venom of brown recluse spider, assault, initial encounter
T63.334A	Toxic effect of venom of brown recluse spider, undetermined, initial encounter
T63.391A	Toxic effect of venom of other spider, accidental (unintentional), initial encounter
T63.392A	Toxic effect of venom of other spider, intentional self-harm, initial encounter
T63.393A	Toxic effect of venom of other spider, assault, initial encounter
T63.394A	Toxic effect of venom of other spider, undetermined, initial encounter
T63.411A	Toxic effect of venom of centipedes and venomous millipedes, accidental (unintentional), initial encounter

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Code	Description
T63.412A	Toxic effect of venom of centipedes and venomous millipedes, intentional self-harm, initial encounter
T63.413A	Toxic effect of venom of centipedes and venomous millipedes, assault, initial encounter
T63.414A	Toxic effect of venom of centipedes and venomous millipedes, undetermined, initial encounter
T63.421A	Toxic effect of venom of ants, accidental (unintentional), initial encounter
T63.422A	Toxic effect of venom of ants, intentional self-harm, initial encounter
T63.423A	Toxic effect of venom of ants, assault, initial encounter
T63.424A	Toxic effect of venom of ants, undetermined, initial encounter
T63.431A	Toxic effect of venom of caterpillars, accidental (unintentional), initial encounter
T63.432A	Toxic effect of venom of caterpillars, intentional self-harm, initial encounter
T63.433A	Toxic effect of venom of caterpillars, assault, initial encounter
T63.434A	Toxic effect of venom of caterpillars, undetermined, initial encounter
T63.441A	Toxic effect of venom of bees, accidental (unintentional), initial encounter
T63.442A	Toxic effect of venom of bees, intentional self-harm, initial encounter
T63.443A	Toxic effect of venom of bees, assault, initial encounter
T63.444A	Toxic effect of venom of bees, undetermined, initial encounter
T63.451A	Toxic effect of venom of hornets, accidental (unintentional), initial encounter
T63.452A	Toxic effect of venom of hornets, intentional self-harm, initial encounter
T63.453A	Toxic effect of venom of hornets, assault, initial encounter
T63.454A	Toxic effect of venom of hornets, undetermined, initial encounter
T63.461A	Toxic effect of venom of wasps, accidental (unintentional), initial encounter
T63.462A	Toxic effect of venom of wasps, intentional self-harm, initial encounter
T63.463A	Toxic effect of venom of wasps, assault, initial encounter
T63.464A	Toxic effect of venom of wasps, undetermined, initial encounter
T63.481A	Toxic effect of venom of other arthropod, accidental (unintentional), initial encounter
T63.482A	Toxic effect of venom of other arthropod, intentional self-harm, initial encounter
T63.483A	Toxic effect of venom of other arthropod, assault, initial encounter
T63.484A	Toxic effect of venom of other arthropod, undetermined, initial encounter
T63.511A	Toxic effect of contact with stingray, accidental (unintentional), initial encounter
T63.512A	Toxic effect of contact with stingray, intentional self-harm, initial encounter



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Code	Description
T63.513A	Toxic effect of contact with stingray, assault, initial encounter
T63.514A	Toxic effect of contact with stingray, undetermined, initial encounter
T63.591A	Toxic effect of contact with other venomous fish, accidental (unintentional), initial encounter
T63.592A	Toxic effect of contact with other venomous fish, intentional self-harm, initial encounter
T63.593A	Toxic effect of contact with other venomous fish, assault, initial encounter
T63.594A	Toxic effect of contact with other venomous fish, undetermined, initial encounter
T63.611A	Toxic effect of contact with Portugese Man-o-war, accidental (unintentional), initial encounter
T63.612A	Toxic effect of contact with Portugese Man-o-war, intentional self-harm, initial encounter
T63.613A	Toxic effect of contact with Portugese Man-o-war, assault, initial encounter
T63.614A	Toxic effect of contact with Portugese Man-o-war, undetermined, initial encounter
T63.621A	Toxic effect of contact with other jellyfish, accidental (unintentional), initial encounter
T63.622A	Toxic effect of contact with other jellyfish, intentional self-harm, initial encounter
T63.623A	Toxic effect of contact with other jellyfish, assault, initial encounter
T63.624A	Toxic effect of contact with other jellyfish, undetermined, initial encounter
T63.631A	Toxic effect of contact with sea anemone, accidental (unintentional), initial encounter
T63.632A	Toxic effect of contact with sea anemone, intentional self-harm, initial encounter
T63.633A	Toxic effect of contact with sea anemone, assault, initial encounter
T63.634A	Toxic effect of contact with sea anemone, undetermined, initial encounter
T63.691A	Toxic effect of contact with other venomous marine animals, accidental (unintentional), initial encounter
T63.692A	Toxic effect of contact with other venomous marine animals, intentional self-harm, initial encounter
T63.693A	Toxic effect of contact with other venomous marine animals, assault, initial encounter
T63.694A	Toxic effect of contact with other venomous marine animals, undetermined, initial encounter
T63.711A	Toxic effect of contact with venomous marine plant, accidental (unintentional), initial encounter
T63.712A	Toxic effect of contact with venomous marine plant, intentional self-harm, initial encounter
T63.713A	Toxic effect of contact with venomous marine plant, assault, initial encounter
T63.714A	Toxic effect of contact with venomous marine plant, undetermined, initial encounter



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Code	Description
T63.791A	Toxic effect of contact with other venomous plant, accidental (unintentional), initial encounter
T63.792A	Toxic effect of contact with other venomous plant, intentional self-harm, initial encounter
T63.793A	Toxic effect of contact with other venomous plant, assault, initial encounter
T63.794A	Toxic effect of contact with other venomous plant, undetermined, initial encounter
T63.811A	Toxic effect of contact with venomous frog, accidental (unintentional), initial encounter
T63.812A	Toxic effect of contact with venomous frog, intentional self-harm, initial encounter
T63.813A	Toxic effect of contact with venomous frog, assault, initial encounter
T63.814A	Toxic effect of contact with venomous frog, undetermined, initial encounter
T63.821A	Toxic effect of contact with venomous toad, accidental (unintentional), initial encounter
T63.822A	Toxic effect of contact with venomous toad, intentional self-harm, initial encounter
T63.823A	Toxic effect of contact with venomous toad, assault, initial encounter
T63.824A	Toxic effect of contact with venomous toad, undetermined, initial encounter
T63.831A	Toxic effect of contact with other venomous amphibian, accidental (unintentional), initial encounter
T63.832A	Toxic effect of contact with other venomous amphibian, intentional self-harm, initial encounter
T63.833A	Toxic effect of contact with other venomous amphibian, assault, initial encounter
T63.834A	Toxic effect of contact with other venomous amphibian, undetermined, initial encounter
T63.891A	Toxic effect of contact with other venomous animals, accidental (unintentional), initial encounter
T63.892A	Toxic effect of contact with other venomous animals, intentional self-harm, initial encounter
T63.893A	Toxic effect of contact with other venomous animals, assault, initial encounter
T63.894A	Toxic effect of contact with other venomous animals, undetermined, initial encounter
T63.91XA	Toxic effect of contact with unspecified venomous animal, accidental (unintentional), initial encounter
T63.92XA	Toxic effect of contact with unspecified venomous animal, intentional self-harm, initial encounter
T63.93XA	Toxic effect of contact with unspecified venomous animal, assault, initial encounter
T63.94XA	Toxic effect of contact with unspecified venomous animal, undetermined, initial encounter
T78.41XA	Arthus phenomenon, initial encounter
T79.2XXA	Traumatic secondary and recurrent hemorrhage and seroma, initial encounter



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Code	Description
T80.1XXA	Vascular complications following infusion, transfusion and therapeutic injection, initial encounter
T82.817A	Embolism due to cardiac prosthetic devices, implants and grafts, initial encounter
T82.818A	Embolism due to vascular prosthetic devices, implants and grafts, initial encounter
T82.827A	Fibrosis due to cardiac prosthetic devices, implants and grafts, initial encounter
T82.828A	Fibrosis due to vascular prosthetic devices, implants and grafts, initial encounter
T82.837A	Hemorrhage due to cardiac prosthetic devices, implants and grafts, initial encounter
T82.838A	Hemorrhage due to vascular prosthetic devices, implants and grafts, initial encounter
*T82.855A	*Stenosis of coronary artery stent, initial encounter
*T82.855D	*Stenosis of coronary artery stent, subsequent encounter
*T82.855S	*Stenosis of coronary artery stent, sequela
*T82.856A	*Stenosis of peripheral vascular stent, initial encounter
*T82.856D	*Stenosis of peripheral vascular stent, subsequent encounter
*T82.856S	*Stenosis of peripheral vascular stent, sequela
T82.857A	Stenosis of other cardiac prosthetic devices, implants and grafts, initial encounter
T82.858A	Stenosis of other vascular prosthetic devices, implants and grafts, initial encounter
T82.867A	Thrombosis due to cardiac prosthetic devices, implants and grafts, initial encounter
T82.868A	Thrombosis due to vascular prosthetic devices, implants and grafts, initial encounter
T82.897A	Other specified complication of cardiac prosthetic devices, implants and grafts, initial encounter
T82.898A	Other specified complication of vascular prosthetic devices, implants and grafts, initial encounter
T82.9XXA	Unspecified complication of cardiac and vascular prosthetic device, implant and graft, initial encounter
T83.81XA	Embolism due to genitourinary prosthetic devices, implants and grafts, initial encounter
T83.82XA	Fibrosis due to genitourinary prosthetic devices, implants and grafts, initial encounter
T83.83XA	Hemorrhage due to genitourinary prosthetic devices, implants and grafts, initial encounter
T83.85XA	Stenosis due to genitourinary prosthetic devices, implants and grafts, initial encounter
T83.86XA	Thrombosis due to genitourinary prosthetic devices, implants and grafts, initial encounter
T83.89XA	Other specified complication of genitourinary prosthetic devices, implants and grafts, initial encounter



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Code	Description
T83.9XXA	Unspecified complication of genitourinary prosthetic device, implant and graft, initial encounter
T84.81XA	Embolism due to internal orthopedic prosthetic devices, implants and grafts, initial encounter
T84.82XA	Fibrosis due to internal orthopedic prosthetic devices, implants and grafts, initial encounter
T84.83XA	Hemorrhage due to internal orthopedic prosthetic devices, implants and grafts, initial encounter
T84.85XA	Stenosis due to internal orthopedic prosthetic devices, implants and grafts, initial encounter
T84.86XA	Thrombosis due to internal orthopedic prosthetic devices, implants and grafts, initial encounter
T84.89XA	Other specified complication of internal orthopedic prosthetic devices, implants and grafts, initial encounter
T84.9XXA	Unspecified complication of internal orthopedic prosthetic device, implant and graft, initial encounter
*T85.810A	*Embolism due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.810D	*Embolism due to nervous system prosthetic devices, implants and grafts, subsequent encounter
*T85.810S	*Embolism due to nervous system prosthetic devices, implants and grafts, sequela
*T85.818A	*Embolism due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.818D	*Embolism due to other internal prosthetic devices, implants and grafts, subsequent encounter
*T85.818S	*Embolism due to other internal prosthetic devices, implants and grafts, sequela
*T85.830A	*Hemorrhage due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.838A	*Hemorrhage due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.840A	*Pain due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.848A	*Pain due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.850A	*Stenosis due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.858A	*Stenosis due to other internal prosthetic devices, implants and grafts, initial encounter



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Code	Description
*T85.860A	*Thrombosis due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.860D	*Thrombosis due to nervous system prosthetic devices, implants and grafts, subsequent encounter
*T85.860S	*Thrombosis due to nervous system prosthetic devices, implants and grafts, sequela
*T85.868A	*Thrombosis due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.868D	*Thrombosis due to other internal prosthetic devices, implants and grafts, subsequent encounter
*T85.868S	*Thrombosis due to other internal prosthetic devices, implants and grafts, sequela
T85.9XXA	Unspecified complication of internal prosthetic device, implant and graft, initial encounter
T86.848	Other complications of corneal transplant
T86.849	Unspecified complication of corneal transplant
T88.52XA	Failed moderate sedation during procedure, initial encounter
*V47.0XXA	*Car driver injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.1XXA	*Car passenger injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.3XXA	*Unspecified car occupant injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.5XXA	*Car driver injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.6XXA	*Car passenger injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.9XXA	*Unspecified car occupant injured in collision with fixed or stationary object in traffic accident, initial encounter
*Z05.0	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1	*Observation and evaluation of newborn for suspected infectious condition ruled out
*Z05.2	*Observation and evaluation of newborn for suspected neurological condition ruled out
*Z05.3	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41	*Observation and evaluation of newborn for suspected genetic condition ruled out



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Code	Description
*Z05.42	*Observation and evaluation of newborn for suspected metabolic condition ruled out
*Z05.43	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
*Z05.6	*Observation and evaluation of newborn for suspected genitourinary condition ruled out
*Z05.71	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
*Z05.73	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9	*Observation and evaluation of newborn for unspecified suspected condition ruled out
*Z19.1	*Hormone sensitive malignancy status
*Z19.2	*Hormone resistant malignancy status
Z51.81	Encounter for therapeutic drug level monitoring
Z51.89	Encounter for other specified aftercare
*Z53.31	*Laparoscopic surgical procedure converted to open procedure
*Z53.32	*Thoracoscopic surgical procedure converted to open procedure
*Z53.33	*Arthroscopic surgical procedure converted to open procedure
*Z53.39	*Other specified procedure converted to open procedure
Z79.01	Long term (current) use of anticoagulants
*Z84.82	*Family history of sudden infant death syndrome
Z86.2	Personal history of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism

Indications

1. The PTT is most commonly used to quantitate the effect of therapeutic unfractionated heparin and to regulate its dosing. Except during transitions between heparin and



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warfarin therapy, in general both the PTT and PT are not necessary together to assess the effect of anticoagulation therapy. PT and PTT must be justified separately.

2. A PTT may be used to assess patients with signs or symptoms of hemorrhage or thrombosis. For example:
 - Abnormal bleeding, hemorrhage or hematoma petechiae or other signs of thrombocytopenia that could be due to Disseminated Intravascular Coagulation
 - Swollen extremity with or without prior trauma
3. A PTT may be useful in evaluating patients who have a history of a condition known to be associated with the risk of hemorrhage or thrombosis that is related to the intrinsic coagulation pathway. Such abnormalities may be genetic or acquired. For example:
 - Dysfibrinogenemia
 - Afibrinogenemia (complete)
 - Acute or chronic liver dysfunction or failure, including Wilson's disease
 - Hemophilia
 - Liver disease and failure
 - Infectious processes
 - Bleeding disorders
 - Disseminated intravascular coagulation
 - Lupus erythematosus or other conditions associated with circulating inhibitors, e.g., factor VIII Inhibitor, lupus-like anticoagulant
 - Sepsis
 - Von Willebrand's disease
 - Arterial and venous thrombosis, including the evaluation of hypercoagulable states
 - Clinical conditions associated with nephrosis or renal failure
 - Other acquired and congenital coagulopathies as well as thrombotic states
4. A PTT may be used to assess the risk of thrombosis or hemorrhage in patients who are going to have a medical intervention known to be associated with increased risk of bleeding or thrombosis. An example is as follows: evaluation prior to invasive procedures or operations of patients with personal or family history of bleeding or who are on heparin therapy

Limitations

1. The PTT is not useful in monitoring the effects of warfarin on a patient's coagulation routinely. However, a PTT may be ordered on a patient being treated with warfarin as heparin therapy is being discontinued. A PTT may also be indicated when the PT is markedly prolonged due to warfarin toxicity.
2. The need to repeat this test is determined by changes in the underlying medical condition and/or the dosing of heparin.



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3. Testing prior to any medical intervention associated with a risk of bleeding and thrombosis (other than thrombolytic therapy) will generally be considered medically necessary only where there are signs or symptoms of a bleeding or thrombotic abnormality or a personal history of bleeding, thrombosis or a condition associated with a coagulopathy. Hospital/clinic-specific policies, protocols, etc., in and of themselves, cannot alone justify coverage.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM sections above.

Sources of Information

CMD Clinical Laboratory Workgroup

1999 CPT Physicians' Current Procedural Terminology, American Medical Association

Blue Book of Diagnostic Tests; PL Liu; Saunders

Wintrobe's Clinical Hematology; 9th Ed, 1993, Lea and Febiger

Harrison's Principles of Internal Medicine, 14th Ed., McGraw Hill, 1997.

Disorders of Hemostasis, Ratnoff, Oscar D. & Forbes, Charles D., W.B. Saunders Co., 1996

Hemostasis and Thrombosis: Basic Principles and Clinical Practice. Colman, et al editors, J.B. Lippincott, 3rd Edition, 1994, pp 896-898 and 1045-1046.

"College of American Pathologists Conference XXXI on Laboratory Monitoring of Anticoagulant Therapy," Arch Pathol Lab Med, Vol 122, Sep 1998, P 782-798.

Lupus Anticoagulants/Antiphospholipid-protein Antibodies: The Great Imposters, Triplett DA, Lupus 1996:5:431



190.17 - Prothrombin Time (PT)

Other Names/Abbreviations

PT

Description

Basic plasma coagulation function is readily assessed with a few simple laboratory tests: the Partial Thromboplastin Time (PTT), Prothrombin Time (PT), Thrombin Time (TT), or a quantitative fibrinogen determination. The PT test is one in-vitro laboratory test used to assess coagulation. While the PTT assesses the intrinsic limb of the coagulation system, the PT assesses the extrinsic or tissue factor dependent pathway. Both tests also evaluate the common coagulation pathway involving all the reactions that occur after the activation of factor X. Extrinsic pathway factors are produced in the liver and their production is dependent on adequate vitamin K activity. Deficiencies of factors may be related to decreased production or increased consumption of coagulation factors. The PT/INR is most commonly used to measure the effect of warfarin and regulate its dosing. Warfarin blocks the effect of vitamin K on hepatic production of extrinsic pathway factors.

A PT is expressed in seconds and/or as an international normalized ratio (INR). The INR is the PT ratio that would result if the WHO reference thromboplastin was used in performing the test.

Current medical information does not clarify the role of laboratory PT testing in patients who are self monitoring. Therefore, the indications for testing apply regardless of whether or not the patient is also PT self-testing.

HCPCS Codes (Alphanumeric, CPT[®] AMA)

Code	Description
85610	Prothrombin Time

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A01.00	Typhoid fever, unspecified
A01.01	Typhoid meningitis
A01.02	Typhoid fever with heart involvement
A01.03	Typhoid pneumonia
A01.04	Typhoid arthritis

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Code	Description
A01.05	Typhoid osteomyelitis
A01.09	Typhoid fever with other complications
A01.1	Paratyphoid fever A
A01.2	Paratyphoid fever B
A01.3	Paratyphoid fever C
A01.4	Paratyphoid fever, unspecified
A02.0	Salmonella enteritis
A02.1	Salmonella sepsis
A02.20	Localized salmonella infection, unspecified
A02.21	Salmonella meningitis
A02.22	Salmonella pneumonia
A02.23	Salmonella arthritis
A02.24	Salmonella osteomyelitis
A02.25	Salmonella pyelonephritis
A02.29	Salmonella with other localized infection
A02.8	Other specified salmonella infections
A02.9	Salmonella infection, unspecified
A18.84	Tuberculosis of heart
A41.9	Sepsis, unspecified organism
A91	Dengue hemorrhagic fever
A92.0	Chikungunya virus disease
A95.0	Sylvatic yellow fever
A95.1	Urban yellow fever
A95.9	Yellow fever, unspecified
A96.0	Junin hemorrhagic fever
A96.1	Machupo hemorrhagic fever
A96.8	Other arenaviral hemorrhagic fevers
A96.9	Arenaviral hemorrhagic fever, unspecified
A98.0	Crimean-Congo hemorrhagic fever
A98.1	Omsk hemorrhagic fever

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Code	Description
A98.2	Kyasanur Forest disease
A98.5	Hemorrhagic fever with renal syndrome
A98.8	Other specified viral hemorrhagic fevers
A99	Unspecified viral hemorrhagic fever
B15.0	Hepatitis A with hepatic coma
B15.9	Hepatitis A without hepatic coma
B16.0	Acute hepatitis B with delta-agent with hepatic coma
B16.1	Acute hepatitis B with delta-agent without hepatic coma
B16.2	Acute hepatitis B without delta-agent with hepatic coma
B16.9	Acute hepatitis B without delta-agent and without hepatic coma
B17.0	Acute delta-(super) infection of hepatitis B carrier
B17.10	Acute hepatitis C without hepatic coma
B17.11	Acute hepatitis C with hepatic coma
B17.2	Acute hepatitis E
B17.8	Other specified acute viral hepatitis
B17.9	Acute viral hepatitis, unspecified
B18.0	Chronic viral hepatitis B with delta-agent
B18.1	Chronic viral hepatitis B without delta-agent
B18.2	Chronic viral hepatitis C
B18.8	Other chronic viral hepatitis
B18.9	Chronic viral hepatitis, unspecified
B19.0	Unspecified viral hepatitis with hepatic coma
B19.10	Unspecified viral hepatitis B without hepatic coma
B19.11	Unspecified viral hepatitis B with hepatic coma
B19.20	Unspecified viral hepatitis C without hepatic coma
B19.21	Unspecified viral hepatitis C with hepatic coma
B19.9	Unspecified viral hepatitis without hepatic coma
B20	Human immunodeficiency virus [HIV] disease
B25.1	Cytomegaloviral hepatitis
B25.2	Cytomegaloviral pancreatitis

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Code	Description
B27.00	Gammaherpesviral mononucleosis without complication
B27.01	Gammaherpesviral mononucleosis with polyneuropathy
B27.02	Gammaherpesviral mononucleosis with meningitis
B27.09	Gammaherpesviral mononucleosis with other complications
B27.10	Cytomegaloviral mononucleosis without complications
B27.11	Cytomegaloviral mononucleosis with polyneuropathy
B27.12	Cytomegaloviral mononucleosis with meningitis
B27.19	Cytomegaloviral mononucleosis with other complication
B27.80	Other infectious mononucleosis without complication
B27.81	Other infectious mononucleosis with polyneuropathy
B27.82	Other infectious mononucleosis with meningitis
B27.89	Other infectious mononucleosis with other complication
B27.90	Infectious mononucleosis, unspecified without complication
B27.91	Infectious mononucleosis, unspecified with polyneuropathy
B27.92	Infectious mononucleosis, unspecified with meningitis
B27.99	Infectious mononucleosis, unspecified with other complication
B50.8	Other severe and complicated Plasmodium falciparum malaria
B52.0	Plasmodium malariae malaria with nephropathy
B65.0	Schistosomiasis due to Schistosoma haematobium [urinary schistosomiasis]
B66.1	Clonorchiasis
B66.3	Fascioliasis
B75	Trichinellosis
B83.4	Internal hirudiniasis
B88.3	External hirudiniasis
C17.0	Malignant neoplasm of duodenum
C17.1	Malignant neoplasm of jejunum
C17.2	Malignant neoplasm of ileum
C17.3	Meckel's diverticulum, malignant
C17.8	Malignant neoplasm of overlapping sites of small intestine
C17.9	Malignant neoplasm of small intestine, unspecified

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Code	Description
C22.0	Liver cell carcinoma
C22.1	Intrahepatic bile duct carcinoma
C22.2	Hepatoblastoma
C22.3	Angiosarcoma of liver
C22.4	Other sarcomas of liver
C22.7	Other specified carcinomas of liver
C22.8	Malignant neoplasm of liver, primary, unspecified as to type
C22.9	Malignant neoplasm of liver, not specified as primary or secondary
C23	Malignant neoplasm of gallbladder
C24.0	Malignant neoplasm of extrahepatic bile duct
C24.1	Malignant neoplasm of ampulla of Vater
C24.8	Malignant neoplasm of overlapping sites of biliary tract
C24.9	Malignant neoplasm of biliary tract, unspecified
C25.0	Malignant neoplasm of head of pancreas
C25.1	Malignant neoplasm of body of pancreas
C25.2	Malignant neoplasm of tail of pancreas
C25.3	Malignant neoplasm of pancreatic duct
C25.4	Malignant neoplasm of endocrine pancreas
C25.7	Malignant neoplasm of other parts of pancreas
C25.8	Malignant neoplasm of overlapping sites of pancreas
C25.9	Malignant neoplasm of pancreas, unspecified
C64.1	Malignant neoplasm of right kidney, except renal pelvis
C64.2	Malignant neoplasm of left kidney, except renal pelvis
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis
C65.1	Malignant neoplasm of right renal pelvis
C65.2	Malignant neoplasm of left renal pelvis
C65.9	Malignant neoplasm of unspecified renal pelvis
C66.1	Malignant neoplasm of right ureter
C66.2	Malignant neoplasm of left ureter
C66.9	Malignant neoplasm of unspecified ureter

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Code	Description
C67.0	Malignant neoplasm of trigone of bladder
C67.1	Malignant neoplasm of dome of bladder
C67.2	Malignant neoplasm of lateral wall of bladder
C67.3	Malignant neoplasm of anterior wall of bladder
C67.4	Malignant neoplasm of posterior wall of bladder
C67.5	Malignant neoplasm of bladder neck
C67.6	Malignant neoplasm of ureteric orifice
C67.7	Malignant neoplasm of urachus
C67.8	Malignant neoplasm of overlapping sites of bladder
C67.9	Malignant neoplasm of bladder, unspecified
C68.0	Malignant neoplasm of urethra
C68.1	Malignant neoplasm of paraurethral glands
C68.8	Malignant neoplasm of overlapping sites of urinary organs
C68.9	Malignant neoplasm of urinary organ, unspecified
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct
C79.00	Secondary malignant neoplasm of unspecified kidney and renal pelvis
C79.01	Secondary malignant neoplasm of right kidney and renal pelvis
C79.02	Secondary malignant neoplasm of left kidney and renal pelvis
C79.10	Secondary malignant neoplasm of unspecified urinary organs
C79.11	Secondary malignant neoplasm of bladder
C79.19	Secondary malignant neoplasm of other urinary organs
C7A.00	Malignant carcinoid tumor of unspecified site
C7A.090	Malignant carcinoid tumor of the bronchus and lung
C7A.091	Malignant carcinoid tumor of the thymus
C7A.092	Malignant carcinoid tumor of the stomach
C7A.093	Malignant carcinoid tumor of the kidney
C7A.094	Malignant carcinoid tumor of the foregut, unspecified
C7A.095	Malignant carcinoid tumor of the midgut, unspecified
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified
C7A.098	Malignant carcinoid tumors of other sites

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Code	Description
C7B.00	Secondary carcinoid tumors, unspecified site
C7B.01	Secondary carcinoid tumors of distant lymph nodes
C7B.02	Secondary carcinoid tumors of liver
C7B.03	Secondary carcinoid tumors of bone
C7B.04	Secondary carcinoid tumors of peritoneum
C7B.09	Secondary carcinoid tumors of other sites
C7B.1	Secondary Merkel cell carcinoma
C7B.8	Other secondary neuroendocrine tumors
C82.00	Follicular lymphoma grade I, unspecified site
C82.01	Follicular lymphoma grade I, lymph nodes of head, face, and neck
C82.02	Follicular lymphoma grade I, intrathoracic lymph nodes
C82.03	Follicular lymphoma grade I, intra-abdominal lymph nodes
C82.04	Follicular lymphoma grade I, lymph nodes of axilla and upper limb
C82.05	Follicular lymphoma grade I, lymph nodes of inguinal region and lower limb
C82.06	Follicular lymphoma grade I, intrapelvic lymph nodes
C82.07	Follicular lymphoma grade I, spleen
C82.08	Follicular lymphoma grade I, lymph nodes of multiple sites
C82.09	Follicular lymphoma grade I, extranodal and solid organ sites
C82.10	Follicular lymphoma grade II, unspecified site
C82.11	Follicular lymphoma grade II, lymph nodes of head, face, and neck
C82.12	Follicular lymphoma grade II, intrathoracic lymph nodes
C82.13	Follicular lymphoma grade II, intra-abdominal lymph nodes
C82.14	Follicular lymphoma grade II, lymph nodes of axilla and upper limb
C82.15	Follicular lymphoma grade II, lymph nodes of inguinal region and lower limb
C82.16	Follicular lymphoma grade II, intrapelvic lymph nodes
C82.17	Follicular lymphoma grade II, spleen
C82.18	Follicular lymphoma grade II, lymph nodes of multiple sites
C82.19	Follicular lymphoma grade II, extranodal and solid organ sites
C82.20	Follicular lymphoma grade III, unspecified, unspecified site
C82.21	Follicular lymphoma grade III, unspecified, lymph nodes of head, face, and neck

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Code	Description
C82.22	Follicular lymphoma grade III, unspecified, intrathoracic lymph nodes
C82.23	Follicular lymphoma grade III, unspecified, intra-abdominal lymph nodes
C82.24	Follicular lymphoma grade III, unspecified, lymph nodes of axilla and upper limb
C82.25	Follicular lymphoma grade III, unspecified, lymph nodes of inguinal region and lower limb
C82.26	Follicular lymphoma grade III, unspecified, intrapelvic lymph nodes
C82.27	Follicular lymphoma grade III, unspecified, spleen
C82.28	Follicular lymphoma grade III, unspecified, lymph nodes of multiple sites
C82.29	Follicular lymphoma grade III, unspecified, extranodal and solid organ sites
C82.30	Follicular lymphoma grade IIIa, unspecified site
C82.31	Follicular lymphoma grade IIIa, lymph nodes of head, face, and neck
C82.32	Follicular lymphoma grade IIIa, intrathoracic lymph nodes
C82.33	Follicular lymphoma grade IIIa, intra-abdominal lymph nodes
C82.34	Follicular lymphoma grade IIIa, lymph nodes of axilla and upper limb
C82.35	Follicular lymphoma grade IIIa, lymph nodes of inguinal region and lower limb
C82.36	Follicular lymphoma grade IIIa, intrapelvic lymph nodes
C82.37	Follicular lymphoma grade IIIa, spleen
C82.38	Follicular lymphoma grade IIIa, lymph nodes of multiple sites
C82.39	Follicular lymphoma grade IIIa, extranodal and solid organ sites
C82.40	Follicular lymphoma grade IIIb, unspecified site
C82.41	Follicular lymphoma grade IIIb, lymph nodes of head, face, and neck
C82.42	Follicular lymphoma grade IIIb, intrathoracic lymph nodes
C82.43	Follicular lymphoma grade IIIb, intra-abdominal lymph nodes
C82.44	Follicular lymphoma grade IIIb, lymph nodes of axilla and upper limb
C82.45	Follicular lymphoma grade IIIb, lymph nodes of inguinal region and lower limb
C82.46	Follicular lymphoma grade IIIb, intrapelvic lymph nodes
C82.47	Follicular lymphoma grade IIIb, spleen
C82.48	Follicular lymphoma grade IIIb, lymph nodes of multiple sites
C82.49	Follicular lymphoma grade IIIb, extranodal and solid organ sites
C82.50	Diffuse follicle center lymphoma, unspecified site
C82.51	Diffuse follicle center lymphoma, lymph nodes of head, face, and neck

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Code	Description
C82.52	Diffuse follicle center lymphoma, intrathoracic lymph nodes
C82.53	Diffuse follicle center lymphoma, intra-abdominal lymph nodes
C82.54	Diffuse follicle center lymphoma, lymph nodes of axilla and upper limb
C82.55	Diffuse follicle center lymphoma, lymph nodes of inguinal region and lower limb
C82.56	Diffuse follicle center lymphoma, intrapelvic lymph nodes
C82.57	Diffuse follicle center lymphoma, spleen
C82.58	Diffuse follicle center lymphoma, lymph nodes of multiple sites
C82.59	Diffuse follicle center lymphoma, extranodal and solid organ sites
C82.60	Cutaneous follicle center lymphoma, unspecified site
C82.61	Cutaneous follicle center lymphoma, lymph nodes of head, face, and neck
C82.62	Cutaneous follicle center lymphoma, intrathoracic lymph nodes
C82.63	Cutaneous follicle center lymphoma, intra-abdominal lymph nodes
C82.64	Cutaneous follicle center lymphoma, lymph nodes of axilla and upper limb
C82.65	Cutaneous follicle center lymphoma, lymph nodes of inguinal region and lower limb
C82.66	Cutaneous follicle center lymphoma, intrapelvic lymph nodes
C82.67	Cutaneous follicle center lymphoma, spleen
C82.68	Cutaneous follicle center lymphoma, lymph nodes of multiple sites
C82.69	Cutaneous follicle center lymphoma, extranodal and solid organ sites
C82.80	Other types of follicular lymphoma, unspecified site
C82.81	Other types of follicular lymphoma, lymph nodes of head, face, and neck
C82.82	Other types of follicular lymphoma, intrathoracic lymph nodes
C82.83	Other types of follicular lymphoma, intra-abdominal lymph nodes
C82.84	Other types of follicular lymphoma, lymph nodes of axilla and upper limb
C82.85	Other types of follicular lymphoma, lymph nodes of inguinal region and lower limb
C82.86	Other types of follicular lymphoma, intrapelvic lymph nodes
C82.87	Other types of follicular lymphoma, spleen
C82.88	Other types of follicular lymphoma, lymph nodes of multiple sites
C82.89	Other types of follicular lymphoma, extranodal and solid organ sites
C82.90	Follicular lymphoma, unspecified, unspecified site
C82.91	Follicular lymphoma, unspecified, lymph nodes of head, face, and neck

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Code	Description
C82.92	Follicular lymphoma, unspecified, intrathoracic lymph nodes
C82.93	Follicular lymphoma, unspecified, intra-abdominal lymph nodes
C82.94	Follicular lymphoma, unspecified, lymph nodes of axilla and upper limb
C82.95	Follicular lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C82.96	Follicular lymphoma, unspecified, intrapelvic lymph nodes
C82.97	Follicular lymphoma, unspecified, spleen
C82.98	Follicular lymphoma, unspecified, lymph nodes of multiple sites
C82.99	Follicular lymphoma, unspecified, extranodal and solid organ sites
C83.00	Small cell B-cell lymphoma, unspecified site
C83.01	Small cell B-cell lymphoma, lymph nodes of head, face, and neck
C83.02	Small cell B-cell lymphoma, intrathoracic lymph nodes
C83.03	Small cell B-cell lymphoma, intra-abdominal lymph nodes
C83.04	Small cell B-cell lymphoma, lymph nodes of axilla and upper limb
C83.05	Small cell B-cell lymphoma, lymph nodes of inguinal region and lower limb
C83.06	Small cell B-cell lymphoma, intrapelvic lymph nodes
C83.07	Small cell B-cell lymphoma, spleen
C83.08	Small cell B-cell lymphoma, lymph nodes of multiple sites
C83.09	Small cell B-cell lymphoma, extranodal and solid organ sites
C83.10	Mantle cell lymphoma, unspecified site
C83.11	Mantle cell lymphoma, lymph nodes of head, face, and neck
C83.12	Mantle cell lymphoma, intrathoracic lymph nodes
C83.13	Mantle cell lymphoma, intra-abdominal lymph nodes
C83.14	Mantle cell lymphoma, lymph nodes of axilla and upper limb
C83.15	Mantle cell lymphoma, lymph nodes of inguinal region and lower limb
C83.16	Mantle cell lymphoma, intrapelvic lymph nodes
C83.17	Mantle cell lymphoma, spleen
C83.18	Mantle cell lymphoma, lymph nodes of multiple sites
C83.19	Mantle cell lymphoma, extranodal and solid organ sites
C83.30	Diffuse large B-cell lymphoma, unspecified site
C83.31	Diffuse large B-cell lymphoma, lymph nodes of head, face, and neck

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Code	Description
C83.32	Diffuse large B-cell lymphoma, intrathoracic lymph nodes
C83.33	Diffuse large B-cell lymphoma, intra-abdominal lymph nodes
C83.34	Diffuse large B-cell lymphoma, lymph nodes of axilla and upper limb
C83.35	Diffuse large B-cell lymphoma, lymph nodes of inguinal region and lower limb
C83.36	Diffuse large B-cell lymphoma, intrapelvic lymph nodes
C83.37	Diffuse large B-cell lymphoma, spleen
C83.38	Diffuse large B-cell lymphoma, lymph nodes of multiple sites
C83.39	Diffuse large B-cell lymphoma, extranodal and solid organ sites
C83.50	Lymphoblastic (diffuse) lymphoma, unspecified site
C83.51	Lymphoblastic (diffuse) lymphoma, lymph nodes of head, face, and neck
C83.52	Lymphoblastic (diffuse) lymphoma, intrathoracic lymph nodes
C83.53	Lymphoblastic (diffuse) lymphoma, intra-abdominal lymph nodes
C83.54	Lymphoblastic (diffuse) lymphoma, lymph nodes of axilla and upper limb
C83.55	Lymphoblastic (diffuse) lymphoma, lymph nodes of inguinal region and lower limb
C83.56	Lymphoblastic (diffuse) lymphoma, intrapelvic lymph nodes
C83.57	Lymphoblastic (diffuse) lymphoma, spleen
C83.58	Lymphoblastic (diffuse) lymphoma, lymph nodes of multiple sites
C83.59	Lymphoblastic (diffuse) lymphoma, extranodal and solid organ sites
C83.70	Burkitt lymphoma, unspecified site
C83.71	Burkitt lymphoma, lymph nodes of head, face, and neck
C83.72	Burkitt lymphoma, intrathoracic lymph nodes
C83.73	Burkitt lymphoma, intra-abdominal lymph nodes
C83.74	Burkitt lymphoma, lymph nodes of axilla and upper limb
C83.75	Burkitt lymphoma, lymph nodes of inguinal region and lower limb
C83.76	Burkitt lymphoma, intrapelvic lymph nodes
C83.77	Burkitt lymphoma, spleen
C83.78	Burkitt lymphoma, lymph nodes of multiple sites
C83.79	Burkitt lymphoma, extranodal and solid organ sites
C83.80	Other non-follicular lymphoma, unspecified site
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck

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Code	Description
C83.82	Other non-follicular lymphoma, intrathoracic lymph nodes
C83.83	Other non-follicular lymphoma, intra-abdominal lymph nodes
C83.84	Other non-follicular lymphoma, lymph nodes of axilla and upper limb
C83.85	Other non-follicular lymphoma, lymph nodes of inguinal region and lower limb
C83.86	Other non-follicular lymphoma, intrapelvic lymph nodes
C83.87	Other non-follicular lymphoma, spleen
C83.88	Other non-follicular lymphoma, lymph nodes of multiple sites
C83.89	Other non-follicular lymphoma, extranodal and solid organ sites
C83.90	Non-follicular (diffuse) lymphoma, unspecified, unspecified site
C83.91	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of head, face, and neck
C83.92	Non-follicular (diffuse) lymphoma, unspecified, intrathoracic lymph nodes
C83.93	Non-follicular (diffuse) lymphoma, unspecified, intra-abdominal lymph nodes
C83.94	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of axilla and upper limb
C83.95	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C83.96	Non-follicular (diffuse) lymphoma, unspecified, intrapelvic lymph nodes
C83.97	Non-follicular (diffuse) lymphoma, unspecified, spleen
C83.98	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of multiple sites
C83.99	Non-follicular (diffuse) lymphoma, unspecified, extranodal and solid organ sites
C84.00	Mycosis fungoides, unspecified site
C84.01	Mycosis fungoides, lymph nodes of head, face, and neck
C84.02	Mycosis fungoides, intrathoracic lymph nodes
C84.03	Mycosis fungoides, intra-abdominal lymph nodes
C84.04	Mycosis fungoides, lymph nodes of axilla and upper limb
C84.05	Mycosis fungoides, lymph nodes of inguinal region and lower limb
C84.06	Mycosis fungoides, intrapelvic lymph nodes
C84.07	Mycosis fungoides, spleen
C84.08	Mycosis fungoides, lymph nodes of multiple sites
C84.09	Mycosis fungoides, extranodal and solid organ sites
C84.10	Sezary disease, unspecified site
C84.11	Sezary disease, lymph nodes of head, face, and neck

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Code	Description
C84.12	Sezary disease, intrathoracic lymph nodes
C84.13	Sezary disease, intra-abdominal lymph nodes
C84.14	Sezary disease, lymph nodes of axilla and upper limb
C84.15	Sezary disease, lymph nodes of inguinal region and lower limb
C84.16	Sezary disease, intrapelvic lymph nodes
C84.17	Sezary disease, spleen
C84.18	Sezary disease, lymph nodes of multiple sites
C84.19	Sezary disease, extranodal and solid organ sites
C84.40	Peripheral T-cell lymphoma, not classified, unspecified site
C84.41	Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck
C84.42	Peripheral T-cell lymphoma, not classified, intrathoracic lymph nodes
C84.43	Peripheral T-cell lymphoma, not classified, intra-abdominal lymph nodes
C84.44	Peripheral T-cell lymphoma, not classified, lymph nodes of axilla and upper limb
C84.45	Peripheral T-cell lymphoma, not classified, lymph nodes of inguinal region and lower limb
C84.46	Peripheral T-cell lymphoma, not classified, intrapelvic lymph nodes
C84.47	Peripheral T-cell lymphoma, not classified, spleen
C84.48	Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites
C84.49	Peripheral T-cell lymphoma, not classified, extranodal and solid organ sites
C84.60	Anaplastic large cell lymphoma, ALK-positive, unspecified site
C84.61	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck
C84.62	Anaplastic large cell lymphoma, ALK-positive, intrathoracic lymph nodes
C84.63	Anaplastic large cell lymphoma, ALK-positive, intra-abdominal lymph nodes
C84.64	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of axilla and upper limb
C84.65	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of inguinal region and lower limb
C84.66	Anaplastic large cell lymphoma, ALK-positive, intrapelvic lymph nodes
C84.67	Anaplastic large cell lymphoma, ALK-positive, spleen
C84.68	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of multiple sites
C84.69	Anaplastic large cell lymphoma, ALK-positive, extranodal and solid organ sites
C84.70	Anaplastic large cell lymphoma, ALK-negative, unspecified site
C84.71	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck

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Code	Description
C84.72	Anaplastic large cell lymphoma, ALK-negative, intrathoracic lymph nodes
C84.73	Anaplastic large cell lymphoma, ALK-negative, intra-abdominal lymph nodes
C84.74	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of axilla and upper limb
C84.75	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of inguinal region and lower limb
C84.76	Anaplastic large cell lymphoma, ALK-negative, intrapelvic lymph nodes
C84.77	Anaplastic large cell lymphoma, ALK-negative, spleen
C84.78	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of multiple sites
C84.79	Anaplastic large cell lymphoma, ALK-negative, extranodal and solid organ sites
C84.90	Mature T/NK-cell lymphomas, unspecified, unspecified site
C84.91	Mature T/NK-cell lymphomas, unspecified, lymph nodes of head, face, and neck
C84.92	Mature T/NK-cell lymphomas, unspecified, intrathoracic lymph nodes
C84.93	Mature T/NK-cell lymphomas, unspecified, intra-abdominal lymph nodes
C84.94	Mature T/NK-cell lymphomas, unspecified, lymph nodes of axilla and upper limb
C84.95	Mature T/NK-cell lymphomas, unspecified, lymph nodes of inguinal region and lower limb
C84.96	Mature T/NK-cell lymphomas, unspecified, intrapelvic lymph nodes
C84.97	Mature T/NK-cell lymphomas, unspecified, spleen
C84.98	Mature T/NK-cell lymphomas, unspecified, lymph nodes of multiple sites
C84.99	Mature T/NK-cell lymphomas, unspecified, extranodal and solid organ sites
C84.A0	Cutaneous T-cell lymphoma, unspecified, unspecified site
C84.A1	Cutaneous T-cell lymphoma, unspecified lymph nodes of head, face, and neck
C84.A2	Cutaneous T-cell lymphoma, unspecified, intrathoracic lymph nodes
C84.A3	Cutaneous T-cell lymphoma, unspecified, intra-abdominal lymph nodes
C84.A4	Cutaneous T-cell lymphoma, unspecified, lymph nodes of axilla and upper limb
C84.A5	Cutaneous T-cell lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C84.A6	Cutaneous T-cell lymphoma, unspecified, intrapelvic lymph nodes
C84.A7	Cutaneous T-cell lymphoma, unspecified, spleen
C84.A8	Cutaneous T-cell lymphoma, unspecified, lymph nodes of multiple sites
C84.A9	Cutaneous T-cell lymphoma, unspecified, extranodal and solid organ sites
C84.Z0	Other mature T/NK-cell lymphomas, unspecified site
C84.Z1	Other mature T/NK-cell lymphomas, lymph nodes of head, face, and neck

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Code	Description
C84.Z2	Other mature T/NK-cell lymphomas, intrathoracic lymph nodes
C84.Z3	Other mature T/NK-cell lymphomas, intra-abdominal lymph nodes
C84.Z4	Other mature T/NK-cell lymphomas, lymph nodes of axilla and upper limb
C84.Z5	Other mature T/NK-cell lymphomas, lymph nodes of inguinal region and lower limb
C84.Z6	Other mature T/NK-cell lymphomas, intrapelvic lymph nodes
C84.Z7	Other mature T/NK-cell lymphomas, spleen
C84.Z8	Other mature T/NK-cell lymphomas, lymph nodes of multiple sites
C84.Z9	Other mature T/NK-cell lymphomas, extranodal and solid organ sites
C85.10	Unspecified B-cell lymphoma, unspecified site
C85.11	Unspecified B-cell lymphoma, lymph nodes of head, face, and neck
C85.12	Unspecified B-cell lymphoma, intrathoracic lymph nodes
C85.13	Unspecified B-cell lymphoma, intra-abdominal lymph nodes
C85.14	Unspecified B-cell lymphoma, lymph nodes of axilla and upper limb
C85.15	Unspecified B-cell lymphoma, lymph nodes of inguinal region and lower limb
C85.16	Unspecified B-cell lymphoma, intrapelvic lymph nodes
C85.17	Unspecified B-cell lymphoma, spleen
C85.18	Unspecified B-cell lymphoma, lymph nodes of multiple sites
C85.19	Unspecified B-cell lymphoma, extranodal and solid organ sites
C85.20	Mediastinal (thymic) large B-cell lymphoma, unspecified site
C85.21	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of head, face, and neck
C85.22	Mediastinal (thymic) large B-cell lymphoma, intrathoracic lymph nodes
C85.23	Mediastinal (thymic) large B-cell lymphoma, intra-abdominal lymph nodes
C85.24	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of axilla and upper limb
C85.25	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of inguinal region and lower limb
C85.26	Mediastinal (thymic) large B-cell lymphoma, intrapelvic lymph nodes
C85.27	Mediastinal (thymic) large B-cell lymphoma, spleen
C85.28	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of multiple sites
C85.29	Mediastinal (thymic) large B-cell lymphoma, extranodal and solid organ sites
C85.80	Other specified types of non-Hodgkin lymphoma, unspecified site
C85.81	Other specified types of non-Hodgkin lymphoma, lymph nodes of head, face, and neck



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Code	Description
C85.82	Other specified types of non-Hodgkin lymphoma, intrathoracic lymph nodes
C85.83	Other specified types of non-Hodgkin lymphoma, intra-abdominal lymph nodes
C85.84	Other specified types of non-Hodgkin lymphoma, lymph nodes of axilla and upper limb
C85.85	Other specified types of non-Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C85.86	Other specified types of non-Hodgkin lymphoma, intrapelvic lymph nodes
C85.87	Other specified types of non-Hodgkin lymphoma, spleen
C85.88	Other specified types of non-Hodgkin lymphoma, lymph nodes of multiple sites
C85.89	Other specified types of non-Hodgkin lymphoma, extranodal and solid organ sites
C85.90	Non-Hodgkin lymphoma, unspecified, unspecified site
C85.91	Non-Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck
C85.92	Non-Hodgkin lymphoma, unspecified, intrathoracic lymph nodes
C85.93	Non-Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes
C85.94	Non-Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb
C85.95	Non-Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C85.96	Non-Hodgkin lymphoma, unspecified, intrapelvic lymph nodes
C85.97	Non-Hodgkin lymphoma, unspecified, spleen
C85.98	Non-Hodgkin lymphoma, unspecified, lymph nodes of multiple sites
C85.99	Non-Hodgkin lymphoma, unspecified, extranodal and solid organ sites
C86.0	Extranodal NK/T-cell lymphoma, nasal type
C86.1	Hepatosplenic T-cell lymphoma
C86.2	Enteropathy-type (intestinal) T-cell lymphoma
C86.3	Subcutaneous panniculitis-like T-cell lymphoma
C86.4	Blastic NK-cell lymphoma
C86.5	Angioimmunoblastic T-cell lymphoma
C86.6	Primary cutaneous CD30-positive T-cell proliferations
C88.0	Waldenstrom macroglobulinemia
C88.4	Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue [MALT-lymphoma]
C88.8	Other malignant immunoproliferative diseases
C91.40	Hairy cell leukemia not having achieved remission

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Code	Description
C91.41	Hairy cell leukemia, in remission
C91.42	Hairy cell leukemia, in relapse
C94.40	Acute panmyelosis with myelofibrosis not having achieved remission
C94.41	Acute panmyelosis with myelofibrosis, in remission
C94.42	Acute panmyelosis with myelofibrosis, in relapse
C94.6	Myelodysplastic disease, not classified
C96.0	Multifocal and multisystemic (disseminated) Langerhans-cell histiocytosis
C96.2	Malignant mast cell tumor
C96.4	Sarcoma of dendritic cells (accessory cells)
C96.9	Malignant neoplasm of lymphoid, hematopoietic and related tissue, unspecified
C96.A	Histiocytic sarcoma
C96.Z	Other specified malignant neoplasms of lymphoid, hematopoietic and related tissue
D30.00	Benign neoplasm of unspecified kidney
D30.01	Benign neoplasm of right kidney
D30.02	Benign neoplasm of left kidney
D30.10	Benign neoplasm of unspecified renal pelvis
D30.11	Benign neoplasm of right renal pelvis
D30.12	Benign neoplasm of left renal pelvis
D30.20	Benign neoplasm of unspecified ureter
D30.21	Benign neoplasm of right ureter
D30.22	Benign neoplasm of left ureter
D30.3	Benign neoplasm of bladder
D30.4	Benign neoplasm of urethra
D30.8	Benign neoplasm of other specified urinary organs
D30.9	Benign neoplasm of urinary organ, unspecified
D45	Polycythemia vera
D46.0	Refractory anemia without ring sideroblasts, so stated
D46.1	Refractory anemia with ring sideroblasts
D46.20	Refractory anemia with excess of blasts, unspecified
D46.21	Refractory anemia with excess of blasts 1

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Code	Description
D46.22	Refractory anemia with excess of blasts 2
D46.4	Refractory anemia, unspecified
D46.9	Myelodysplastic syndrome, unspecified
D46.A	Refractory cytopenia with multilineage dysplasia
D46.B	Refractory cytopenia with multilineage dysplasia and ring sideroblasts
D46.C	Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality
D46.Z	Other myelodysplastic syndromes
D47.0	Histiocytic and mast cell tumors of uncertain behavior
D47.1	Chronic myeloproliferative disease
D47.2	Monoclonal gammopathy
D47.3	Essential (hemorrhagic) thrombocythemia
D47.9	Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified
D47.Z1	Post-transplant lymphoproliferative disorder (PTLD)
D47.Z9	Other specified neoplasms of uncertain behavior of lymphoid, hematopoietic and related tissue
D49.4	Neoplasm of unspecified behavior of bladder
D49.511	Neoplasm of unspecified behavior of right kidney
D49.512	Neoplasm of unspecified behavior of left kidney
D49.519	Neoplasm of unspecified behavior of unspecified kidney
D49.59	Neoplasm of unspecified behavior of other genitourinary organ
D49.9	Neoplasm of unspecified behavior of unspecified site
D50.0	Iron deficiency anemia secondary to blood loss (chronic)
D50.9	Iron deficiency anemia, unspecified
D51.0	Vitamin B12 deficiency anemia due to intrinsic factor deficiency
D51.1	Vitamin B12 deficiency anemia due to selective vitamin B12 malabsorption with proteinuria
D51.2	Transcobalamin II deficiency
D51.3	Other dietary vitamin B12 deficiency anemia
D51.8	Other vitamin B12 deficiency anemias
D51.9	Vitamin B12 deficiency anemia, unspecified
D53.9	Nutritional anemia, unspecified
D62	Acute posthemorrhagic anemia

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Code	Description
D64.0	Hereditary sideroblastic anemia
D64.1	Secondary sideroblastic anemia due to disease
D64.2	Secondary sideroblastic anemia due to drugs and toxins
D64.3	Other sideroblastic anemias
D65	Disseminated intravascular coagulation [defibrination syndrome]
D66	Hereditary factor VIII deficiency
D67	Hereditary factor IX deficiency
D68.0	Von Willebrand's disease
D68.1	Hereditary factor XI deficiency
D68.2	Hereditary deficiency of other clotting factors
D68.311	Acquired hemophilia
D68.312	Antiphospholipid antibody with hemorrhagic disorder
D68.318	Other hemorrhagic disorder due to intrinsic circulating anticoagulants, antibodies, or inhibitors
D68.32	Hemorrhagic disorder due to extrinsic circulating anticoagulants
D68.4	Acquired coagulation factor deficiency
D68.51	Activated protein C resistance
D68.52	Prothrombin gene mutation
D68.59	Other primary thrombophilia
D68.61	Antiphospholipid syndrome
D68.62	Lupus anticoagulant syndrome
D68.8	Other specified coagulation defects
D68.9	Coagulation defect, unspecified
D69.0	Allergic purpura
D69.1	Qualitative platelet defects
D69.2	Other nonthrombocytopenic purpura
D69.3	Immune thrombocytopenic purpura
D69.41	Evans syndrome
D69.42	Congenital and hereditary thrombocytopenia purpura
D69.49	Other primary thrombocytopenia
D69.51	Posttransfusion purpura

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Code	Description
D69.59	Other secondary thrombocytopenia
D69.6	Thrombocytopenia, unspecified
D69.8	Other specified hemorrhagic conditions
D69.9	Hemorrhagic condition, unspecified
D78.01	Intraoperative hemorrhage and hematoma of the spleen complicating a procedure on the spleen
D78.02	Intraoperative hemorrhage and hematoma of the spleen complicating other procedure
D78.21	Postprocedural hemorrhage of the spleen following a procedure on the spleen
D78.22	Postprocedural hemorrhage of the spleen following other procedure
*D78.31	*Postprocedural hematoma of the spleen following a procedure on the spleen
*D78.32	*Postprocedural hematoma of the spleen following other procedure
D86.0	Sarcoidosis of lung
D86.1	Sarcoidosis of lymph nodes
D86.2	Sarcoidosis of lung with sarcoidosis of lymph nodes
D86.3	Sarcoidosis of skin
D86.81	Sarcoid meningitis
D86.82	Multiple cranial nerve palsies in sarcoidosis
D86.83	Sarcoid iridocyclitis
D86.84	Sarcoid pyelonephritis
D86.85	Sarcoid myocarditis
D86.86	Sarcoid arthropathy
D86.87	Sarcoid myositis
D86.89	Sarcoidosis of other sites
D86.9	Sarcoidosis, unspecified
D89.0	Polyclonal hypergammaglobulinemia
D89.1	Cryoglobulinemia
D89.2	Hypergammaglobulinemia, unspecified
E07.81	Sick-euthyroid syndrome
E07.89	Other specified disorders of thyroid
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease

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Code	Description
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.21	Type 1 diabetes mellitus with diabetic nephropathy
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E13.21	Other specified diabetes mellitus with diabetic nephropathy
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
E13.29	Other specified diabetes mellitus with other diabetic kidney complication
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E36.01	Intraoperative hemorrhage and hematoma of an endocrine system organ or structure complicating an endocrine system procedure
E36.02	Intraoperative hemorrhage and hematoma of an endocrine system organ or structure complicating other procedure
E44.0	Moderate protein-calorie malnutrition



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Code	Description
E44.1	Mild protein-calorie malnutrition
E45	Retarded development following protein-calorie malnutrition
E46	Unspecified protein-calorie malnutrition
E56.1	Deficiency of vitamin K
E56.9	Vitamin deficiency, unspecified
E64.0	Sequelae of protein-calorie malnutrition
E80.0	Hereditary erythropoietic porphyria
E80.1	Porphyria cutanea tarda
E80.20	Unspecified porphyria
E80.21	Acute intermittent (hepatic) porphyria
E80.29	Other porphyria
E83.10	Disorder of iron metabolism, unspecified
E83.110	Hereditary hemochromatosis
E83.111	Hemochromatosis due to repeated red blood cell transfusions
E83.118	Other hemochromatosis
E83.119	Hemochromatosis, unspecified
E83.19	Other disorders of iron metabolism
E85.0	Non-neuropathic hereditary amyloidosis
E85.1	Neuropathic hereditary amyloidosis
E85.2	Hereditary amyloidosis, unspecified
E85.3	Secondary systemic amyloidosis
E85.4	Organ-limited amyloidosis
E85.8	Other amyloidosis
E85.9	Amyloidosis, unspecified
E88.09	Other disorders of plasma-protein metabolism, not elsewhere classified
*E89.810	*Postprocedural hemorrhage of an endocrine system organ or structure following an endocrine system procedure
*E89.811	*Postprocedural hemorrhage of an endocrine system organ or structure following other procedure
*E89.820	*Postprocedural hematoma of an endocrine system organ or structure following an endocrine system procedure



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Code	Description
*E89.821	*Postprocedural hematoma of an endocrine system organ or structure following other procedure
F01.50	Vascular dementia without behavioral disturbance
F01.51	Vascular dementia with behavioral disturbance
G08	Intracranial and intraspinal phlebitis and thrombophlebitis
G45.0	Vertebro-basilar artery syndrome
G45.1	Carotid artery syndrome (hemispheric)
G45.2	Multiple and bilateral precerebral artery syndromes
G45.3	Amaurosis fugax
G45.8	Other transient cerebral ischemic attacks and related syndromes
G45.9	Transient cerebral ischemic attack, unspecified
G46.0	Middle cerebral artery syndrome
G46.1	Anterior cerebral artery syndrome
G46.2	Posterior cerebral artery syndrome
G81.90	Hemiplegia, unspecified affecting unspecified side
G81.91	Hemiplegia, unspecified affecting right dominant side
G81.92	Hemiplegia, unspecified affecting left dominant side
G81.93	Hemiplegia, unspecified affecting right nondominant side
G81.94	Hemiplegia, unspecified affecting left nondominant side
G97.31	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating a nervous system procedure
G97.32	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating other procedure
G97.51	Postprocedural hemorrhage of a nervous system organ or structure following a nervous system procedure
G97.52	Postprocedural hemorrhage of a nervous system organ or structure following other procedure
*G97.61	*Postprocedural hematoma of a nervous system organ or structure following a nervous system procedure
*G97.62	*Postprocedural hematoma of a nervous system organ or structure following other procedure
H02.89	Other specified disorders of eyelid
H05.231	Hemorrhage of right orbit

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Code	Description
H05.232	Hemorrhage of left orbit
H05.233	Hemorrhage of bilateral orbit
H05.239	Hemorrhage of unspecified orbit
H11.30	Conjunctival hemorrhage, unspecified eye
H11.31	Conjunctival hemorrhage, right eye
H11.32	Conjunctival hemorrhage, left eye
H11.33	Conjunctival hemorrhage, bilateral
H31.301	Unspecified choroidal hemorrhage, right eye
H31.302	Unspecified choroidal hemorrhage, left eye
H31.303	Unspecified choroidal hemorrhage, bilateral
H31.309	Unspecified choroidal hemorrhage, unspecified eye
H31.311	Expulsive choroidal hemorrhage, right eye
H31.312	Expulsive choroidal hemorrhage, left eye
H31.313	Expulsive choroidal hemorrhage, bilateral
H31.319	Expulsive choroidal hemorrhage, unspecified eye
H31.321	Choroidal rupture, right eye
H31.322	Choroidal rupture, left eye
H31.323	Choroidal rupture, bilateral
H31.329	Choroidal rupture, unspecified eye
H31.401	Unspecified choroidal detachment, right eye
H31.402	Unspecified choroidal detachment, left eye
H31.403	Unspecified choroidal detachment, bilateral
H31.409	Unspecified choroidal detachment, unspecified eye
H31.411	Hemorrhagic choroidal detachment, right eye
H31.412	Hemorrhagic choroidal detachment, left eye
H31.413	Hemorrhagic choroidal detachment, bilateral
H31.419	Hemorrhagic choroidal detachment, unspecified eye
H31.421	Serous choroidal detachment, right eye
H31.422	Serous choroidal detachment, left eye
H31.423	Serous choroidal detachment, bilateral

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Code	Description
H31.429	Serous choroidal detachment, unspecified eye
H34.00	Transient retinal artery occlusion, unspecified eye
H34.01	Transient retinal artery occlusion, right eye
H34.02	Transient retinal artery occlusion, left eye
H34.03	Transient retinal artery occlusion, bilateral
H34.10	Central retinal artery occlusion, unspecified eye
H34.11	Central retinal artery occlusion, right eye
H34.12	Central retinal artery occlusion, left eye
H34.13	Central retinal artery occlusion, bilateral
H34.211	Partial retinal artery occlusion, right eye
H34.212	Partial retinal artery occlusion, left eye
H34.213	Partial retinal artery occlusion, bilateral
H34.219	Partial retinal artery occlusion, unspecified eye
H34.231	Retinal artery branch occlusion, right eye
H34.232	Retinal artery branch occlusion, left eye
H34.233	Retinal artery branch occlusion, bilateral
H34.239	Retinal artery branch occlusion, unspecified eye
H34.8110	Central retinal vein occlusion, right eye, with macular edema
H34.8111	Central retinal vein occlusion, right eye, with retinal neovascularization
H34.8112	Central retinal vein occlusion, right eye, stable
H34.8120	Central retinal vein occlusion, left eye, with macular edema
H34.8121	Central retinal vein occlusion, left eye, with retinal neovascularization
H34.8122	Central retinal vein occlusion, left eye, stable
H34.8130	Central retinal vein occlusion, bilateral, with macular edema
H34.8131	Central retinal vein occlusion, bilateral, with retinal neovascularization
H34.8132	Central retinal vein occlusion, bilateral, stable
H34.8190	Central retinal vein occlusion, unspecified eye, with macular edema
H34.8191	Central retinal vein occlusion, unspecified eye, with retinal neovascularization
H34.8192	Central retinal vein occlusion, unspecified eye, stable
H34.821	Venous engorgement, right eye

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Code	Description
H34.822	Venous engorgement, left eye
H34.823	Venous engorgement, bilateral
H34.829	Venous engorgement, unspecified eye
H34.8310	Tributary (branch) retinal vein occlusion, right eye, with macular edema
H34.8311	Tributary (branch) retinal vein occlusion, right eye, with retinal neovascularization
H34.8312	Tributary (branch) retinal vein occlusion, right eye, stable
H34.8320	Tributary (branch) retinal vein occlusion, left eye, with macular edema
H34.8321	Tributary (branch) retinal vein occlusion, left eye, with retinal neovascularization
H34.8322	Tributary (branch) retinal vein occlusion, left eye, stable
H34.8330	Tributary (branch) retinal vein occlusion, bilateral, with macular edema
H34.8331	Tributary (branch) retinal vein occlusion, bilateral, with retinal neovascularization
H34.8332	Tributary (branch) retinal vein occlusion, bilateral, stable
H34.8390	Tributary (branch) retinal vein occlusion, unspecified eye, with macular edema
H34.8391	Tributary (branch) retinal vein occlusion, unspecified eye, with retinal neovascularization
H34.8392	Tributary (branch) retinal vein occlusion, unspecified eye, stable
H34.9	Unspecified retinal vascular occlusion
H35.061	Retinal vasculitis, right eye
H35.062	Retinal vasculitis, left eye
H35.063	Retinal vasculitis, bilateral
H35.069	Retinal vasculitis, unspecified eye
H35.60	Retinal hemorrhage, unspecified eye
H35.61	Retinal hemorrhage, right eye
H35.62	Retinal hemorrhage, left eye
H35.63	Retinal hemorrhage, bilateral
H35.731	Hemorrhagic detachment of retinal pigment epithelium, right eye
H35.732	Hemorrhagic detachment of retinal pigment epithelium, left eye
H35.733	Hemorrhagic detachment of retinal pigment epithelium, bilateral
H35.739	Hemorrhagic detachment of retinal pigment epithelium, unspecified eye
H43.10	Vitreous hemorrhage, unspecified eye
H43.11	Vitreous hemorrhage, right eye



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Code	Description
H43.12	Vitreous hemorrhage, left eye
H43.13	Vitreous hemorrhage, bilateral
H44.811	Hemophthalmos, right eye
H44.812	Hemophthalmos, left eye
H44.813	Hemophthalmos, bilateral
H44.819	Hemophthalmos, unspecified eye
H47.021	Hemorrhage in optic nerve sheath, right eye
H47.022	Hemorrhage in optic nerve sheath, left eye
H47.023	Hemorrhage in optic nerve sheath, bilateral
H47.029	Hemorrhage in optic nerve sheath, unspecified eye
H47.43	Disorders of optic chiasm in (due to) vascular disorders
H47.531	Disorders of visual pathways in (due to) vascular disorders, right side
H47.532	Disorders of visual pathways in (due to) vascular disorders, left side
H47.539	Disorders of visual pathways in (due to) vascular disorders, unspecified side
H47.641	Disorders of visual cortex in (due to) vascular disorders, right side of brain
H47.642	Disorders of visual cortex in (due to) vascular disorders, left side of brain
H47.649	Disorders of visual cortex in (due to) vascular disorders, unspecified side of brain
H53.9	Unspecified visual disturbance
H59.111	Intraoperative hemorrhage and hematoma of right eye and adnexa complicating an ophthalmic procedure
H59.112	Intraoperative hemorrhage and hematoma of left eye and adnexa complicating an ophthalmic procedure
H59.113	Intraoperative hemorrhage and hematoma of eye and adnexa complicating an ophthalmic procedure, bilateral
H59.119	Intraoperative hemorrhage and hematoma of unspecified eye and adnexa complicating an ophthalmic procedure
H59.121	Intraoperative hemorrhage and hematoma of right eye and adnexa complicating other procedure
H59.122	Intraoperative hemorrhage and hematoma of left eye and adnexa complicating other procedure
H59.123	Intraoperative hemorrhage and hematoma of eye and adnexa complicating other procedure, bilateral



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Code	Description
H59.129	Intraoperative hemorrhage and hematoma of unspecified eye and adnexa complicating other procedure
H59.311	Postprocedural hemorrhage of right eye and adnexa following an ophthalmic procedure
H59.312	Postprocedural hemorrhage of left eye and adnexa following an ophthalmic procedure
H59.313	Postprocedural hemorrhage of eye and adnexa following an ophthalmic procedure, bilateral
H59.319	Postprocedural hemorrhage of unspecified eye and adnexa following an ophthalmic procedure
H59.321	Postprocedural hemorrhage of right eye and adnexa following other procedure
H59.322	Postprocedural hemorrhage of left eye and adnexa following other procedure
H59.323	Postprocedural hemorrhage of eye and adnexa following other procedure, bilateral
H59.329	Postprocedural hemorrhage of unspecified eye and adnexa following other procedure
*H59.331	*Postprocedural hematoma of right eye and adnexa following an ophthalmic procedure
*H59.332	*Postprocedural hematoma of left eye and adnexa following an ophthalmic procedure
*H59.333	*Postprocedural hematoma of eye and adnexa following an ophthalmic procedure, bilateral
*H59.339	*Postprocedural hematoma of unspecified eye and adnexa following an ophthalmic procedure
*H59.341	*Postprocedural hematoma of right eye and adnexa following other procedure
*H59.342	*Postprocedural hematoma of left eye and adnexa following other procedure
*H59.343	*Postprocedural hematoma of eye and adnexa following other procedure, bilateral
*H59.349	*Postprocedural hematoma of unspecified eye and adnexa following other procedure
H61.121	Hematoma of pinna, right ear
H61.122	Hematoma of pinna, left ear
H61.123	Hematoma of pinna, bilateral
H61.129	Hematoma of pinna, unspecified ear
H81.41	Vertigo of central origin, right ear
H81.42	Vertigo of central origin, left ear
H81.43	Vertigo of central origin, bilateral
H81.49	Vertigo of central origin, unspecified ear

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Code	Description
H83.2X1	Labyrinthine dysfunction, right ear
H83.2X2	Labyrinthine dysfunction, left ear
H83.2X3	Labyrinthine dysfunction, bilateral
H83.2X9	Labyrinthine dysfunction, unspecified ear
H95.21	Intraoperative hemorrhage and hematoma of ear and mastoid process complicating a procedure on the ear and mastoid process
H95.22	Intraoperative hemorrhage and hematoma of ear and mastoid process complicating other procedure
H95.41	Postprocedural hemorrhage of ear and mastoid process following a procedure on the ear and mastoid process
H95.42	Postprocedural hemorrhage of ear and mastoid process following other procedure
*H95.51	*Postprocedural hematoma of ear and mastoid process following a procedure on the ear and mastoid process
*H95.52	*Postprocedural hematoma of ear and mastoid process following other procedure
I05.0	Rheumatic mitral stenosis
I05.1	Rheumatic mitral insufficiency
I05.2	Rheumatic mitral stenosis with insufficiency
I05.8	Other rheumatic mitral valve diseases
I05.9	Rheumatic mitral valve disease, unspecified
I06.0	Rheumatic aortic stenosis
I06.2	Rheumatic aortic stenosis with insufficiency
I07.0	Rheumatic tricuspid stenosis
I07.1	Rheumatic tricuspid insufficiency
I07.2	Rheumatic tricuspid stenosis and insufficiency
I07.8	Other rheumatic tricuspid valve diseases
I07.9	Rheumatic tricuspid valve disease, unspecified
I08.0	Rheumatic disorders of both mitral and aortic valves
I08.1	Rheumatic disorders of both mitral and tricuspid valves
I08.2	Rheumatic disorders of both aortic and tricuspid valves
I08.3	Combined rheumatic disorders of mitral, aortic and tricuspid valves
I08.8	Other rheumatic multiple valve diseases
I08.9	Rheumatic multiple valve disease, unspecified

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Code	Description
I09.0	Rheumatic myocarditis
I09.1	Rheumatic diseases of endocardium, valve unspecified
I09.81	Rheumatic heart failure
I09.89	Other specified rheumatic heart diseases
I09.9	Rheumatic heart disease, unspecified
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease
*I16.0	*Hypertensive urgency
*I16.1	*Hypertensive emergency
*I16.9	*Hypertensive crisis, unspecified
I20.0	Unstable angina
I20.1	Angina pectoris with documented spasm
I20.8	Other forms of angina pectoris
I20.9	Angina pectoris, unspecified
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site
I21.4	Non-ST elevation (NSTEMI) myocardial infarction
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site

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Code	Description
I23.0	Hemopericardium as current complication following acute myocardial infarction
I23.3	Rupture of cardiac wall without hemopericardium as current complication following acute myocardial infarction
I23.6	Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction
I23.7	Postinfarction angina
I23.8	Other current complications following acute myocardial infarction
I24.0	Acute coronary thrombosis not resulting in myocardial infarction
I24.8	Other forms of acute ischemic heart disease
I24.9	Acute ischemic heart disease, unspecified
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
I25.5	Ischemic cardiomyopathy
I25.6	Silent myocardial ischemia
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris

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Code	Description
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris

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Code	Description
I25.810	Atherosclerosis of coronary artery bypass graft(s) without angina pectoris
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris
I25.83	Coronary atherosclerosis due to lipid rich plaque
I25.84	Coronary atherosclerosis due to calcified coronary lesion
I25.89	Other forms of chronic ischemic heart disease
I25.9	Chronic ischemic heart disease, unspecified
I26.01	Septic pulmonary embolism with acute cor pulmonale
I26.02	Saddle embolus of pulmonary artery with acute cor pulmonale
I26.09	Other pulmonary embolism with acute cor pulmonale
I26.90	Septic pulmonary embolism without acute cor pulmonale
I26.92	Saddle embolus of pulmonary artery without acute cor pulmonale
I26.99	Other pulmonary embolism without acute cor pulmonale
I27.81	Cor pulmonale (chronic)
I27.9	Pulmonary heart disease, unspecified
I31.2	Hemopericardium, not elsewhere classified
I34.0	Nonrheumatic mitral (valve) insufficiency
I34.1	Nonrheumatic mitral (valve) prolapse
I34.2	Nonrheumatic mitral (valve) stenosis
I34.8	Other nonrheumatic mitral valve disorders
I34.9	Nonrheumatic mitral valve disorder, unspecified
I35.0	Nonrheumatic aortic (valve) stenosis
I35.1	Nonrheumatic aortic (valve) insufficiency
I35.2	Nonrheumatic aortic (valve) stenosis with insufficiency
I35.8	Other nonrheumatic aortic valve disorders
I35.9	Nonrheumatic aortic valve disorder, unspecified
I38	Endocarditis, valve unspecified
I42.0	Dilated cardiomyopathy
I42.1	Obstructive hypertrophic cardiomyopathy
I42.2	Other hypertrophic cardiomyopathy

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Code	Description
I42.3	Endomyocardial (eosinophilic) disease
I42.4	Endocardial fibroelastosis
I42.5	Other restrictive cardiomyopathy
I42.6	Alcoholic cardiomyopathy
I42.7	Cardiomyopathy due to drug and external agent
I42.8	Other cardiomyopathies
I42.9	Cardiomyopathy, unspecified
I43	Cardiomyopathy in diseases classified elsewhere
I46.2	Cardiac arrest due to underlying cardiac condition
I46.8	Cardiac arrest due to other underlying condition
I46.9	Cardiac arrest, cause unspecified
I47.0	Re-entry ventricular arrhythmia
I47.1	Supraventricular tachycardia
I47.2	Ventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation
I48.2	Chronic atrial fibrillation
I48.3	Typical atrial flutter
I48.4	Atypical atrial flutter
I48.91	Unspecified atrial fibrillation
I48.92	Unspecified atrial flutter
I49.01	Ventricular fibrillation
I49.02	Ventricular flutter
I49.1	Atrial premature depolarization
I49.2	Junctional premature depolarization
I49.3	Ventricular premature depolarization
I49.40	Unspecified premature depolarization
I49.49	Other premature depolarization
I49.5	Sick sinus syndrome

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Code	Description
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
I50.1	Left ventricular failure
I50.20	Unspecified systolic (congestive) heart failure
I50.21	Acute systolic (congestive) heart failure
I50.22	Chronic systolic (congestive) heart failure
I50.23	Acute on chronic systolic (congestive) heart failure
I50.30	Unspecified diastolic (congestive) heart failure
I50.31	Acute diastolic (congestive) heart failure
I50.32	Chronic diastolic (congestive) heart failure
I50.33	Acute on chronic diastolic (congestive) heart failure
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.9	Heart failure, unspecified
I51.4	Myocarditis, unspecified
I51.5	Myocardial degeneration
I51.7	Cardiomegaly
I60.00	Nontraumatic subarachnoid hemorrhage from unspecified carotid siphon and bifurcation
I60.01	Nontraumatic subarachnoid hemorrhage from right carotid siphon and bifurcation
I60.02	Nontraumatic subarachnoid hemorrhage from left carotid siphon and bifurcation
I60.10	Nontraumatic subarachnoid hemorrhage from unspecified middle cerebral artery
I60.11	Nontraumatic subarachnoid hemorrhage from right middle cerebral artery
I60.12	Nontraumatic subarachnoid hemorrhage from left middle cerebral artery
*I60.2	*Nontraumatic subarachnoid hemorrhage from anterior communicating artery
I60.30	Nontraumatic subarachnoid hemorrhage from unspecified posterior communicating artery
I60.31	Nontraumatic subarachnoid hemorrhage from right posterior communicating artery
I60.32	Nontraumatic subarachnoid hemorrhage from left posterior communicating artery
I60.4	Nontraumatic subarachnoid hemorrhage from basilar artery

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Code	Description
I60.50	Nontraumatic subarachnoid hemorrhage from unspecified vertebral artery
I60.51	Nontraumatic subarachnoid hemorrhage from right vertebral artery
I60.52	Nontraumatic subarachnoid hemorrhage from left vertebral artery
I60.6	Nontraumatic subarachnoid hemorrhage from other intracranial arteries
I60.7	Nontraumatic subarachnoid hemorrhage from unspecified intracranial artery
I60.8	Other nontraumatic subarachnoid hemorrhage
I60.9	Nontraumatic subarachnoid hemorrhage, unspecified
I61.0	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical
I61.1	Nontraumatic intracerebral hemorrhage in hemisphere, cortical
I61.2	Nontraumatic intracerebral hemorrhage in hemisphere, unspecified
I61.3	Nontraumatic intracerebral hemorrhage in brain stem
I61.4	Nontraumatic intracerebral hemorrhage in cerebellum
I61.5	Nontraumatic intracerebral hemorrhage, intraventricular
I61.6	Nontraumatic intracerebral hemorrhage, multiple localized
I61.8	Other nontraumatic intracerebral hemorrhage
I61.9	Nontraumatic intracerebral hemorrhage, unspecified
I62.00	Nontraumatic subdural hemorrhage, unspecified
I62.01	Nontraumatic acute subdural hemorrhage
I62.02	Nontraumatic subacute subdural hemorrhage
I62.03	Nontraumatic chronic subdural hemorrhage
I62.1	Nontraumatic extradural hemorrhage
I62.9	Nontraumatic intracranial hemorrhage, unspecified
I63.00	Cerebral infarction due to thrombosis of unspecified precerebral artery
I63.011	Cerebral infarction due to thrombosis of right vertebral artery
I63.012	Cerebral infarction due to thrombosis of left vertebral artery
*I63.013	*Cerebral infarction due to thrombosis of bilateral vertebral arteries
I63.019	Cerebral infarction due to thrombosis of unspecified vertebral artery
I63.02	Cerebral infarction due to thrombosis of basilar artery
I63.031	Cerebral infarction due to thrombosis of right carotid artery
I63.032	Cerebral infarction due to thrombosis of left carotid artery



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Code	Description
*I63.033	*Cerebral infarction due to thrombosis of bilateral carotid arteries
I63.039	Cerebral infarction due to thrombosis of unspecified carotid artery
I63.09	Cerebral infarction due to thrombosis of other precerebral artery
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery
I63.111	Cerebral infarction due to embolism of right vertebral artery
I63.112	Cerebral infarction due to embolism of left vertebral artery
*I63.113	*Cerebral infarction due to embolism of bilateral vertebral arteries
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery
I63.12	Cerebral infarction due to embolism of basilar artery
I63.131	Cerebral infarction due to embolism of right carotid artery
I63.132	Cerebral infarction due to embolism of left carotid artery
*I63.133	*Cerebral infarction due to embolism of bilateral carotid arteries
I63.139	Cerebral infarction due to embolism of unspecified carotid artery
I63.19	Cerebral infarction due to embolism of other precerebral artery
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries
I63.211	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral arteries
I63.212	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral arteries
*I63.213	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries
I63.219	Cerebral infarction due to unspecified occlusion or stenosis of unspecified vertebral arteries
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar arteries
I63.231	Cerebral infarction due to unspecified occlusion or stenosis of right carotid arteries
I63.232	Cerebral infarction due to unspecified occlusion or stenosis of left carotid arteries
*I63.233	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid arteries
I63.239	Cerebral infarction due to unspecified occlusion or stenosis of unspecified carotid arteries
I63.29	Cerebral infarction due to unspecified occlusion or stenosis of other precerebral arteries
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery
I63.311	Cerebral infarction due to thrombosis of right middle cerebral artery
I63.312	Cerebral infarction due to thrombosis of left middle cerebral artery

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Code	Description
*I63.313	*Cerebral infarction due to thrombosis of bilateral middle cerebral arteries
I63.319	Cerebral infarction due to thrombosis of unspecified middle cerebral artery
I63.321	Cerebral infarction due to thrombosis of right anterior cerebral artery
I63.322	Cerebral infarction due to thrombosis of left anterior cerebral artery
*I63.323	*Cerebral infarction due to thrombosis of bilateral anterior arteries
I63.329	Cerebral infarction due to thrombosis of unspecified anterior cerebral artery
I63.331	Cerebral infarction due to thrombosis of right posterior cerebral artery
I63.332	Cerebral infarction due to thrombosis of left posterior cerebral artery
*I63.333	*Cerebral infarction to thrombosis of bilateral posterior arteries
I63.339	Cerebral infarction due to thrombosis of unspecified posterior cerebral artery
I63.341	Cerebral infarction due to thrombosis of right cerebellar artery
I63.342	Cerebral infarction due to thrombosis of left cerebellar artery
*I63.343	*Cerebral infarction to thrombosis of bilateral cerebellar arteries
I63.349	Cerebral infarction due to thrombosis of unspecified cerebellar artery
I63.39	Cerebral infarction due to thrombosis of other cerebral artery
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery
I63.411	Cerebral infarction due to embolism of right middle cerebral artery
I63.412	Cerebral infarction due to embolism of left middle cerebral artery
*I63.413	*Cerebral infarction due to embolism of bilateral middle cerebral arteries
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery
*I63.423	*Cerebral infarction due to embolism of bilateral anterior cerebral arteries
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery
*I63.433	*Cerebral infarction due to embolism of bilateral posterior cerebral arteries
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery
I63.441	Cerebral infarction due to embolism of right cerebellar artery
I63.442	Cerebral infarction due to embolism of left cerebellar artery



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Code	Description
*I63.443	*Cerebral infarction due to embolism of bilateral cerebellar arteries
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery
I63.49	Cerebral infarction due to embolism of other cerebral artery
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery
I63.511	Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery
I63.512	Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery
*I63.513	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle arteries
I63.519	Cerebral infarction due to unspecified occlusion or stenosis of unspecified middle cerebral artery
I63.521	Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery
I63.522	Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery
*I63.523	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior arteries
I63.529	Cerebral infarction due to unspecified occlusion or stenosis of unspecified anterior cerebral artery
I63.531	Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery
I63.532	Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery
*I63.533	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior arteries
I63.539	Cerebral infarction due to unspecified occlusion or stenosis of unspecified posterior cerebral artery
I63.541	Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery
I63.542	Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery
*I63.543	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries
I63.549	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebellar artery
I63.59	Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery
I63.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic
I63.8	Other cerebral infarction
I63.9	Cerebral infarction, unspecified
I65.01	Occlusion and stenosis of right vertebral artery



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Code	Description
I65.02	Occlusion and stenosis of left vertebral artery
I65.03	Occlusion and stenosis of bilateral vertebral arteries
I65.09	Occlusion and stenosis of unspecified vertebral artery
I65.1	Occlusion and stenosis of basilar artery
I65.21	Occlusion and stenosis of right carotid artery
I65.22	Occlusion and stenosis of left carotid artery
I65.23	Occlusion and stenosis of bilateral carotid arteries
I65.29	Occlusion and stenosis of unspecified carotid artery
I65.8	Occlusion and stenosis of other precerebral arteries
I65.9	Occlusion and stenosis of unspecified precerebral artery
I66.01	Occlusion and stenosis of right middle cerebral artery
I66.02	Occlusion and stenosis of left middle cerebral artery
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries
I66.09	Occlusion and stenosis of unspecified middle cerebral artery
I66.11	Occlusion and stenosis of right anterior cerebral artery
I66.12	Occlusion and stenosis of left anterior cerebral artery
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery
I66.21	Occlusion and stenosis of right posterior cerebral artery
I66.22	Occlusion and stenosis of left posterior cerebral artery
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery
I66.3	Occlusion and stenosis of cerebellar arteries
I66.8	Occlusion and stenosis of other cerebral arteries
I66.9	Occlusion and stenosis of unspecified cerebral artery
I67.0	Dissection of cerebral arteries, nonruptured
I67.2	Cerebral atherosclerosis
I67.6	Nonpyogenic thrombosis of intracranial venous system
I67.81	Acute cerebrovascular insufficiency
I67.82	Cerebral ischemia

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Code	Description
I67.841	Reversible cerebrovascular vasoconstriction syndrome
I67.848	Other cerebrovascular vasospasm and vasoconstriction
I67.89	Other cerebrovascular disease
I70.0	Atherosclerosis of aorta
I70.1	Atherosclerosis of renal artery
I70.201	Unspecified atherosclerosis of native arteries of extremities, right leg
I70.202	Unspecified atherosclerosis of native arteries of extremities, left leg
I70.203	Unspecified atherosclerosis of native arteries of extremities, bilateral legs
I70.208	Unspecified atherosclerosis of native arteries of extremities, other extremity
I70.209	Unspecified atherosclerosis of native arteries of extremities, unspecified extremity
I70.211	Atherosclerosis of native arteries of extremities with intermittent claudication, right leg
I70.212	Atherosclerosis of native arteries of extremities with intermittent claudication, left leg
I70.213	Atherosclerosis of native arteries of extremities with intermittent claudication, bilateral legs
I70.218	Atherosclerosis of native arteries of extremities with intermittent claudication, other extremity
I70.219	Atherosclerosis of native arteries of extremities with intermittent claudication, unspecified extremity
I70.221	Atherosclerosis of native arteries of extremities with rest pain, right leg
I70.222	Atherosclerosis of native arteries of extremities with rest pain, left leg
I70.223	Atherosclerosis of native arteries of extremities with rest pain, bilateral legs
I70.228	Atherosclerosis of native arteries of extremities with rest pain, other extremity
I70.229	Atherosclerosis of native arteries of extremities with rest pain, unspecified extremity
I70.231	Atherosclerosis of native arteries of right leg with ulceration of thigh
I70.232	Atherosclerosis of native arteries of right leg with ulceration of calf
I70.233	Atherosclerosis of native arteries of right leg with ulceration of ankle
I70.234	Atherosclerosis of native arteries of right leg with ulceration of heel and midfoot
I70.235	Atherosclerosis of native arteries of right leg with ulceration of other part of foot
I70.238	Atherosclerosis of native arteries of right leg with ulceration of other part of lower right leg
I70.239	Atherosclerosis of native arteries of right leg with ulceration of unspecified site
I70.241	Atherosclerosis of native arteries of left leg with ulceration of thigh
I70.242	Atherosclerosis of native arteries of left leg with ulceration of calf

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Code	Description
I70.243	Atherosclerosis of native arteries of left leg with ulceration of ankle
I70.244	Atherosclerosis of native arteries of left leg with ulceration of heel and midfoot
I70.245	Atherosclerosis of native arteries of left leg with ulceration of other part of foot
I70.248	Atherosclerosis of native arteries of left leg with ulceration of other part of lower left leg
I70.249	Atherosclerosis of native arteries of left leg with ulceration of unspecified site
I70.25	Atherosclerosis of native arteries of other extremities with ulceration
I70.261	Atherosclerosis of native arteries of extremities with gangrene, right leg
I70.262	Atherosclerosis of native arteries of extremities with gangrene, left leg
I70.263	Atherosclerosis of native arteries of extremities with gangrene, bilateral legs
I70.268	Atherosclerosis of native arteries of extremities with gangrene, other extremity
I70.269	Atherosclerosis of native arteries of extremities with gangrene, unspecified extremity
I70.291	Other atherosclerosis of native arteries of extremities, right leg
I70.292	Other atherosclerosis of native arteries of extremities, left leg
I70.293	Other atherosclerosis of native arteries of extremities, bilateral legs
I70.298	Other atherosclerosis of native arteries of extremities, other extremity
I70.299	Other atherosclerosis of native arteries of extremities, unspecified extremity
I70.301	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg
I70.302	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg
I70.303	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs
I70.308	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity
I70.309	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, unspecified extremity
I70.311	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, right leg
I70.312	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, left leg
I70.313	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs



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Code	Description
I70.318	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, other extremity
I70.319	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, unspecified extremity
I70.321	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, right leg
I70.322	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, left leg
I70.323	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, bilateral legs
I70.328	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, other extremity
I70.329	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.331	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of thigh
I70.332	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of calf
I70.333	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of ankle
I70.334	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.335	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of foot
I70.338	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.339	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of unspecified site
I70.341	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of thigh
I70.342	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of calf
I70.343	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of ankle
I70.344	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.345	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of foot
I70.348	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of lower leg

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Code	Description
I70.349	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of unspecified site
I70.35	Atherosclerosis of unspecified type of bypass graft(s) of other extremity with ulceration
I70.361	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, right leg
I70.362	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, left leg
I70.363	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, bilateral legs
I70.368	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, other extremity
I70.369	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.391	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg
I70.392	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg
I70.393	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs
I70.398	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity
I70.399	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, unspecified extremity
I70.401	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, right leg
I70.402	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, left leg
I70.403	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs
I70.408	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, other extremity
I70.409	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, unspecified extremity
I70.411	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, right leg
I70.412	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, left leg
I70.413	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, bilateral legs

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Code	Description
I70.418	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, other extremity
I70.419	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, unspecified extremity
I70.421	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, right leg
I70.422	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, left leg
I70.423	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, bilateral legs
I70.428	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, other extremity
I70.429	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.431	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of thigh
I70.432	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of calf
I70.433	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of ankle
I70.434	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.435	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of foot
I70.438	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.439	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of unspecified site
I70.441	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of thigh
I70.442	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of calf
I70.443	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of ankle
I70.444	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.445	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of foot
I70.448	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.449	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of unspecified site

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Code	Description
I70.45	Atherosclerosis of autologous vein bypass graft(s) of other extremity with ulceration
I70.461	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, right leg
I70.462	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, left leg
I70.463	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, bilateral legs
I70.468	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, other extremity
I70.469	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.491	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, right leg
I70.492	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, left leg
I70.493	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs
I70.498	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, other extremity
I70.499	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, unspecified extremity
I70.501	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, right leg
I70.502	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, left leg
I70.503	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, bilateral legs
I70.508	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, other extremity
I70.509	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, unspecified extremity
I70.511	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, right leg
I70.512	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, left leg
I70.513	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, bilateral legs
I70.518	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, other extremity

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Code	Description
I70.519	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, unspecified extremity
I70.521	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, right leg
I70.522	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, left leg
I70.523	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, bilateral legs
I70.528	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, other extremity
I70.529	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.531	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of thigh
I70.532	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of calf
I70.533	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of ankle
I70.534	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.535	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of foot
I70.538	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.539	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of unspecified site
I70.541	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of thigh
I70.542	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of calf
I70.543	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of ankle
I70.544	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.545	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of foot



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Code	Description
I70.548	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.549	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of unspecified site
I70.55	Atherosclerosis of nonautologous biological bypass graft(s) of other extremity with ulceration
I70.561	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, right leg
I70.562	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, left leg
I70.563	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, bilateral legs
I70.568	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, other extremity
I70.569	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.591	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, right leg
I70.592	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, left leg
I70.593	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, bilateral legs
I70.598	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, other extremity
I70.599	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, unspecified extremity
I70.601	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, right leg
I70.602	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, left leg
I70.603	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, bilateral legs
I70.608	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, other extremity
I70.609	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, unspecified extremity
I70.611	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, right leg



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Code	Description
I70.612	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, left leg
I70.613	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, bilateral legs
I70.618	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, other extremity
I70.619	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, unspecified extremity
I70.621	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, right leg
I70.622	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, left leg
I70.623	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, bilateral legs
I70.628	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, other extremity
I70.629	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.631	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of thigh
I70.632	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of calf
I70.633	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of ankle
I70.634	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.635	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of foot
I70.638	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.639	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of unspecified site
I70.641	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of thigh
I70.642	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of calf
I70.643	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of ankle
I70.644	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.645	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of foot



**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.648	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.649	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of unspecified site
I70.65	Atherosclerosis of nonbiological bypass graft(s) of other extremity with ulceration
I70.661	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, right leg
I70.662	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, left leg
I70.663	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, bilateral legs
I70.668	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, other extremity
I70.669	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.691	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, right leg
I70.692	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, left leg
I70.693	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, bilateral legs
I70.698	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, other extremity
I70.699	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, unspecified extremity
I70.701	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, right leg
I70.702	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, left leg
I70.703	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, bilateral legs
I70.708	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, other extremity
I70.709	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, unspecified extremity
I70.711	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, right leg
I70.712	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, left leg
I70.713	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs
I70.718	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, other extremity



**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.719	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, unspecified extremity
I70.721	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, right leg
I70.722	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, left leg
I70.723	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, bilateral legs
I70.728	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, other extremity
I70.729	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.731	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of thigh
I70.732	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of calf
I70.733	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of ankle
I70.734	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.735	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of foot
I70.738	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.739	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of unspecified site
I70.741	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of thigh
I70.742	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of calf
I70.743	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of ankle
I70.744	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.745	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of foot
I70.748	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.749	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of unspecified site
I70.75	Atherosclerosis of other type of bypass graft(s) of other extremity with ulceration
I70.761	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, right leg



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Code	Description
I70.762	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, left leg
I70.763	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, bilateral legs
I70.768	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, other extremity
I70.769	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.791	Other atherosclerosis of other type of bypass graft(s) of the extremities, right leg
I70.792	Other atherosclerosis of other type of bypass graft(s) of the extremities, left leg
I70.793	Other atherosclerosis of other type of bypass graft(s) of the extremities, bilateral legs
I70.798	Other atherosclerosis of other type of bypass graft(s) of the extremities, other extremity
I70.799	Other atherosclerosis of other type of bypass graft(s) of the extremities, unspecified extremity
I70.8	Atherosclerosis of other arteries
I70.90	Unspecified atherosclerosis
I70.91	Generalized atherosclerosis
I70.92	Chronic total occlusion of artery of the extremities
I71.00	Dissection of unspecified site of aorta
I71.01	Dissection of thoracic aorta
I71.02	Dissection of abdominal aorta
I71.03	Dissection of thoracoabdominal aorta
I71.1	Thoracic aortic aneurysm, ruptured
I71.2	Thoracic aortic aneurysm, without rupture
I71.3	Abdominal aortic aneurysm, ruptured
I71.4	Abdominal aortic aneurysm, without rupture
I71.5	Thoracoabdominal aortic aneurysm, ruptured
I71.6	Thoracoabdominal aortic aneurysm, without rupture
I71.8	Aortic aneurysm of unspecified site, ruptured
I71.9	Aortic aneurysm of unspecified site, without rupture
I73.00	Raynaud's syndrome without gangrene
I73.01	Raynaud's syndrome with gangrene
I73.1	Thromboangiitis obliterans [Buerger's disease]

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Code	Description
I73.81	Erythromelalgia
I73.89	Other specified peripheral vascular diseases
I73.9	Peripheral vascular disease, unspecified
I74.01	Saddle embolus of abdominal aorta
I74.09	Other arterial embolism and thrombosis of abdominal aorta
I74.10	Embolism and thrombosis of unspecified parts of aorta
I74.11	Embolism and thrombosis of thoracic aorta
I74.19	Embolism and thrombosis of other parts of aorta
I74.2	Embolism and thrombosis of arteries of the upper extremities
I74.3	Embolism and thrombosis of arteries of the lower extremities
I74.4	Embolism and thrombosis of arteries of extremities, unspecified
I74.5	Embolism and thrombosis of iliac artery
I74.8	Embolism and thrombosis of other arteries
I74.9	Embolism and thrombosis of unspecified artery
I77.1	Stricture of artery
I77.2	Rupture of artery
I77.6	Arteritis, unspecified
I77.71	Dissection of carotid artery
I77.72	Dissection of iliac artery
I77.73	Dissection of renal artery
I77.74	Dissection of vertebral artery
I77.79	Dissection of other specified artery
I78.0	Hereditary hemorrhagic telangiectasia
I78.8	Other diseases of capillaries
I78.9	Disease of capillaries, unspecified
I79.0	Aneurysm of aorta in diseases classified elsewhere
I79.1	Aortitis in diseases classified elsewhere
I79.8	Other disorders of arteries, arterioles and capillaries in diseases classified elsewhere
I80.00	Phlebitis and thrombophlebitis of superficial vessels of unspecified lower extremity
I80.01	Phlebitis and thrombophlebitis of superficial vessels of right lower extremity

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Code	Description
I80.02	Phlebitis and thrombophlebitis of superficial vessels of left lower extremity
I80.03	Phlebitis and thrombophlebitis of superficial vessels of lower extremities, bilateral
I80.10	Phlebitis and thrombophlebitis of unspecified femoral vein
I80.11	Phlebitis and thrombophlebitis of right femoral vein
I80.12	Phlebitis and thrombophlebitis of left femoral vein
I80.13	Phlebitis and thrombophlebitis of femoral vein, bilateral
I80.201	Phlebitis and thrombophlebitis of unspecified deep vessels of right lower extremity
I80.202	Phlebitis and thrombophlebitis of unspecified deep vessels of left lower extremity
I80.203	Phlebitis and thrombophlebitis of unspecified deep vessels of lower extremities, bilateral
I80.209	Phlebitis and thrombophlebitis of unspecified deep vessels of unspecified lower extremity
I80.211	Phlebitis and thrombophlebitis of right iliac vein
I80.212	Phlebitis and thrombophlebitis of left iliac vein
I80.213	Phlebitis and thrombophlebitis of iliac vein, bilateral
I80.219	Phlebitis and thrombophlebitis of unspecified iliac vein
I80.221	Phlebitis and thrombophlebitis of right popliteal vein
I80.222	Phlebitis and thrombophlebitis of left popliteal vein
I80.223	Phlebitis and thrombophlebitis of popliteal vein, bilateral
I80.229	Phlebitis and thrombophlebitis of unspecified popliteal vein
I80.231	Phlebitis and thrombophlebitis of right tibial vein
I80.232	Phlebitis and thrombophlebitis of left tibial vein
I80.233	Phlebitis and thrombophlebitis of tibial vein, bilateral
I80.239	Phlebitis and thrombophlebitis of unspecified tibial vein
I80.291	Phlebitis and thrombophlebitis of other deep vessels of right lower extremity
I80.292	Phlebitis and thrombophlebitis of other deep vessels of left lower extremity
I80.293	Phlebitis and thrombophlebitis of other deep vessels of lower extremity, bilateral
I80.299	Phlebitis and thrombophlebitis of other deep vessels of unspecified lower extremity
I80.3	Phlebitis and thrombophlebitis of lower extremities, unspecified
I80.8	Phlebitis and thrombophlebitis of other sites
I80.9	Phlebitis and thrombophlebitis of unspecified site
I81	Portal vein thrombosis



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Code	Description
I82.0	Budd-Chiari syndrome
I82.1	Thrombophlebitis migrans
I82.210	Acute embolism and thrombosis of superior vena cava
I82.211	Chronic embolism and thrombosis of superior vena cava
I82.220	Acute embolism and thrombosis of inferior vena cava
I82.221	Chronic embolism and thrombosis of inferior vena cava
I82.290	Acute embolism and thrombosis of other thoracic veins
I82.291	Chronic embolism and thrombosis of other thoracic veins
I82.3	Embolism and thrombosis of renal vein
I82.401	Acute embolism and thrombosis of unspecified deep veins of right lower extremity
I82.402	Acute embolism and thrombosis of unspecified deep veins of left lower extremity
I82.403	Acute embolism and thrombosis of unspecified deep veins of lower extremity, bilateral
I82.409	Acute embolism and thrombosis of unspecified deep veins of unspecified lower extremity
I82.411	Acute embolism and thrombosis of right femoral vein
I82.412	Acute embolism and thrombosis of left femoral vein
I82.413	Acute embolism and thrombosis of femoral vein, bilateral
I82.419	Acute embolism and thrombosis of unspecified femoral vein
I82.421	Acute embolism and thrombosis of right iliac vein
I82.422	Acute embolism and thrombosis of left iliac vein
I82.423	Acute embolism and thrombosis of iliac vein, bilateral
I82.429	Acute embolism and thrombosis of unspecified iliac vein
I82.431	Acute embolism and thrombosis of right popliteal vein
I82.432	Acute embolism and thrombosis of left popliteal vein
I82.433	Acute embolism and thrombosis of popliteal vein, bilateral
I82.439	Acute embolism and thrombosis of unspecified popliteal vein
I82.441	Acute embolism and thrombosis of right tibial vein
I82.442	Acute embolism and thrombosis of left tibial vein
I82.443	Acute embolism and thrombosis of tibial vein, bilateral
I82.449	Acute embolism and thrombosis of unspecified tibial vein
I82.491	Acute embolism and thrombosis of other specified deep vein of right lower extremity

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Code	Description
I82.492	Acute embolism and thrombosis of other specified deep vein of left lower extremity
I82.493	Acute embolism and thrombosis of other specified deep vein of lower extremity, bilateral
I82.499	Acute embolism and thrombosis of other specified deep vein of unspecified lower extremity
I82.4Y1	Acute embolism and thrombosis of unspecified deep veins of right proximal lower extremity
I82.4Y2	Acute embolism and thrombosis of unspecified deep veins of left proximal lower extremity
I82.4Y3	Acute embolism and thrombosis of unspecified deep veins of proximal lower extremity, bilateral
I82.4Y9	Acute embolism and thrombosis of unspecified deep veins of unspecified proximal lower extremity
I82.4Z1	Acute embolism and thrombosis of unspecified deep veins of right distal lower extremity
I82.4Z2	Acute embolism and thrombosis of unspecified deep veins of left distal lower extremity
I82.4Z3	Acute embolism and thrombosis of unspecified deep veins of distal lower extremity, bilateral
I82.4Z9	Acute embolism and thrombosis of unspecified deep veins of unspecified distal lower extremity
I82.501	Chronic embolism and thrombosis of unspecified deep veins of right lower extremity
I82.502	Chronic embolism and thrombosis of unspecified deep veins of left lower extremity
I82.503	Chronic embolism and thrombosis of unspecified deep veins of lower extremity, bilateral
I82.509	Chronic embolism and thrombosis of unspecified deep veins of unspecified lower extremity
I82.511	Chronic embolism and thrombosis of right femoral vein
I82.512	Chronic embolism and thrombosis of left femoral vein
I82.513	Chronic embolism and thrombosis of femoral vein, bilateral
I82.519	Chronic embolism and thrombosis of unspecified femoral vein
I82.521	Chronic embolism and thrombosis of right iliac vein
I82.522	Chronic embolism and thrombosis of left iliac vein
I82.523	Chronic embolism and thrombosis of iliac vein, bilateral
I82.529	Chronic embolism and thrombosis of unspecified iliac vein
I82.531	Chronic embolism and thrombosis of right popliteal vein
I82.532	Chronic embolism and thrombosis of left popliteal vein
I82.533	Chronic embolism and thrombosis of popliteal vein, bilateral
I82.539	Chronic embolism and thrombosis of unspecified popliteal vein
I82.541	Chronic embolism and thrombosis of right tibial vein

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Code	Description
I82.542	Chronic embolism and thrombosis of left tibial vein
I82.543	Chronic embolism and thrombosis of tibial vein, bilateral
I82.549	Chronic embolism and thrombosis of unspecified tibial vein
I82.591	Chronic embolism and thrombosis of other specified deep vein of right lower extremity
I82.592	Chronic embolism and thrombosis of other specified deep vein of left lower extremity
I82.593	Chronic embolism and thrombosis of other specified deep vein of lower extremity, bilateral
I82.599	Chronic embolism and thrombosis of other specified deep vein of unspecified lower extremity
I82.5Y1	Chronic embolism and thrombosis of unspecified deep veins of right proximal lower extremity
I82.5Y2	Chronic embolism and thrombosis of unspecified deep veins of left proximal lower extremity
I82.5Y3	Chronic embolism and thrombosis of unspecified deep veins of proximal lower extremity, bilateral
I82.5Y9	Chronic embolism and thrombosis of unspecified deep veins of unspecified proximal lower extremity
I82.5Z1	Chronic embolism and thrombosis of unspecified deep veins of right distal lower extremity
I82.5Z2	Chronic embolism and thrombosis of unspecified deep veins of left distal lower extremity
I82.5Z3	Chronic embolism and thrombosis of unspecified deep veins of distal lower extremity, bilateral
I82.5Z9	Chronic embolism and thrombosis of unspecified deep veins of unspecified distal lower extremity
I82.601	Acute embolism and thrombosis of unspecified veins of right upper extremity
I82.602	Acute embolism and thrombosis of unspecified veins of left upper extremity
I82.603	Acute embolism and thrombosis of unspecified veins of upper extremity, bilateral
I82.609	Acute embolism and thrombosis of unspecified veins of unspecified upper extremity
I82.611	Acute embolism and thrombosis of superficial veins of right upper extremity
I82.612	Acute embolism and thrombosis of superficial veins of left upper extremity
I82.613	Acute embolism and thrombosis of superficial veins of upper extremity, bilateral
I82.619	Acute embolism and thrombosis of superficial veins of unspecified upper extremity
I82.621	Acute embolism and thrombosis of deep veins of right upper extremity
I82.622	Acute embolism and thrombosis of deep veins of left upper extremity
I82.623	Acute embolism and thrombosis of deep veins of upper extremity, bilateral

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Code	Description
I82.629	Acute embolism and thrombosis of deep veins of unspecified upper extremity
I82.701	Chronic embolism and thrombosis of unspecified veins of right upper extremity
I82.702	Chronic embolism and thrombosis of unspecified veins of left upper extremity
I82.703	Chronic embolism and thrombosis of unspecified veins of upper extremity, bilateral
I82.709	Chronic embolism and thrombosis of unspecified veins of unspecified upper extremity
I82.711	Chronic embolism and thrombosis of superficial veins of right upper extremity
I82.712	Chronic embolism and thrombosis of superficial veins of left upper extremity
I82.713	Chronic embolism and thrombosis of superficial veins of upper extremity, bilateral
I82.719	Chronic embolism and thrombosis of superficial veins of unspecified upper extremity
I82.721	Chronic embolism and thrombosis of deep veins of right upper extremity
I82.722	Chronic embolism and thrombosis of deep veins of left upper extremity
I82.723	Chronic embolism and thrombosis of deep veins of upper extremity, bilateral
I82.729	Chronic embolism and thrombosis of deep veins of unspecified upper extremity
I82.811	Embolism and thrombosis of superficial veins of right lower extremities
I82.812	Embolism and thrombosis of superficial veins of left lower extremities
I82.813	Embolism and thrombosis of superficial veins of lower extremities, bilateral
I82.819	Embolism and thrombosis of superficial veins of unspecified lower extremities
I82.890	Acute embolism and thrombosis of other specified veins
I82.891	Chronic embolism and thrombosis of other specified veins
I82.90	Acute embolism and thrombosis of unspecified vein
I82.91	Chronic embolism and thrombosis of unspecified vein
I82.A11	Acute embolism and thrombosis of right axillary vein
I82.A12	Acute embolism and thrombosis of left axillary vein
I82.A13	Acute embolism and thrombosis of axillary vein, bilateral
I82.A19	Acute embolism and thrombosis of unspecified axillary vein
I82.A21	Chronic embolism and thrombosis of right axillary vein
I82.A22	Chronic embolism and thrombosis of left axillary vein
I82.A23	Chronic embolism and thrombosis of axillary vein, bilateral
I82.A29	Chronic embolism and thrombosis of unspecified axillary vein
I82.B11	Acute embolism and thrombosis of right subclavian vein



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Code	Description
I82.B12	Acute embolism and thrombosis of left subclavian vein
I82.B13	Acute embolism and thrombosis of subclavian vein, bilateral
I82.B19	Acute embolism and thrombosis of unspecified subclavian vein
I82.B21	Chronic embolism and thrombosis of right subclavian vein
I82.B22	Chronic embolism and thrombosis of left subclavian vein
I82.B23	Chronic embolism and thrombosis of subclavian vein, bilateral
I82.B29	Chronic embolism and thrombosis of unspecified subclavian vein
I82.C11	Acute embolism and thrombosis of right internal jugular vein
I82.C12	Acute embolism and thrombosis of left internal jugular vein
I82.C13	Acute embolism and thrombosis of internal jugular vein, bilateral
I82.C19	Acute embolism and thrombosis of unspecified internal jugular vein
I82.C21	Chronic embolism and thrombosis of right internal jugular vein
I82.C22	Chronic embolism and thrombosis of left internal jugular vein
I82.C23	Chronic embolism and thrombosis of internal jugular vein, bilateral
I82.C29	Chronic embolism and thrombosis of unspecified internal jugular vein
I85.00	Esophageal varices without bleeding
I85.01	Esophageal varices with bleeding
I86.4	Gastric varices
I86.8	Varicose veins of other specified sites
I87.001	Postthrombotic syndrome without complications of right lower extremity
I87.002	Postthrombotic syndrome without complications of left lower extremity
I87.003	Postthrombotic syndrome without complications of bilateral lower extremity
I87.009	Postthrombotic syndrome without complications of unspecified extremity
I87.011	Postthrombotic syndrome with ulcer of right lower extremity
I87.012	Postthrombotic syndrome with ulcer of left lower extremity
I87.013	Postthrombotic syndrome with ulcer of bilateral lower extremity
I87.019	Postthrombotic syndrome with ulcer of unspecified lower extremity
I87.021	Postthrombotic syndrome with inflammation of right lower extremity
I87.022	Postthrombotic syndrome with inflammation of left lower extremity
I87.023	Postthrombotic syndrome with inflammation of bilateral lower extremity

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Code	Description
I87.029	Postthrombotic syndrome with inflammation of unspecified lower extremity
I87.031	Postthrombotic syndrome with ulcer and inflammation of right lower extremity
I87.032	Postthrombotic syndrome with ulcer and inflammation of left lower extremity
I87.033	Postthrombotic syndrome with ulcer and inflammation of bilateral lower extremity
I87.039	Postthrombotic syndrome with ulcer and inflammation of unspecified lower extremity
I87.091	Postthrombotic syndrome with other complications of right lower extremity
I87.092	Postthrombotic syndrome with other complications of left lower extremity
I87.093	Postthrombotic syndrome with other complications of bilateral lower extremity
I87.099	Postthrombotic syndrome with other complications of unspecified lower extremity
I87.1	Compression of vein
I87.2	Venous insufficiency (chronic) (peripheral)
I87.8	Other specified disorders of veins
I96	Gangrene, not elsewhere classified
I97.0	Postcardiotomy syndrome
I97.110	Postprocedural cardiac insufficiency following cardiac surgery
I97.111	Postprocedural cardiac insufficiency following other surgery
I97.120	Postprocedural cardiac arrest following cardiac surgery
I97.121	Postprocedural cardiac arrest following other surgery
I97.130	Postprocedural heart failure following cardiac surgery
I97.131	Postprocedural heart failure following other surgery
I97.190	Other postprocedural cardiac functional disturbances following cardiac surgery
I97.191	Other postprocedural cardiac functional disturbances following other surgery
I97.410	Intraoperative hemorrhage and hematoma of a circulatory system organ or structure complicating a cardiac catheterization
I97.411	Intraoperative hemorrhage and hematoma of a circulatory system organ or structure complicating a cardiac bypass
I97.418	Intraoperative hemorrhage and hematoma of a circulatory system organ or structure complicating other circulatory system procedure
I97.42	Intraoperative hemorrhage and hematoma of a circulatory system organ or structure complicating other procedure
I97.610	Postprocedural hemorrhage of a circulatory system organ or structure following a cardiac catheterization

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Code	Description
I97.611	Postprocedural hemorrhage of a circulatory system organ or structure following cardiac bypass
I97.618	Postprocedural hemorrhage of a circulatory system organ or structure following other circulatory system procedure
I97.620	Postprocedural hemorrhage of a circulatory system organ or structure following other procedure
I97.621	Postprocedural hematoma of a circulatory system organ or structure following other procedure
*I97.630	*Postprocedural hematoma of a circulatory system organ or structure following a cardiac catheterization
*I97.631	*Postprocedural hematoma of a circulatory system organ or structure following cardiac bypass
*I97.638	*Postprocedural hematoma of a circulatory system organ or structure following other circulatory system procedure
I97.810	Intraoperative cerebrovascular infarction during cardiac surgery
I97.811	Intraoperative cerebrovascular infarction during other surgery
I97.820	Postprocedural cerebrovascular infarction following cardiac surgery
I97.821	Postprocedural cerebrovascular infarction following other surgery
I99.8	Other disorder of circulatory system
J18.2	Hypostatic pneumonia, unspecified organism
J81.1	Chronic pulmonary edema
J90	Pleural effusion, not elsewhere classified
J91.0	Malignant pleural effusion
J94.0	Chylous effusion
J94.2	Hemothorax
J94.8	Other specified pleural conditions
J95.61	Intraoperative hemorrhage and hematoma of a respiratory system organ or structure complicating a respiratory system procedure
J95.62	Intraoperative hemorrhage and hematoma of a respiratory system organ or structure complicating other procedure
J95.830	Postprocedural hemorrhage of a respiratory system organ or structure following a respiratory system procedure
J95.831	Postprocedural hemorrhage of a respiratory system organ or structure following other procedure

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Code	Description
*J95.860	*Postprocedural hematoma of a respiratory system organ or structure following a respiratory system procedure
*J95.861	*Postprocedural hematoma of a respiratory system organ or structure following other procedure
K22.6	Gastro-esophageal laceration-hemorrhage syndrome
K22.8	Other specified diseases of esophagus
K25.0	Acute gastric ulcer with hemorrhage
K25.1	Acute gastric ulcer with perforation
K25.2	Acute gastric ulcer with both hemorrhage and perforation
K25.3	Acute gastric ulcer without hemorrhage or perforation
K25.4	Chronic or unspecified gastric ulcer with hemorrhage
K25.5	Chronic or unspecified gastric ulcer with perforation
K25.6	Chronic or unspecified gastric ulcer with both hemorrhage and perforation
K25.7	Chronic gastric ulcer without hemorrhage or perforation
K25.9	Gastric ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K26.0	Acute duodenal ulcer with hemorrhage
K26.1	Acute duodenal ulcer with perforation
K26.2	Acute duodenal ulcer with both hemorrhage and perforation
K26.3	Acute duodenal ulcer without hemorrhage or perforation
K26.4	Chronic or unspecified duodenal ulcer with hemorrhage
K26.5	Chronic or unspecified duodenal ulcer with perforation
K26.6	Chronic or unspecified duodenal ulcer with both hemorrhage and perforation
K26.7	Chronic duodenal ulcer without hemorrhage or perforation
K26.9	Duodenal ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K27.0	Acute peptic ulcer, site unspecified, with hemorrhage
K27.1	Acute peptic ulcer, site unspecified, with perforation
K27.2	Acute peptic ulcer, site unspecified, with both hemorrhage and perforation
K27.3	Acute peptic ulcer, site unspecified, without hemorrhage or perforation
K27.4	Chronic or unspecified peptic ulcer, site unspecified, with hemorrhage
K27.5	Chronic or unspecified peptic ulcer, site unspecified, with perforation
K27.6	Chronic or unspecified peptic ulcer, site unspecified, with both hemorrhage and perforation

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Code	Description
K27.7	Chronic peptic ulcer, site unspecified, without hemorrhage or perforation
K27.9	Peptic ulcer, site unspecified, unspecified as acute or chronic, without hemorrhage or perforation
K28.0	Acute gastrojejunal ulcer with hemorrhage
K28.1	Acute gastrojejunal ulcer with perforation
K28.2	Acute gastrojejunal ulcer with both hemorrhage and perforation
K28.3	Acute gastrojejunal ulcer without hemorrhage or perforation
K28.4	Chronic or unspecified gastrojejunal ulcer with hemorrhage
K28.5	Chronic or unspecified gastrojejunal ulcer with perforation
K28.6	Chronic or unspecified gastrojejunal ulcer with both hemorrhage and perforation
K28.7	Chronic gastrojejunal ulcer without hemorrhage or perforation
K28.9	Gastrojejunal ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K29.00	Acute gastritis without bleeding
K29.01	Acute gastritis with bleeding
K29.20	Alcoholic gastritis without bleeding
K29.21	Alcoholic gastritis with bleeding
K29.30	Chronic superficial gastritis without bleeding
K29.31	Chronic superficial gastritis with bleeding
K29.40	Chronic atrophic gastritis without bleeding
K29.41	Chronic atrophic gastritis with bleeding
K29.50	Unspecified chronic gastritis without bleeding
K29.51	Unspecified chronic gastritis with bleeding
K29.60	Other gastritis without bleeding
K29.61	Other gastritis with bleeding
K29.70	Gastritis, unspecified, without bleeding
K29.71	Gastritis, unspecified, with bleeding
K29.80	Duodenitis without bleeding
K29.81	Duodenitis with bleeding
K29.90	Gastroduodenitis, unspecified, without bleeding
K29.91	Gastroduodenitis, unspecified, with bleeding
K50.00	Crohn's disease of small intestine without complications

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Code	Description
K50.011	Crohn's disease of small intestine with rectal bleeding
K50.012	Crohn's disease of small intestine with intestinal obstruction
K50.013	Crohn's disease of small intestine with fistula
K50.014	Crohn's disease of small intestine with abscess
K50.018	Crohn's disease of small intestine with other complication
K50.019	Crohn's disease of small intestine with unspecified complications
K50.10	Crohn's disease of large intestine without complications
K50.111	Crohn's disease of large intestine with rectal bleeding
K50.112	Crohn's disease of large intestine with intestinal obstruction
K50.113	Crohn's disease of large intestine with fistula
K50.114	Crohn's disease of large intestine with abscess
K50.118	Crohn's disease of large intestine with other complication
K50.119	Crohn's disease of large intestine with unspecified complications
K50.80	Crohn's disease of both small and large intestine without complications
K50.811	Crohn's disease of both small and large intestine with rectal bleeding
K50.812	Crohn's disease of both small and large intestine with intestinal obstruction
K50.813	Crohn's disease of both small and large intestine with fistula
K50.814	Crohn's disease of both small and large intestine with abscess
K50.818	Crohn's disease of both small and large intestine with other complication
K50.819	Crohn's disease of both small and large intestine with unspecified complications
K50.90	Crohn's disease, unspecified, without complications
K50.911	Crohn's disease, unspecified, with rectal bleeding
K50.912	Crohn's disease, unspecified, with intestinal obstruction
K50.913	Crohn's disease, unspecified, with fistula
K50.914	Crohn's disease, unspecified, with abscess
K50.918	Crohn's disease, unspecified, with other complication
K50.919	Crohn's disease, unspecified, with unspecified complications
K51.00	Ulcerative (chronic) pancolitis without complications
K51.011	Ulcerative (chronic) pancolitis with rectal bleeding
K51.012	Ulcerative (chronic) pancolitis with intestinal obstruction

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Code	Description
K51.013	Ulcerative (chronic) pancolitis with fistula
K51.014	Ulcerative (chronic) pancolitis with abscess
K51.018	Ulcerative (chronic) pancolitis with other complication
K51.019	Ulcerative (chronic) pancolitis with unspecified complications
K51.20	Ulcerative (chronic) proctitis without complications
K51.211	Ulcerative (chronic) proctitis with rectal bleeding
K51.212	Ulcerative (chronic) proctitis with intestinal obstruction
K51.213	Ulcerative (chronic) proctitis with fistula
K51.214	Ulcerative (chronic) proctitis with abscess
K51.218	Ulcerative (chronic) proctitis with other complication
K51.219	Ulcerative (chronic) proctitis with unspecified complications
K51.30	Ulcerative (chronic) rectosigmoiditis without complications
K51.311	Ulcerative (chronic) rectosigmoiditis with rectal bleeding
K51.312	Ulcerative (chronic) rectosigmoiditis with intestinal obstruction
K51.313	Ulcerative (chronic) rectosigmoiditis with fistula
K51.314	Ulcerative (chronic) rectosigmoiditis with abscess
K51.318	Ulcerative (chronic) rectosigmoiditis with other complication
K51.319	Ulcerative (chronic) rectosigmoiditis with unspecified complications
K51.40	Inflammatory polyps of colon without complications
K51.411	Inflammatory polyps of colon with rectal bleeding
K51.412	Inflammatory polyps of colon with intestinal obstruction
K51.413	Inflammatory polyps of colon with fistula
K51.414	Inflammatory polyps of colon with abscess
K51.418	Inflammatory polyps of colon with other complication
K51.419	Inflammatory polyps of colon with unspecified complications
K51.50	Left sided colitis without complications
K51.511	Left sided colitis with rectal bleeding
K51.512	Left sided colitis with intestinal obstruction
K51.513	Left sided colitis with fistula
K51.514	Left sided colitis with abscess



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Code	Description
K51.518	Left sided colitis with other complication
K51.519	Left sided colitis with unspecified complications
K51.80	Other ulcerative colitis without complications
K51.811	Other ulcerative colitis with rectal bleeding
K51.812	Other ulcerative colitis with intestinal obstruction
K51.813	Other ulcerative colitis with fistula
K51.814	Other ulcerative colitis with abscess
K51.818	Other ulcerative colitis with other complication
K51.819	Other ulcerative colitis with unspecified complications
K51.90	Ulcerative colitis, unspecified, without complications
K51.911	Ulcerative colitis, unspecified with rectal bleeding
K51.912	Ulcerative colitis, unspecified with intestinal obstruction
K51.913	Ulcerative colitis, unspecified with fistula
K51.914	Ulcerative colitis, unspecified with abscess
K51.918	Ulcerative colitis, unspecified with other complication
K51.919	Ulcerative colitis, unspecified with unspecified complications
K52.81	Eosinophilic gastritis or gastroenteritis
K55.011	Focal (segmental) acute (reversible) ischemia of small intestine
K55.012	Diffuse acute (reversible) ischemia of small intestine
K55.019	Acute (reversible) ischemia of small intestine, extent unspecified
K55.021	Focal (segmental) acute infarction of small intestine
K55.022	Diffuse acute infarction of small intestine
K55.029	Acute infarction of small intestine, extent unspecified
K55.031	Focal (segmental) acute (reversible) ischemia of large intestine
K55.032	Diffuse acute (reversible) ischemia of large intestine
K55.039	Acute (reversible) ischemia of large intestine, extent unspecified
K55.041	Focal (segmental) acute infarction of large intestine
K55.042	Diffuse acute infarction of large intestine
K55.049	Acute infarction of large intestine, extent unspecified
K55.051	Focal (segmental) acute (reversible) ischemia of intestine, part unspecified

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Code	Description
K55.052	Diffuse acute (reversible) ischemia of intestine, part unspecified
K55.059	Acute (reversible) ischemia of intestine, part and extent unspecified
K55.061	Focal (segmental) acute infarction of intestine, part unspecified
K55.062	Diffuse acute infarction of intestine, part unspecified
K55.069	Acute infarction of intestine, part and extent unspecified
K55.1	Chronic vascular disorders of intestine
*K55.30	*Necrotizing enterocolitis, unspecified
*K55.31	*Stage 1 necrotizing enterocolitis
*K55.32	*Stage 2 necrotizing enterocolitis
*K55.33	*Stage 3 necrotizing enterocolitis
K55.8	Other vascular disorders of intestine
K55.9	Vascular disorder of intestine, unspecified
K57.01	Diverticulitis of small intestine with perforation and abscess with bleeding
K57.11	Diverticulosis of small intestine without perforation or abscess with bleeding
K57.13	Diverticulitis of small intestine without perforation or abscess with bleeding
K57.20	Diverticulitis of large intestine with perforation and abscess without bleeding
K57.21	Diverticulitis of large intestine with perforation and abscess with bleeding
K57.30	Diverticulosis of large intestine without perforation or abscess without bleeding
K57.31	Diverticulosis of large intestine without perforation or abscess with bleeding
K57.32	Diverticulitis of large intestine without perforation or abscess without bleeding
K57.33	Diverticulitis of large intestine without perforation or abscess with bleeding
K57.40	Diverticulitis of both small and large intestine with perforation and abscess without bleeding
K57.41	Diverticulitis of both small and large intestine with perforation and abscess with bleeding
K57.50	Diverticulosis of both small and large intestine without perforation or abscess without bleeding
K57.51	Diverticulosis of both small and large intestine without perforation or abscess with bleeding
K57.52	Diverticulitis of both small and large intestine without perforation or abscess without bleeding
K57.53	Diverticulitis of both small and large intestine without perforation or abscess with bleeding
K57.80	Diverticulitis of intestine, part unspecified, with perforation and abscess without bleeding

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Code	Description
K57.81	Diverticulitis of intestine, part unspecified, with perforation and abscess with bleeding
K57.90	Diverticulosis of intestine, part unspecified, without perforation or abscess without bleeding
K57.91	Diverticulosis of intestine, part unspecified, without perforation or abscess with bleeding
K57.92	Diverticulitis of intestine, part unspecified, without perforation or abscess without bleeding
K57.93	Diverticulitis of intestine, part unspecified, without perforation or abscess with bleeding
*K59.31	*Toxic megacolon
K62.5	Hemorrhage of anus and rectum
K64.0	First degree hemorrhoids
K64.1	Second degree hemorrhoids
K64.2	Third degree hemorrhoids
K64.3	Fourth degree hemorrhoids
K64.8	Other hemorrhoids
K66.1	Hemoperitoneum
K70.0	Alcoholic fatty liver
K70.10	Alcoholic hepatitis without ascites
K70.11	Alcoholic hepatitis with ascites
K70.2	Alcoholic fibrosis and sclerosis of liver
K70.30	Alcoholic cirrhosis of liver without ascites
K70.31	Alcoholic cirrhosis of liver with ascites
K70.40	Alcoholic hepatic failure without coma
K70.41	Alcoholic hepatic failure with coma
K70.9	Alcoholic liver disease, unspecified
K71.0	Toxic liver disease with cholestasis
K71.10	Toxic liver disease with hepatic necrosis, without coma
K71.11	Toxic liver disease with hepatic necrosis, with coma
K71.2	Toxic liver disease with acute hepatitis
K71.3	Toxic liver disease with chronic persistent hepatitis
K71.4	Toxic liver disease with chronic lobular hepatitis
K71.50	Toxic liver disease with chronic active hepatitis without ascites
K71.51	Toxic liver disease with chronic active hepatitis with ascites

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Code	Description
K71.6	Toxic liver disease with hepatitis, not elsewhere classified
K71.7	Toxic liver disease with fibrosis and cirrhosis of liver
K71.8	Toxic liver disease with other disorders of liver
K71.9	Toxic liver disease, unspecified
K72.01	Acute and subacute hepatic failure with coma
K72.10	Chronic hepatic failure without coma
K72.11	Chronic hepatic failure with coma
K72.90	Hepatic failure, unspecified without coma
K72.91	Hepatic failure, unspecified with coma
K73.0	Chronic persistent hepatitis, not elsewhere classified
K73.1	Chronic lobular hepatitis, not elsewhere classified
K73.2	Chronic active hepatitis, not elsewhere classified
K73.8	Other chronic hepatitis, not elsewhere classified
K73.9	Chronic hepatitis, unspecified
K74.0	Hepatic fibrosis
K74.1	Hepatic sclerosis
K74.2	Hepatic fibrosis with hepatic sclerosis
K74.3	Primary biliary cirrhosis
K74.4	Secondary biliary cirrhosis
K74.5	Biliary cirrhosis, unspecified
K74.60	Unspecified cirrhosis of liver
K74.69	Other cirrhosis of liver
K75.2	Nonspecific reactive hepatitis
K75.3	Granulomatous hepatitis, not elsewhere classified
K75.4	Autoimmune hepatitis
K75.81	Nonalcoholic steatohepatitis (NASH)
K75.89	Other specified inflammatory liver diseases
K75.9	Inflammatory liver disease, unspecified
K76.0	Fatty (change of) liver, not elsewhere classified
K76.1	Chronic passive congestion of liver



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Code	Description
K76.3	Infarction of liver
K76.4	Peliosis hepatis
K76.5	Hepatic veno-occlusive disease
K76.7	Hepatorenal syndrome
K76.81	Hepatopulmonary syndrome
K76.89	Other specified diseases of liver
K76.9	Liver disease, unspecified
K77	Liver disorders in diseases classified elsewhere
K80.30	Calculus of bile duct with cholangitis, unspecified, without obstruction
K80.31	Calculus of bile duct with cholangitis, unspecified, with obstruction
K80.32	Calculus of bile duct with acute cholangitis without obstruction
K80.33	Calculus of bile duct with acute cholangitis with obstruction
K80.34	Calculus of bile duct with chronic cholangitis without obstruction
K80.35	Calculus of bile duct with chronic cholangitis with obstruction
K80.36	Calculus of bile duct with acute and chronic cholangitis without obstruction
K80.37	Calculus of bile duct with acute and chronic cholangitis with obstruction
K83.0	Cholangitis
K83.1	Obstruction of bile duct
K83.2	Perforation of bile duct
K83.3	Fistula of bile duct
K83.4	Spasm of sphincter of Oddi
K83.5	Biliary cyst
K83.8	Other specified diseases of biliary tract
K83.9	Disease of biliary tract, unspecified
K85.00	Idiopathic acute pancreatitis without necrosis or infection
K85.01	Idiopathic acute pancreatitis with uninfected necrosis
K85.02	Idiopathic acute pancreatitis with infected necrosis
K85.10	Biliary acute pancreatitis without necrosis or infection
K85.11	Biliary acute pancreatitis with uninfected necrosis
K85.12	Biliary acute pancreatitis with infected necrosis

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Code	Description
K85.20	Alcohol induced acute pancreatitis without necrosis or infection
K85.21	Alcohol induced acute pancreatitis with uninfected necrosis
K85.22	Alcohol induced acute pancreatitis with infected necrosis
K85.30	Drug induced acute pancreatitis without necrosis or infection
K85.31	Drug induced acute pancreatitis with uninfected necrosis
K85.32	Drug induced acute pancreatitis with infected necrosis
K85.80	Other acute pancreatitis without necrosis or infection
K85.81	Other acute pancreatitis with uninfected necrosis
K85.82	Other acute pancreatitis with infected necrosis
K85.90	Acute pancreatitis without necrosis or infection, unspecified
K85.91	Acute pancreatitis with uninfected necrosis, unspecified
K85.92	Acute pancreatitis with infected necrosis, unspecified
K87	Disorders of gallbladder, biliary tract and pancreas in diseases classified elsewhere
K90.0	Celiac disease
K90.1	Tropical sprue
K90.2	Blind loop syndrome, not elsewhere classified
K90.3	Pancreatic steatorrhea
K90.41	Non-celiac gluten sensitivity
K90.49	Malabsorption due to intolerance, not elsewhere classified
K90.89	Other intestinal malabsorption
K90.9	Intestinal malabsorption, unspecified
K91.2	Postsurgical malabsorption, not elsewhere classified
K91.3	Postprocedural intestinal obstruction
K91.5	Postcholecystectomy syndrome
K91.61	Intraoperative hemorrhage and hematoma of a digestive system organ or structure complicating a digestive system procedure
K91.62	Intraoperative hemorrhage and hematoma of a digestive system organ or structure complicating other procedure
K91.81	Other intraoperative complications of digestive system
K91.82	Postprocedural hepatic failure
K91.83	Postprocedural hepatorenal syndrome

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Code	Description
K91.840	Postprocedural hemorrhage of a digestive system organ or structure following a digestive system procedure
K91.841	Postprocedural hemorrhage of a digestive system organ or structure following other procedure
K91.86	Retained cholelithiasis following cholecystectomy
*K91.870	*Postprocedural hematoma of a digestive system organ or structure following a digestive system procedure
*K91.871	*Postprocedural hematoma of a digestive system organ or structure following other procedure
K91.89	Other postprocedural complications and disorders of digestive system
K92.0	Hematemesis
K92.1	Melena
K92.2	Gastrointestinal hemorrhage, unspecified
K94.30	Esophagostomy complications, unspecified
K94.31	Esophagostomy hemorrhage
K94.32	Esophagostomy infection
K94.33	Esophagostomy malfunction
K94.39	Other complications of esophagostomy
L76.01	Intraoperative hemorrhage and hematoma of skin and subcutaneous tissue complicating a dermatologic procedure
L76.02	Intraoperative hemorrhage and hematoma of skin and subcutaneous tissue complicating other procedure
L76.21	Postprocedural hemorrhage of skin and subcutaneous tissue following a dermatologic procedure
L76.22	Postprocedural hemorrhage of skin and subcutaneous tissue following other procedure
*L76.31	*Postprocedural hematoma of skin and subcutaneous tissue following a dermatologic procedure
*L76.32	*Postprocedural hematoma of skin and subcutaneous tissue following other procedure
M02.20	Postimmunization arthropathy, unspecified site
M02.211	Postimmunization arthropathy, right shoulder
M02.212	Postimmunization arthropathy, left shoulder
M02.219	Postimmunization arthropathy, unspecified shoulder

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Code	Description
M02.221	Postimmunization arthropathy, right elbow
M02.222	Postimmunization arthropathy, left elbow
M02.229	Postimmunization arthropathy, unspecified elbow
M02.231	Postimmunization arthropathy, right wrist
M02.232	Postimmunization arthropathy, left wrist
M02.239	Postimmunization arthropathy, unspecified wrist
M02.241	Postimmunization arthropathy, right hand
M02.242	Postimmunization arthropathy, left hand
M02.249	Postimmunization arthropathy, unspecified hand
M02.251	Postimmunization arthropathy, right hip
M02.252	Postimmunization arthropathy, left hip
M02.259	Postimmunization arthropathy, unspecified hip
M02.261	Postimmunization arthropathy, right knee
M02.262	Postimmunization arthropathy, left knee
M02.269	Postimmunization arthropathy, unspecified knee
M02.271	Postimmunization arthropathy, right ankle and foot
M02.272	Postimmunization arthropathy, left ankle and foot
M02.279	Postimmunization arthropathy, unspecified ankle and foot
M02.28	Postimmunization arthropathy, vertebrae
M02.29	Postimmunization arthropathy, multiple sites
M25.00	Hemarthrosis, unspecified joint
M25.051	Hemarthrosis, right hip
M25.052	Hemarthrosis, left hip
M25.059	Hemarthrosis, unspecified hip
M25.061	Hemarthrosis, right knee
M25.062	Hemarthrosis, left knee
M25.069	Hemarthrosis, unspecified knee
M36.2	Hemophilic arthropathy
M36.3	Arthropathy in other blood disorders
M36.4	Arthropathy in hypersensitivity reactions classified elsewhere



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Code	Description
M79.601	Pain in right arm
M79.602	Pain in left arm
M79.603	Pain in arm, unspecified
M79.604	Pain in right leg
M79.605	Pain in left leg
M79.606	Pain in leg, unspecified
M79.609	Pain in unspecified limb
M79.621	Pain in right upper arm
M79.622	Pain in left upper arm
M79.629	Pain in unspecified upper arm
M79.631	Pain in right forearm
M79.632	Pain in left forearm
M79.639	Pain in unspecified forearm
M79.641	Pain in right hand
M79.642	Pain in left hand
M79.643	Pain in unspecified hand
M79.644	Pain in right finger(s)
M79.645	Pain in left finger(s)
M79.646	Pain in unspecified finger(s)
M79.651	Pain in right thigh
M79.652	Pain in left thigh
M79.659	Pain in unspecified thigh
M79.661	Pain in right lower leg
M79.662	Pain in left lower leg
M79.669	Pain in unspecified lower leg
M79.671	Pain in right foot
M79.672	Pain in left foot
M79.673	Pain in unspecified foot
M79.674	Pain in right toe(s)
M79.675	Pain in left toe(s)



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Code	Description
M79.676	Pain in unspecified toe(s)
M79.89	Other specified soft tissue disorders
M80.00XA	Age-related osteoporosis with current pathological fracture, unspecified site, initial encounter for fracture
M80.80XA	Other osteoporosis with current pathological fracture, unspecified site, initial encounter for fracture
M84.40XA	Pathological fracture, unspecified site, initial encounter for fracture
M84.50XA	Pathological fracture in neoplastic disease, unspecified site, initial encounter for fracture
M84.60XA	Pathological fracture in other disease, unspecified site, initial encounter for fracture
*M84.752A	*Incomplete atypical femoral fracture, left leg, initial encounter for fracture
*M84.753A	*Incomplete atypical femoral fracture, unspecified leg, initial encounter for fracture
*M84.754A	*Complete transverse atypical femoral fracture, right leg, initial encounter for fracture
*M84.755A	*Complete transverse atypical femoral fracture, left leg, initial encounter for fracture
*M84.756A	*Complete transverse atypical femoral fracture, unspecified leg, initial encounter for fracture
*M84.757A	*Complete oblique atypical femoral fracture, right leg, initial encounter for fracture
*M84.758A	*Complete oblique atypical femoral fracture, left leg, initial encounter for fracture
*M84.759A	*Complete oblique atypical femoral fracture, unspecified leg, initial encounter for fracture
M96.810	Intraoperative hemorrhage and hematoma of a musculoskeletal structure complicating a musculoskeletal system procedure
M96.811	Intraoperative hemorrhage and hematoma of a musculoskeletal structure complicating other procedure
M96.830	Postprocedural hemorrhage of a musculoskeletal structure following a musculoskeletal system procedure
M96.831	Postprocedural hemorrhage of a musculoskeletal structure following other procedure
*M96.840	*Postprocedural hematoma of a musculoskeletal structure following a musculoskeletal system procedure
*M96.841	*Postprocedural hematoma of a musculoskeletal structure following other procedure
*M97.01XA	*Periprosthetic fracture around internal prosthetic right hip joint, initial encounter
*M97.02XA	*Periprosthetic fracture around internal prosthetic left hip joint, initial encounter
*M97.11XA	*Periprosthetic fracture around internal prosthetic right knee joint, initial encounter

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Code	Description
*M97.12XA	*Periprosthetic fracture around internal prosthetic left knee joint, initial encounter
*M97.21XA	*Periprosthetic fracture around internal prosthetic right ankle joint, initial encounter
*M97.22XA	*Periprosthetic fracture around internal prosthetic left ankle joint, initial encounter
*M97.31XA	*Periprosthetic fracture around internal prosthetic right shoulder joint, initial encounter
*M97.32XA	*Periprosthetic fracture around internal prosthetic left shoulder joint, initial encounter
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis
N02.6	Recurrent and persistent hematuria with dense deposit disease
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis
N02.8	Recurrent and persistent hematuria with other morphologic changes
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes
N04.0	Nephrotic syndrome with minor glomerular abnormality
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis
N04.6	Nephrotic syndrome with dense deposit disease
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis
N04.8	Nephrotic syndrome with other morphologic changes
N04.9	Nephrotic syndrome with unspecified morphologic changes
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes
N06.9	Isolated proteinuria with unspecified morphologic lesion
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions

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Code	Description
N15.9	Renal tubulo-interstitial disease, unspecified
N17.0	Acute kidney failure with tubular necrosis
N17.1	Acute kidney failure with acute cortical necrosis
N17.2	Acute kidney failure with medullary necrosis
N17.8	Other acute kidney failure
N17.9	Acute kidney failure, unspecified
N18.4	Chronic kidney disease, stage 4 (severe)
N18.5	Chronic kidney disease, stage 5
N18.6	End stage renal disease
N18.9	Chronic kidney disease, unspecified
N19	Unspecified kidney failure
N28.0	Ischemia and infarction of kidney
N28.82	Megaloureter
N28.89	Other specified disorders of kidney and ureter
N32.89	Other specified disorders of bladder
N33	Bladder disorders in diseases classified elsewhere
N50.1	Vascular disorders of male genital organs
N64.89	Other specified disorders of breast
N83.7	Hematoma of broad ligament
N85.7	Hematometra
N88.8	Other specified noninflammatory disorders of cervix uteri
N89.7	Hematocolpos
N89.8	Other specified noninflammatory disorders of vagina
N90.89	Other specified noninflammatory disorders of vulva and perineum
N92.0	Excessive and frequent menstruation with regular cycle
N92.1	Excessive and frequent menstruation with irregular cycle
N92.2	Excessive menstruation at puberty
N92.3	Ovulation bleeding
N92.4	Excessive bleeding in the premenopausal period
N92.5	Other specified irregular menstruation

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Code	Description
N92.6	Irregular menstruation, unspecified
N93.0	Postcoital and contact bleeding
*N93.1	*Pre-pubertal vaginal bleeding
N93.8	Other specified abnormal uterine and vaginal bleeding
N93.9	Abnormal uterine and vaginal bleeding, unspecified
N94.89	Other specified conditions associated with female genital organs and menstrual cycle
N95.0	Postmenopausal bleeding
N99.510	Cystostomy hemorrhage
N99.511	Cystostomy infection
N99.512	Cystostomy malfunction
N99.518	Other cystostomy complication
N99.61	Intraoperative hemorrhage and hematoma of a genitourinary system organ or structure complicating a genitourinary system procedure
N99.62	Intraoperative hemorrhage and hematoma of a genitourinary system organ or structure complicating other procedure
N99.820	Postprocedural hemorrhage of a genitourinary system organ or structure following a genitourinary system procedure
N99.821	Postprocedural hemorrhage of a genitourinary system organ or structure following other procedure
*N99.840	*Postprocedural hematoma of a genitourinary system organ or structure following a genitourinary system procedure
*N99.841	*Postprocedural hematoma of a genitourinary system organ or structure following other procedure
O02.1	Missed abortion
O03.1	Delayed or excessive hemorrhage following incomplete spontaneous abortion
O03.6	Delayed or excessive hemorrhage following complete or unspecified spontaneous abortion
O04.6	Delayed or excessive hemorrhage following (induced) termination of pregnancy
O07.1	Delayed or excessive hemorrhage following failed attempted termination of pregnancy
O08.1	Delayed or excessive hemorrhage following ectopic and molar pregnancy
O08.2	Embolism following ectopic and molar pregnancy
O10.011	Pre-existing essential hypertension complicating pregnancy, first trimester
O10.012	Pre-existing essential hypertension complicating pregnancy, second trimester

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Code	Description
O10.013	Pre-existing essential hypertension complicating pregnancy, third trimester
O10.019	Pre-existing essential hypertension complicating pregnancy, unspecified trimester
O10.02	Pre-existing essential hypertension complicating childbirth
O10.03	Pre-existing essential hypertension complicating the puerperium
O10.111	Pre-existing hypertensive heart disease complicating pregnancy, first trimester
O10.112	Pre-existing hypertensive heart disease complicating pregnancy, second trimester
O10.113	Pre-existing hypertensive heart disease complicating pregnancy, third trimester
O10.119	Pre-existing hypertensive heart disease complicating pregnancy, unspecified trimester
O10.12	Pre-existing hypertensive heart disease complicating childbirth
O10.13	Pre-existing hypertensive heart disease complicating the puerperium
O10.211	Pre-existing hypertensive chronic kidney disease complicating pregnancy, first trimester
O10.212	Pre-existing hypertensive chronic kidney disease complicating pregnancy, second trimester
O10.213	Pre-existing hypertensive chronic kidney disease complicating pregnancy, third trimester
O10.219	Pre-existing hypertensive chronic kidney disease complicating pregnancy, unspecified trimester
O10.22	Pre-existing hypertensive chronic kidney disease complicating childbirth
O10.23	Pre-existing hypertensive chronic kidney disease complicating the puerperium
O10.311	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, first trimester
O10.312	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, second trimester
O10.313	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, third trimester
O10.319	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, unspecified trimester
O10.32	Pre-existing hypertensive heart and chronic kidney disease complicating childbirth
O10.33	Pre-existing hypertensive heart and chronic kidney disease complicating the puerperium
O10.411	Pre-existing secondary hypertension complicating pregnancy, first trimester
O10.412	Pre-existing secondary hypertension complicating pregnancy, second trimester
O10.413	Pre-existing secondary hypertension complicating pregnancy, third trimester
O10.419	Pre-existing secondary hypertension complicating pregnancy, unspecified trimester

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Code	Description
O10.42	Pre-existing secondary hypertension complicating childbirth
O10.43	Pre-existing secondary hypertension complicating the puerperium
O10.911	Unspecified pre-existing hypertension complicating pregnancy, first trimester
O10.912	Unspecified pre-existing hypertension complicating pregnancy, second trimester
O10.913	Unspecified pre-existing hypertension complicating pregnancy, third trimester
O10.919	Unspecified pre-existing hypertension complicating pregnancy, unspecified trimester
O10.92	Unspecified pre-existing hypertension complicating childbirth
O10.93	Unspecified pre-existing hypertension complicating the puerperium
O11.1	Pre-existing hypertension with pre-eclampsia, first trimester
O11.2	Pre-existing hypertension with pre-eclampsia, second trimester
O11.3	Pre-existing hypertension with pre-eclampsia, third trimester
O11.9	Pre-existing hypertension with pre-eclampsia, unspecified trimester
*O12.04	*Gestational edema, complicating childbirth
*O12.05	*Gestational edema, complicating the puerperium
*O12.14	*Gestational proteinuria, complicating childbirth
*O12.15	*Gestational proteinuria, complicating the puerperium
*O12.24	*Gestational edema with proteinuria, complicating childbirth
*O12.25	*Gestational edema with proteinuria, complicating the puerperium
O13.1	Gestational [pregnancy-induced] hypertension without significant proteinuria, first trimester
O13.2	Gestational [pregnancy-induced] hypertension without significant proteinuria, second trimester
O13.3	Gestational [pregnancy-induced] hypertension without significant proteinuria, third trimester
*O13.4	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth
*O13.5	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating the puerperium
O13.9	Gestational [pregnancy-induced] hypertension without significant proteinuria, unspecified trimester
O14.00	Mild to moderate pre-eclampsia, unspecified trimester
O14.02	Mild to moderate pre-eclampsia, second trimester
O14.03	Mild to moderate pre-eclampsia, third trimester

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Code	Description
*O14.04	*Mild to moderate pre-eclampsia, complicating childbirth
*O14.05	*Mild to moderate pre-eclampsia, complicating the puerperium
O14.10	Severe pre-eclampsia, unspecified trimester
O14.12	Severe pre-eclampsia, second trimester
O14.13	Severe pre-eclampsia, third trimester
*O14.14	*Severe pre-eclampsia complicating childbirth
*O14.15	*Severe pre-eclampsia, complicating the puerperium
O14.20	HELLP syndrome (HELLP), unspecified trimester
O14.22	HELLP syndrome (HELLP), second trimester
O14.23	HELLP syndrome (HELLP), third trimester
*O14.24	*HELLP syndrome, complicating childbirth
*O14.25	*HELLP syndrome, complicating the puerperium
O14.90	Unspecified pre-eclampsia, unspecified trimester
O14.92	Unspecified pre-eclampsia, second trimester
O14.93	Unspecified pre-eclampsia, third trimester
*O14.94	*Unspecified pre-eclampsia, complicating childbirth
*O14.95	*Unspecified pre-eclampsia, complicating the puerperium
O15.00	Eclampsia complicating pregnancy, unspecified trimester
O15.02	Eclampsia complicating pregnancy, second trimester
O15.03	Eclampsia complicating pregnancy, third trimester
O15.1	Eclampsia complicating labor
O15.2	Eclampsia complicating the puerperium
O15.9	Eclampsia, unspecified as to time period
O16.1	Unspecified maternal hypertension, first trimester
O16.2	Unspecified maternal hypertension, second trimester
O16.3	Unspecified maternal hypertension, third trimester
*O16.4	*Unspecified maternal hypertension, complicating childbirth
*O16.5	*Unspecified maternal hypertension, complicating the puerperium
O16.9	Unspecified maternal hypertension, unspecified trimester
O20.0	Threatened abortion



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Code	Description
O20.8	Other hemorrhage in early pregnancy
O20.9	Hemorrhage in early pregnancy, unspecified
O22.20	Superficial thrombophlebitis in pregnancy, unspecified trimester
O22.21	Superficial thrombophlebitis in pregnancy, first trimester
O22.22	Superficial thrombophlebitis in pregnancy, second trimester
O22.23	Superficial thrombophlebitis in pregnancy, third trimester
O22.30	Deep phlebothrombosis in pregnancy, unspecified trimester
O22.31	Deep phlebothrombosis in pregnancy, first trimester
O22.32	Deep phlebothrombosis in pregnancy, second trimester
O22.33	Deep phlebothrombosis in pregnancy, third trimester
O22.40	Hemorrhoids in pregnancy, unspecified trimester
O22.41	Hemorrhoids in pregnancy, first trimester
O22.42	Hemorrhoids in pregnancy, second trimester
O22.43	Hemorrhoids in pregnancy, third trimester
O22.50	Cerebral venous thrombosis in pregnancy, unspecified trimester
O22.51	Cerebral venous thrombosis in pregnancy, first trimester
O22.52	Cerebral venous thrombosis in pregnancy, second trimester
O22.53	Cerebral venous thrombosis in pregnancy, third trimester
O22.8X1	Other venous complications in pregnancy, first trimester
O22.8X2	Other venous complications in pregnancy, second trimester
O22.8X3	Other venous complications in pregnancy, third trimester
O22.8X9	Other venous complications in pregnancy, unspecified trimester
O22.90	Venous complication in pregnancy, unspecified, unspecified trimester
O22.91	Venous complication in pregnancy, unspecified, first trimester
O22.92	Venous complication in pregnancy, unspecified, second trimester
O22.93	Venous complication in pregnancy, unspecified, third trimester
*O24.415	*Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs
*O24.425	*Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs
*O24.435	*Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs
O26.611	Liver and biliary tract disorders in pregnancy, first trimester



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Code	Description
O26.612	Liver and biliary tract disorders in pregnancy, second trimester
O26.613	Liver and biliary tract disorders in pregnancy, third trimester
O26.619	Liver and biliary tract disorders in pregnancy, unspecified trimester
O26.62	Liver and biliary tract disorders in childbirth
O26.851	Spotting complicating pregnancy, first trimester
O26.852	Spotting complicating pregnancy, second trimester
O26.853	Spotting complicating pregnancy, third trimester
O26.859	Spotting complicating pregnancy, unspecified trimester
O41.1010	Infection of amniotic sac and membranes, unspecified, first trimester, not applicable or unspecified
O41.1011	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 1
O41.1012	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 2
O41.1013	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 3
O41.1014	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 4
O41.1015	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 5
O41.1019	Infection of amniotic sac and membranes, unspecified, first trimester, other fetus
O41.1020	Infection of amniotic sac and membranes, unspecified, second trimester, not applicable or unspecified
O41.1021	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 1
O41.1022	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 2
O41.1023	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 3
O41.1024	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 4
O41.1025	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 5
O41.1029	Infection of amniotic sac and membranes, unspecified, second trimester, other fetus
O41.1030	Infection of amniotic sac and membranes, unspecified, third trimester, not applicable or unspecified
O41.1031	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 1
O41.1032	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 2
O41.1033	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 3
O41.1034	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 4
O41.1035	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 5

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Code	Description
O41.1039	Infection of amniotic sac and membranes, unspecified, third trimester, other fetus
O41.1090	Infection of amniotic sac and membranes, unspecified, unspecified trimester, not applicable or unspecified
O41.1091	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 1
O41.1092	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 2
O41.1093	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 3
O41.1094	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 4
O41.1095	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 5
O41.1099	Infection of amniotic sac and membranes, unspecified, unspecified trimester, other fetus
O41.1210	Chorioamnionitis, first trimester, not applicable or unspecified
O41.1211	Chorioamnionitis, first trimester, fetus 1
O41.1212	Chorioamnionitis, first trimester, fetus 2
O41.1213	Chorioamnionitis, first trimester, fetus 3
O41.1214	Chorioamnionitis, first trimester, fetus 4
O41.1215	Chorioamnionitis, first trimester, fetus 5
O41.1219	Chorioamnionitis, first trimester, other fetus
O41.1220	Chorioamnionitis, second trimester, not applicable or unspecified
O41.1221	Chorioamnionitis, second trimester, fetus 1
O41.1222	Chorioamnionitis, second trimester, fetus 2
O41.1223	Chorioamnionitis, second trimester, fetus 3
O41.1224	Chorioamnionitis, second trimester, fetus 4
O41.1225	Chorioamnionitis, second trimester, fetus 5
O41.1229	Chorioamnionitis, second trimester, other fetus
O41.1230	Chorioamnionitis, third trimester, not applicable or unspecified
O41.1231	Chorioamnionitis, third trimester, fetus 1
O41.1232	Chorioamnionitis, third trimester, fetus 2
O41.1233	Chorioamnionitis, third trimester, fetus 3
O41.1234	Chorioamnionitis, third trimester, fetus 4
O41.1235	Chorioamnionitis, third trimester, fetus 5
O41.1239	Chorioamnionitis, third trimester, other fetus
O41.1290	Chorioamnionitis, unspecified trimester, not applicable or unspecified

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Code	Description
O41.1291	Chorioamnionitis, unspecified trimester, fetus 1
O41.1292	Chorioamnionitis, unspecified trimester, fetus 2
O41.1293	Chorioamnionitis, unspecified trimester, fetus 3
O41.1294	Chorioamnionitis, unspecified trimester, fetus 4
O41.1295	Chorioamnionitis, unspecified trimester, fetus 5
O41.1299	Chorioamnionitis, unspecified trimester, other fetus
O41.1410	Placentitis, first trimester, not applicable or unspecified
O41.1411	Placentitis, first trimester, fetus 1
O41.1412	Placentitis, first trimester, fetus 2
O41.1413	Placentitis, first trimester, fetus 3
O41.1414	Placentitis, first trimester, fetus 4
O41.1415	Placentitis, first trimester, fetus 5
O41.1419	Placentitis, first trimester, other fetus
O41.1420	Placentitis, second trimester, not applicable or unspecified
O41.1421	Placentitis, second trimester, fetus 1
O41.1422	Placentitis, second trimester, fetus 2
O41.1423	Placentitis, second trimester, fetus 3
O41.1424	Placentitis, second trimester, fetus 4
O41.1425	Placentitis, second trimester, fetus 5
O41.1429	Placentitis, second trimester, other fetus
O41.1430	Placentitis, third trimester, not applicable or unspecified
O41.1431	Placentitis, third trimester, fetus 1
O41.1432	Placentitis, third trimester, fetus 2
O41.1433	Placentitis, third trimester, fetus 3
O41.1434	Placentitis, third trimester, fetus 4
O41.1435	Placentitis, third trimester, fetus 5
O41.1439	Placentitis, third trimester, other fetus
O41.1490	Placentitis, unspecified trimester, not applicable or unspecified
O41.1491	Placentitis, unspecified trimester, fetus 1
O41.1492	Placentitis, unspecified trimester, fetus 2

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Code	Description
O41.1493	Placentitis, unspecified trimester, fetus 3
O41.1494	Placentitis, unspecified trimester, fetus 4
O41.1495	Placentitis, unspecified trimester, fetus 5
O41.1499	Placentitis, unspecified trimester, other fetus
O43.011	Fetomaternal placental transfusion syndrome, first trimester
O43.012	Fetomaternal placental transfusion syndrome, second trimester
O43.013	Fetomaternal placental transfusion syndrome, third trimester
O43.019	Fetomaternal placental transfusion syndrome, unspecified trimester
O44.00	Complete placenta previa NOS or without hemorrhage, unspecified trimester
O44.01	Complete placenta previa NOS or without hemorrhage, first trimester
O44.02	Complete placenta previa NOS or without hemorrhage, second trimester
O44.03	Complete placenta previa NOS or without hemorrhage, third trimester
O44.10	Complete placenta previa with hemorrhage, unspecified trimester
O44.11	Complete placenta previa with hemorrhage, first trimester
O44.12	Complete placenta previa with hemorrhage, second trimester
O44.13	Complete placenta previa with hemorrhage, third trimester
*O44.20	*Partial placenta previa NOS or without hemorrhage, unspecified trimester
*O44.21	*Partial placenta previa NOS or without hemorrhage, first trimester
*O44.22	*Partial placenta previa NOS or without hemorrhage, second trimester
*O44.23	*Partial placenta previa NOS or without hemorrhage, third trimester
*O44.30	*Partial placenta previa with hemorrhage, unspecified trimester
*O44.31	*Partial placenta previa with hemorrhage, first trimester
*O44.32	*Partial placenta previa with hemorrhage, second trimester
*O44.33	*Partial placenta previa with hemorrhage, third trimester
*O44.40	*Low lying placenta NOS or without hemorrhage, unspecified trimester
*O44.41	*Low lying placenta NOS or without hemorrhage, first trimester
*O44.42	*Low lying placenta NOS or without hemorrhage, second trimester
*O44.43	*Low lying placenta NOS or without hemorrhage, third trimester
*O44.50	*Low lying placenta with hemorrhage, unspecified trimester
*O44.51	*Low lying placenta with hemorrhage, first trimester



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Code	Description
*O44.52	*Low lying placenta with hemorrhage, second trimester
*O44.53	*Low lying placenta with hemorrhage, third trimester
O45.001	Premature separation of placenta with coagulation defect, unspecified, first trimester
O45.002	Premature separation of placenta with coagulation defect, unspecified, second trimester
O45.003	Premature separation of placenta with coagulation defect, unspecified, third trimester
O45.009	Premature separation of placenta with coagulation defect, unspecified, unspecified trimester
O45.011	Premature separation of placenta with afibrinogenemia, first trimester
O45.012	Premature separation of placenta with afibrinogenemia, second trimester
O45.013	Premature separation of placenta with afibrinogenemia, third trimester
O45.019	Premature separation of placenta with afibrinogenemia, unspecified trimester
O45.021	Premature separation of placenta with disseminated intravascular coagulation, first trimester
O45.022	Premature separation of placenta with disseminated intravascular coagulation, second trimester
O45.023	Premature separation of placenta with disseminated intravascular coagulation, third trimester
O45.029	Premature separation of placenta with disseminated intravascular coagulation, unspecified trimester
O45.091	Premature separation of placenta with other coagulation defect, first trimester
O45.092	Premature separation of placenta with other coagulation defect, second trimester
O45.093	Premature separation of placenta with other coagulation defect, third trimester
O45.099	Premature separation of placenta with other coagulation defect, unspecified trimester
O45.8X1	Other premature separation of placenta, first trimester
O45.8X2	Other premature separation of placenta, second trimester
O45.8X3	Other premature separation of placenta, third trimester
O45.8X9	Other premature separation of placenta, unspecified trimester
O45.90	Premature separation of placenta, unspecified, unspecified trimester
O45.91	Premature separation of placenta, unspecified, first trimester
O45.92	Premature separation of placenta, unspecified, second trimester
O45.93	Premature separation of placenta, unspecified, third trimester
O46.001	Antepartum hemorrhage with coagulation defect, unspecified, first trimester

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Code	Description
O46.002	Antepartum hemorrhage with coagulation defect, unspecified, second trimester
O46.003	Antepartum hemorrhage with coagulation defect, unspecified, third trimester
O46.009	Antepartum hemorrhage with coagulation defect, unspecified, unspecified trimester
O46.011	Antepartum hemorrhage with afibrinogenemia, first trimester
O46.012	Antepartum hemorrhage with afibrinogenemia, second trimester
O46.013	Antepartum hemorrhage with afibrinogenemia, third trimester
O46.019	Antepartum hemorrhage with afibrinogenemia, unspecified trimester
O46.021	Antepartum hemorrhage with disseminated intravascular coagulation, first trimester
O46.022	Antepartum hemorrhage with disseminated intravascular coagulation, second trimester
O46.023	Antepartum hemorrhage with disseminated intravascular coagulation, third trimester
O46.029	Antepartum hemorrhage with disseminated intravascular coagulation, unspecified trimester
O46.091	Antepartum hemorrhage with other coagulation defect, first trimester
O46.092	Antepartum hemorrhage with other coagulation defect, second trimester
O46.093	Antepartum hemorrhage with other coagulation defect, third trimester
O46.099	Antepartum hemorrhage with other coagulation defect, unspecified trimester
O46.8X1	Other antepartum hemorrhage, first trimester
O46.8X2	Other antepartum hemorrhage, second trimester
O46.8X3	Other antepartum hemorrhage, third trimester
O46.8X9	Other antepartum hemorrhage, unspecified trimester
O46.90	Antepartum hemorrhage, unspecified, unspecified trimester
O46.91	Antepartum hemorrhage, unspecified, first trimester
O46.92	Antepartum hemorrhage, unspecified, second trimester
O46.93	Antepartum hemorrhage, unspecified, third trimester
O67.0	Intrapartum hemorrhage with coagulation defect
O67.8	Other intrapartum hemorrhage
O67.9	Intrapartum hemorrhage, unspecified
O72.0	Third-stage hemorrhage
O72.1	Other immediate postpartum hemorrhage
O72.2	Delayed and secondary postpartum hemorrhage
O72.3	Postpartum coagulation defects

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Code	Description
O86.0	Infection of obstetric surgical wound
O87.0	Superficial thrombophlebitis in the puerperium
O87.1	Deep phlebothrombosis in the puerperium
O87.2	Hemorrhoids in the puerperium
O87.3	Cerebral venous thrombosis in the puerperium
O87.8	Other venous complications in the puerperium
O87.9	Venous complication in the puerperium, unspecified
O88.011	Air embolism in pregnancy, first trimester
O88.012	Air embolism in pregnancy, second trimester
O88.013	Air embolism in pregnancy, third trimester
O88.019	Air embolism in pregnancy, unspecified trimester
O88.02	Air embolism in childbirth
O88.03	Air embolism in the puerperium
O88.111	Amniotic fluid embolism in pregnancy, first trimester
O88.112	Amniotic fluid embolism in pregnancy, second trimester
O88.113	Amniotic fluid embolism in pregnancy, third trimester
O88.119	Amniotic fluid embolism in pregnancy, unspecified trimester
O88.12	Amniotic fluid embolism in childbirth
O88.13	Amniotic fluid embolism in the puerperium
O88.211	Thromboembolism in pregnancy, first trimester
O88.212	Thromboembolism in pregnancy, second trimester
O88.213	Thromboembolism in pregnancy, third trimester
O88.219	Thromboembolism in pregnancy, unspecified trimester
O88.22	Thromboembolism in childbirth
O88.23	Thromboembolism in the puerperium
O88.311	Pyemic and septic embolism in pregnancy, first trimester
O88.312	Pyemic and septic embolism in pregnancy, second trimester
O88.313	Pyemic and septic embolism in pregnancy, third trimester
O88.319	Pyemic and septic embolism in pregnancy, unspecified trimester
O88.32	Pyemic and septic embolism in childbirth

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Code	Description
O88.33	Pyemic and septic embolism in the puerperium
O88.811	Other embolism in pregnancy, first trimester
O88.812	Other embolism in pregnancy, second trimester
O88.813	Other embolism in pregnancy, third trimester
O88.819	Other embolism in pregnancy, unspecified trimester
O88.82	Other embolism in childbirth
O88.83	Other embolism in the puerperium
O90.2	Hematoma of obstetric wound
O99.111	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, first trimester
O99.112	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, second trimester
O99.113	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, third trimester
O99.119	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, unspecified trimester
O99.12	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating childbirth
O99.13	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating the puerperium
P02.1	Newborn affected by other forms of placental separation and hemorrhage
P10.0	Subdural hemorrhage due to birth injury
P10.1	Cerebral hemorrhage due to birth injury
P10.2	Intraventricular hemorrhage due to birth injury
P10.3	Subarachnoid hemorrhage due to birth injury
P10.4	Tentorial tear due to birth injury
P10.8	Other intracranial lacerations and hemorrhages due to birth injury
P10.9	Unspecified intracranial laceration and hemorrhage due to birth injury
P11.0	Cerebral edema due to birth injury
P11.1	Other specified brain damage due to birth injury
P11.2	Unspecified brain damage due to birth injury
P11.9	Birth injury to central nervous system, unspecified

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Code	Description
P12.2	Epicranial subaponeurotic hemorrhage due to birth injury
P15.0	Birth injury to liver
P15.1	Birth injury to spleen
P15.2	Sternomastoid injury due to birth injury
P15.3	Birth injury to eye
P15.4	Birth injury to face
P15.5	Birth injury to external genitalia
P15.6	Subcutaneous fat necrosis due to birth injury
P15.8	Other specified birth injuries
P26.0	Tracheobronchial hemorrhage originating in the perinatal period
P26.1	Massive pulmonary hemorrhage originating in the perinatal period
P26.8	Other pulmonary hemorrhages originating in the perinatal period
P26.9	Unspecified pulmonary hemorrhage originating in the perinatal period
P50.0	Newborn affected by intrauterine (fetal) blood loss from vasa previa
P50.1	Newborn affected by intrauterine (fetal) blood loss from ruptured cord
P50.2	Newborn affected by intrauterine (fetal) blood loss from placenta
P50.3	Newborn affected by hemorrhage into co-twin
P50.4	Newborn affected by hemorrhage into maternal circulation
P50.5	Newborn affected by intrauterine (fetal) blood loss from cut end of co-twin's cord
P50.8	Newborn affected by other intrauterine (fetal) blood loss
P50.9	Newborn affected by intrauterine (fetal) blood loss, unspecified
P51.0	Massive umbilical hemorrhage of newborn
P51.8	Other umbilical hemorrhages of newborn
P51.9	Umbilical hemorrhage of newborn, unspecified
P52.0	Intraventricular (nontraumatic) hemorrhage, grade 1, of newborn
P52.1	Intraventricular (nontraumatic) hemorrhage, grade 2, of newborn
P52.21	Intraventricular (nontraumatic) hemorrhage, grade 3, of newborn
P52.22	Intraventricular (nontraumatic) hemorrhage, grade 4, of newborn
P52.3	Unspecified intraventricular (nontraumatic) hemorrhage of newborn
P52.4	Intracerebral (nontraumatic) hemorrhage of newborn

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Code	Description
P52.5	Subarachnoid (nontraumatic) hemorrhage of newborn
P52.6	Cerebellar (nontraumatic) and posterior fossa hemorrhage of newborn
P52.8	Other intracranial (nontraumatic) hemorrhages of newborn
P52.9	Intracranial (nontraumatic) hemorrhage of newborn, unspecified
P53	Hemorrhagic disease of newborn
P54.0	Neonatal hematemesis
P54.1	Neonatal melena
P54.2	Neonatal rectal hemorrhage
P54.3	Other neonatal gastrointestinal hemorrhage
P54.4	Neonatal adrenal hemorrhage
P54.5	Neonatal cutaneous hemorrhage
P54.6	Neonatal vaginal hemorrhage
P54.8	Other specified neonatal hemorrhages
P54.9	Neonatal hemorrhage, unspecified
P59.9	Neonatal jaundice, unspecified
P60	Disseminated intravascular coagulation of newborn
P61.0	Transient neonatal thrombocytopenia
P61.1	Polycythemia neonatorum
P61.2	Anemia of prematurity
P61.3	Congenital anemia from fetal blood loss
P61.4	Other congenital anemias, not elsewhere classified
P61.5	Transient neonatal neutropenia
P61.6	Other transient neonatal disorders of coagulation
P61.8	Other specified perinatal hematological disorders
P61.9	Perinatal hematological disorder, unspecified
Q20.9	Congenital malformation of cardiac chambers and connections, unspecified
Q22.0	Pulmonary valve atresia
Q22.1	Congenital pulmonary valve stenosis
Q22.2	Congenital pulmonary valve insufficiency
Q22.3	Other congenital malformations of pulmonary valve

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Code	Description
Q22.4	Congenital tricuspid stenosis
Q22.5	Ebstein's anomaly
Q22.6	Hypoplastic right heart syndrome
Q22.8	Other congenital malformations of tricuspid valve
Q22.9	Congenital malformation of tricuspid valve, unspecified
Q23.0	Congenital stenosis of aortic valve
Q23.1	Congenital insufficiency of aortic valve
Q23.2	Congenital mitral stenosis
Q23.3	Congenital mitral insufficiency
Q23.4	Hypoplastic left heart syndrome
Q23.8	Other congenital malformations of aortic and mitral valves
Q23.9	Congenital malformation of aortic and mitral valves, unspecified
Q24.0	Dextrocardia
Q24.1	Levocardia
Q24.2	Cor triatriatum
Q24.3	Pulmonary infundibular stenosis
Q24.4	Congenital subaortic stenosis
Q24.5	Malformation of coronary vessels
Q24.6	Congenital heart block
Q24.8	Other specified congenital malformations of heart
Q24.9	Congenital malformation of heart, unspecified
R00.1	Bradycardia, unspecified
R04.0	Epistaxis
R04.1	Hemorrhage from throat
R04.2	Hemoptysis
R04.81	Acute idiopathic pulmonary hemorrhage in infants
R04.89	Hemorrhage from other sites in respiratory passages
R04.9	Hemorrhage from respiratory passages, unspecified
R06.02	Shortness of breath
R07.2	Precordial pain



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Code	Description
R07.82	Intercostal pain
R07.89	Other chest pain
R07.9	Chest pain, unspecified
R10.0	Acute abdomen
R10.10	Upper abdominal pain, unspecified
R10.11	Right upper quadrant pain
R10.12	Left upper quadrant pain
R10.13	Epigastric pain
R10.2	Pelvic and perineal pain
R10.30	Lower abdominal pain, unspecified
R10.31	Right lower quadrant pain
R10.32	Left lower quadrant pain
R10.33	Periumbilical pain
R10.83	Colic
R10.84	Generalized abdominal pain
R10.9	Unspecified abdominal pain
R16.0	Hepatomegaly, not elsewhere classified
R16.2	Hepatomegaly with splenomegaly, not elsewhere classified
R17	Unspecified jaundice
R18.0	Malignant ascites
R18.8	Other ascites
R23.3	Spontaneous ecchymoses
*R29.700	*NIHSS score 0
*R29.701	*NIHSS score 1
*R29.702	*NIHSS score 2
*R29.703	*NIHSS score 3
*R29.704	*NIHSS score 4
*R29.705	*NIHSS score 5
*R29.706	*NIHSS score 6
*R29.707	*NIHSS score 7



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Code	Description
*R29.708	*NIHSS score 8
*R29.709	*NIHSS score 9
*R29.710	*NIHSS score 10
*R29.711	*NIHSS score 11
*R29.712	*NIHSS score 12
*R29.713	*NIHSS score 13
*R29.714	*NIHSS score 14
*R29.715	*NIHSS score 15
*R29.716	*NIHSS score 16
*R29.717	*NIHSS score 17
*R29.718	*NIHSS score 18
*R29.719	*NIHSS score 19
*R29.720	*NIHSS score 20
*R29.721	*NIHSS score 21
*R29.722	*NIHSS score 22
*R29.723	*NIHSS score 23
*R29.724	*NIHSS score 24
*R29.725	*NIHSS score 25
*R29.726	*NIHSS score 26
*R29.727	*NIHSS score 27
*R29.728	*NIHSS score 28
*R29.729	*NIHSS score 29
*R29.730	*NIHSS score 30
*R29.731	*NIHSS score 31
*R29.732	*NIHSS score 32
*R29.733	*NIHSS score 33
*R29.734	*NIHSS score 34
*R29.735	*NIHSS score 35
*R29.736	*NIHSS score 36
*R29.737	*NIHSS score 37



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Code	Description
*R29.738	*NIHSS score 38
*R29.739	*NIHSS score 39
*R29.740	*NIHSS score 40
*R29.741	*NIHSS score 41
*R29.742	*NIHSS score 42
R31.0	Gross hematuria
R31.1	Benign essential microscopic hematuria
R31.21	Asymptomatic microscopic hematuria
R31.29	Other microscopic hematuria
R31.9	Hematuria, unspecified
*R40.2410	*Glasgow coma scale score 13-15, unspecified time
*R40.2411	*Glasgow coma scale score 13-15, in the field [EMT or ambulance]
*R40.2412	*Glasgow coma scale score 13-15, at arrival to emergency department
*R40.2413	*Glasgow coma scale score 13-15, at hospital admission
*R40.2414	*Glasgow coma scale score 13-15, 24 hours or more after hospital admission
*R40.2420	*Glasgow coma scale score 9-12, unspecified time
*R40.2421	*Glasgow coma scale score 9-12, in the field [EMT or ambulance]
*R40.2422	*Glasgow coma scale score 9-12, at arrival to emergency department
*R40.2423	*Glasgow coma scale score 9-12, at hospital admission
*R40.2424	*Glasgow coma scale score 9-12, 24 hours or more after hospital admission
*R40.2430	*Glasgow coma scale score 3-8, unspecified time
*R40.2431	*Glasgow coma scale score 3-8, in the field [EMT or ambulance]
*R40.2432	*Glasgow coma scale score 3-8, at arrival to emergency department
*R40.2433	*Glasgow coma scale score 3-8, at hospital admission
*R40.2434	*Glasgow coma scale score 3-8, 24 hours or more after hospital admission
*R40.2440	*Other coma, without documented Glasgow coma scale score, or with partial score reported, unspecified time
*R40.2441	*Other coma, without documented Glasgow coma scale score, or with partial score reported, in the field [EMT or ambulance]
*R40.2442	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at arrival to emergency department



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Code	Description
*R40.2443	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at hospital admission
*R40.2444	*Other coma, without documented Glasgow coma scale score, or with partial score reported, 24 hours or more after hospital admission
R55	Syncope and collapse
R57.9	Shock, unspecified
R58	Hemorrhage, not elsewhere classified
R60.0	Localized edema
R60.1	Generalized edema
R60.9	Edema, unspecified
R79.1	Abnormal coagulation profile
R82.3	Hemoglobinuria
R94.5	Abnormal results of liver function studies
S00.03XA	Contusion of scalp, initial encounter
S00.10XA	Contusion of unspecified eyelid and periorcular area, initial encounter
S00.11XA	Contusion of right eyelid and periorcular area, initial encounter
S00.12XA	Contusion of left eyelid and periorcular area, initial encounter
S00.33XA	Contusion of nose, initial encounter
S00.431A	Contusion of right ear, initial encounter
S00.432A	Contusion of left ear, initial encounter
S00.439A	Contusion of unspecified ear, initial encounter
S00.531A	Contusion of lip, initial encounter
S00.532A	Contusion of oral cavity, initial encounter
S00.83XA	Contusion of other part of head, initial encounter
S00.93XA	Contusion of unspecified part of head, initial encounter
S02.0XXA	Fracture of vault of skull, initial encounter for closed fracture
S02.0XXB	Fracture of vault of skull, initial encounter for open fracture
*S02.101A	*Fracture of base of skull, right side, initial encounter for closed fracture
*S02.101B	*Fracture of base of skull, right side, initial encounter for open fracture
*S02.102A	*Fracture of base of skull, left side, initial encounter for closed fracture
*S02.102B	*Fracture of base of skull, left side, initial encounter for open fracture



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Code	Description
*S02.109A	*Fracture of base of skull, unspecified side, initial encounter for closed fracture
*S02.109B	*Fracture of base of skull, unspecified side, initial encounter for open fracture
S02.110A	Type I occipital condyle fracture, unspecified side, initial encounter for closed fracture
S02.110B	Type I occipital condyle fracture, unspecified side, initial encounter for open fracture
S02.111A	Type II occipital condyle fracture, unspecified side, initial encounter for closed fracture
S02.111B	Type II occipital condyle fracture, unspecified side, initial encounter for open fracture
S02.112A	Type III occipital condyle fracture, unspecified side, initial encounter for closed fracture
S02.112B	Type III occipital condyle fracture, unspecified side, initial encounter for open fracture
S02.113A	Unspecified occipital condyle fracture, initial encounter for closed fracture
S02.113B	Unspecified occipital condyle fracture, initial encounter for open fracture
S02.118A	Other fracture of occiput, unspecified side, initial encounter for closed fracture
S02.118B	Other fracture of occiput, unspecified side, initial encounter for open fracture
S02.119A	Unspecified fracture of occiput, initial encounter for closed fracture
S02.119B	Unspecified fracture of occiput, initial encounter for open fracture
*S02.11AA	*Type I occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11AB	*Type I occipital condyle fracture, right side, initial encounter for open fracture
*S02.11BA	*Type I occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11BB	*Type I occipital condyle fracture, left side, initial encounter for open fracture
*S02.11CA	*Type II occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11CB	*Type II occipital condyle fracture, right side, initial encounter for open fracture
*S02.11DA	*Type II occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11DB	*Type II occipital condyle fracture, left side, initial encounter for open fracture
*S02.11EA	*Type III occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11EB	*Type III occipital condyle fracture, right side, initial encounter for open fracture
*S02.11FA	*Type III occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11FB	*Type III occipital condyle fracture, left side, initial encounter for open fracture
*S02.11GA	*Other fracture of occiput, right side, initial encounter for closed fracture
*S02.11GB	*Other fracture of occiput, right side, initial encounter for open fracture
*S02.11HA	*Other fracture of occiput, left side, initial encounter for closed fracture
*S02.11HB	*Other fracture of occiput, left side, initial encounter for open fracture



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Code	Description
S02.19XA	Other fracture of base of skull, initial encounter for closed fracture
S02.19XB	Other fracture of base of skull, initial encounter for open fracture
*S02.30XA	*Fracture of orbital floor, unspecified side, initial encounter for closed fracture
*S02.30XB	*Fracture of orbital floor, unspecified side, initial encounter for open fracture
*S02.31XA	*Fracture of orbital floor, right side, initial encounter for closed fracture
*S02.31XB	*Fracture of orbital floor, right side, initial encounter for open fracture
*S02.32XA	*Fracture of orbital floor, left side, initial encounter for closed fracture
*S02.32XB	*Fracture of orbital floor, left side, initial encounter for open fracture
S02.400A	Malar fracture, unspecified side, initial encounter for closed fracture
S02.400B	Malar fracture, unspecified side, initial encounter for open fracture
S02.401A	Maxillary fracture, unspecified side, initial encounter for closed fracture
S02.401B	Maxillary fracture, unspecified side, initial encounter for open fracture
S02.402A	Zygomatic fracture, unspecified side, initial encounter for closed fracture
S02.402B	Zygomatic fracture, unspecified side, initial encounter for open fracture
*S02.40AA	*Malar fracture, right side, initial encounter for closed fracture
*S02.40AB	*Malar fracture, right side, initial encounter for open fracture
*S02.40BA	*Malar fracture, left side, initial encounter for closed fracture
*S02.40BB	*Malar fracture, left side, initial encounter for open fracture
*S02.40CA	*Maxillary fracture, right side, initial encounter for closed fracture
*S02.40CB	*Maxillary fracture, right side, initial encounter for open fracture
*S02.40DA	*Maxillary fracture, left side, initial encounter for closed fracture
*S02.40DB	*Maxillary fracture, left side, initial encounter for open fracture
*S02.40EA	*Zygomatic fracture, right side, initial encounter for closed fracture
*S02.40EB	*Zygomatic fracture, right side, initial encounter for open fracture
*S02.40FA	*Zygomatic fracture, left side, initial encounter for closed fracture
*S02.40FB	*Zygomatic fracture, left side, initial encounter for open fracture
S02.411A	LeFort I fracture, initial encounter for closed fracture
S02.411B	LeFort I fracture, initial encounter for open fracture
S02.412A	LeFort II fracture, initial encounter for closed fracture
S02.412B	LeFort II fracture, initial encounter for open fracture



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Code	Description
S02.413A	LeFort III fracture, initial encounter for closed fracture
S02.413B	LeFort III fracture, initial encounter for open fracture
S02.42XA	Fracture of alveolus of maxilla, initial encounter for closed fracture
S02.42XB	Fracture of alveolus of maxilla, initial encounter for open fracture
S02.600A	Fracture of unspecified part of body of mandible, unspecified side, initial encounter for closed fracture
S02.600B	Fracture of unspecified part of body of mandible, unspecified side, initial encounter for open fracture
*S02.601A	*Fracture of unspecified part of body of right mandible, initial encounter for closed fracture
*S02.601B	*Fracture of unspecified part of body of right mandible, initial encounter for open fracture
*S02.602A	*Fracture of unspecified part of body of left mandible, initial encounter for closed fracture
*S02.602B	*Fracture of unspecified part of body of left mandible, initial encounter for open fracture
S02.609A	Fracture of mandible, unspecified, initial encounter for closed fracture
S02.609B	Fracture of mandible, unspecified, initial encounter for open fracture
*S02.610A	*Fracture of condylar process of mandible, unspecified side, initial encounter for closed fracture
*S02.610B	*Fracture of condylar process of mandible, unspecified side, initial encounter for open fracture
*S02.611A	*Fracture of condylar process of right mandible, initial encounter for closed fracture
*S02.611B	*Fracture of condylar process of right mandible, initial encounter for open fracture
*S02.612A	*Fracture of condylar process of left mandible, initial encounter for closed fracture
*S02.612B	*Fracture of condylar process of left mandible, initial encounter for open fracture
*S02.620A	*Fracture of subcondylar process of mandible, unspecified side, initial encounter for closed fracture
*S02.620B	*Fracture of subcondylar process of mandible, unspecified side, initial encounter for open fracture
*S02.621A	*Fracture of subcondylar process of right mandible, initial encounter for closed fracture
*S02.621B	*Fracture of subcondylar process of right mandible, initial encounter for open fracture



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Code	Description
*S02.622A	*Fracture of subcondylar process of left mandible, initial encounter for closed fracture
*S02.622B	*Fracture of subcondylar process of left mandible, initial encounter for open fracture
*S02.630A	*Fracture of coronoid process of mandible, unspecified side, initial encounter for closed fracture
*S02.630B	*Fracture of coronoid process of mandible, unspecified side, initial encounter for open fracture
*S02.631A	*Fracture of coronoid process of right mandible, initial encounter for closed fracture
*S02.631B	*Fracture of coronoid process of right mandible, initial encounter for open fracture
*S02.632A	*Fracture of coronoid process of left mandible, initial encounter for closed fracture
*S02.632B	*Fracture of coronoid process of left mandible, initial encounter for open fracture
*S02.640A	*Fracture of ramus of mandible, unspecified side, initial encounter for closed fracture
*S02.640B	*Fracture of ramus of mandible, unspecified side, initial encounter for open fracture
*S02.641A	*Fracture of ramus of right mandible, initial encounter for closed fracture
*S02.641B	*Fracture of ramus of right mandible, initial encounter for open fracture
*S02.642A	*Fracture of ramus of left mandible, initial encounter for closed fracture
*S02.642B	*Fracture of ramus of left mandible, initial encounter for open fracture
*S02.650A	*Fracture of angle of mandible, unspecified side, initial encounter for closed fracture
*S02.650B	*Fracture of angle of mandible, unspecified side, initial encounter for open fracture
*S02.651A	*Fracture of angle of right mandible, initial encounter for closed fracture
*S02.651B	*Fracture of angle of right mandible, initial encounter for open fracture
*S02.652A	*Fracture of angle of left mandible, initial encounter for closed fracture
*S02.652B	*Fracture of angle of left mandible, initial encounter for open fracture
S02.66XA	Fracture of symphysis of mandible, initial encounter for closed fracture
S02.66XB	Fracture of symphysis of mandible, initial encounter for open fracture
*S02.670A	*Fracture of alveolus of mandible, unspecified side, initial encounter for closed fracture
*S02.670B	*Fracture of alveolus of mandible, unspecified side, initial encounter for open fracture
*S02.671A	*Fracture of alveolus of right mandible, initial encounter for closed fracture
*S02.671B	*Fracture of alveolus of right mandible, initial encounter for open fracture



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Code	Description
*S02.672A	*Fracture of alveolus of left mandible, initial encounter for closed fracture
*S02.672B	*Fracture of alveolus of left mandible, initial encounter for open fracture
S02.69XA	Fracture of mandible of other specified site, initial encounter for closed fracture
S02.69XB	Fracture of mandible of other specified site, initial encounter for open fracture
*S02.80XA	*Fracture of other specified skull and facial bones, unspecified side, initial encounter for closed fracture
*S02.80XB	*Fracture of other specified skull and facial bones, unspecified side, initial encounter for open fracture
*S02.81XA	*Fracture of other specified skull and facial bones, right side, initial encounter for closed fracture
*S02.81XB	*Fracture of other specified skull and facial bones, right side, initial encounter for open fracture
*S02.82XA	*Fracture of other specified skull and facial bones, left side, initial encounter for closed fracture
*S02.82XB	*Fracture of other specified skull and facial bones, left side, initial encounter for open fracture
S02.91XA	Unspecified fracture of skull, initial encounter for closed fracture
S02.91XB	Unspecified fracture of skull, initial encounter for open fracture
S02.92XA	Unspecified fracture of facial bones, initial encounter for closed fracture
S02.92XB	Unspecified fracture of facial bones, initial encounter for open fracture
S05.10XA	Contusion of eyeball and orbital tissues, unspecified eye, initial encounter
S05.11XA	Contusion of eyeball and orbital tissues, right eye, initial encounter
S05.12XA	Contusion of eyeball and orbital tissues, left eye, initial encounter
S05.90XA	Unspecified injury of unspecified eye and orbit, initial encounter
S06.340A	Traumatic hemorrhage of right cerebrum without loss of consciousness, initial encounter
S06.341A	Traumatic hemorrhage of right cerebrum with loss of consciousness of 30 minutes or less, initial encounter
S06.342A	Traumatic hemorrhage of right cerebrum with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.343A	Traumatic hemorrhage of right cerebrum with loss of consciousness of 1 hours to 5 hours 59 minutes, initial encounter
S06.344A	Traumatic hemorrhage of right cerebrum with loss of consciousness of 6 hours to 24 hours, initial encounter



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Code	Description
S06.345A	Traumatic hemorrhage of right cerebrum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.346A	Traumatic hemorrhage of right cerebrum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.347A	Traumatic hemorrhage of right cerebrum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.348A	Traumatic hemorrhage of right cerebrum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.349A	Traumatic hemorrhage of right cerebrum with loss of consciousness of unspecified duration, initial encounter
S06.350A	Traumatic hemorrhage of left cerebrum without loss of consciousness, initial encounter
S06.351A	Traumatic hemorrhage of left cerebrum with loss of consciousness of 30 minutes or less, initial encounter
S06.352A	Traumatic hemorrhage of left cerebrum with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.353A	Traumatic hemorrhage of left cerebrum with loss of consciousness of 1 hours to 5 hours 59 minutes, initial encounter
S06.354A	Traumatic hemorrhage of left cerebrum with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.355A	Traumatic hemorrhage of left cerebrum with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.356A	Traumatic hemorrhage of left cerebrum with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.357A	Traumatic hemorrhage of left cerebrum with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.358A	Traumatic hemorrhage of left cerebrum with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.359A	Traumatic hemorrhage of left cerebrum with loss of consciousness of unspecified duration, initial encounter
S06.360A	Traumatic hemorrhage of cerebrum, unspecified, without loss of consciousness, initial encounter
S06.361A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 30 minutes or less, initial encounter
S06.362A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 31 minutes to 59 minutes, initial encounter



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Code	Description
S06.363A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 1 hours to 5 hours 59 minutes, initial encounter
S06.364A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.365A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.366A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.367A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.368A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.369A	Traumatic hemorrhage of cerebrum, unspecified, with loss of consciousness of unspecified duration, initial encounter
S06.4X0A	Epidural hemorrhage without loss of consciousness, initial encounter
S06.4X1A	Epidural hemorrhage with loss of consciousness of 30 minutes or less, initial encounter
S06.4X2A	Epidural hemorrhage with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.4X3A	Epidural hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.4X4A	Epidural hemorrhage with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.4X5A	Epidural hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.4X6A	Epidural hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.4X7A	Epidural hemorrhage with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.4X8A	Epidural hemorrhage with loss of consciousness of any duration with death due to other causes prior to regaining consciousness, initial encounter
S06.4X9A	Epidural hemorrhage with loss of consciousness of unspecified duration, initial encounter
S06.5X0A	Traumatic subdural hemorrhage without loss of consciousness, initial encounter
S06.5X1A	Traumatic subdural hemorrhage with loss of consciousness of 30 minutes or less, initial encounter
S06.5X2A	Traumatic subdural hemorrhage with loss of consciousness of 31 minutes to 59 minutes, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S06.5X3A	Traumatic subdural hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.5X4A	Traumatic subdural hemorrhage with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.5X5A	Traumatic subdural hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.5X6A	Traumatic subdural hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.5X7A	Traumatic subdural hemorrhage with loss of consciousness of any duration with death due to brain injury before regaining consciousness, initial encounter
S06.5X8A	Traumatic subdural hemorrhage with loss of consciousness of any duration with death due to other cause before regaining consciousness, initial encounter
S06.5X9A	Traumatic subdural hemorrhage with loss of consciousness of unspecified duration, initial encounter
S06.6X0A	Traumatic subarachnoid hemorrhage without loss of consciousness, initial encounter
S06.6X1A	Traumatic subarachnoid hemorrhage with loss of consciousness of 30 minutes or less, initial encounter
S06.6X2A	Traumatic subarachnoid hemorrhage with loss of consciousness of 31 minutes to 59 minutes, initial encounter
S06.6X3A	Traumatic subarachnoid hemorrhage with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter
S06.6X4A	Traumatic subarachnoid hemorrhage with loss of consciousness of 6 hours to 24 hours, initial encounter
S06.6X5A	Traumatic subarachnoid hemorrhage with loss of consciousness greater than 24 hours with return to pre-existing conscious level, initial encounter
S06.6X6A	Traumatic subarachnoid hemorrhage with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving, initial encounter
S06.6X7A	Traumatic subarachnoid hemorrhage with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness, initial encounter
S06.6X8A	Traumatic subarachnoid hemorrhage with loss of consciousness of any duration with death due to other cause prior to regaining consciousness, initial encounter
S06.6X9A	Traumatic subarachnoid hemorrhage with loss of consciousness of unspecified duration, initial encounter
S06.9X0A	Unspecified intracranial injury without loss of consciousness, initial encounter
S06.9X3A	Unspecified intracranial injury with loss of consciousness of 1 hour to 5 hours 59 minutes, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
S07.0XXA	Crushing injury of face, initial encounter
S07.1XXA	Crushing injury of skull, initial encounter
S07.8XXA	Crushing injury of other parts of head, initial encounter
S07.9XXA	Crushing injury of head, part unspecified, initial encounter
S09.0XXA	Injury of blood vessels of head, not elsewhere classified, initial encounter
S10.0XXA	Contusion of throat, initial encounter
S10.83XA	Contusion of other specified part of neck, initial encounter
S10.93XA	Contusion of unspecified part of neck, initial encounter
S12.000A	Unspecified displaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.000B	Unspecified displaced fracture of first cervical vertebra, initial encounter for open fracture
S12.001A	Unspecified nondisplaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.001B	Unspecified nondisplaced fracture of first cervical vertebra, initial encounter for open fracture
S12.01XA	Stable burst fracture of first cervical vertebra, initial encounter for closed fracture
S12.01XB	Stable burst fracture of first cervical vertebra, initial encounter for open fracture
S12.02XA	Unstable burst fracture of first cervical vertebra, initial encounter for closed fracture
S12.02XB	Unstable burst fracture of first cervical vertebra, initial encounter for open fracture
S12.030A	Displaced posterior arch fracture of first cervical vertebra, initial encounter for closed fracture
S12.030B	Displaced posterior arch fracture of first cervical vertebra, initial encounter for open fracture
S12.031A	Nondisplaced posterior arch fracture of first cervical vertebra, initial encounter for closed fracture
S12.031B	Nondisplaced posterior arch fracture of first cervical vertebra, initial encounter for open fracture
S12.040A	Displaced lateral mass fracture of first cervical vertebra, initial encounter for closed fracture
S12.040B	Displaced lateral mass fracture of first cervical vertebra, initial encounter for open fracture
S12.041A	Nondisplaced lateral mass fracture of first cervical vertebra, initial encounter for closed fracture
S12.041B	Nondisplaced lateral mass fracture of first cervical vertebra, initial encounter for open fracture
S12.090A	Other displaced fracture of first cervical vertebra, initial encounter for closed fracture

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S12.090B	Other displaced fracture of first cervical vertebra, initial encounter for open fracture
S12.091A	Other nondisplaced fracture of first cervical vertebra, initial encounter for closed fracture
S12.091B	Other nondisplaced fracture of first cervical vertebra, initial encounter for open fracture
S12.100A	Unspecified displaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.100B	Unspecified displaced fracture of second cervical vertebra, initial encounter for open fracture
S12.101A	Unspecified nondisplaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.101B	Unspecified nondisplaced fracture of second cervical vertebra, initial encounter for open fracture
S12.110A	Anterior displaced Type II dens fracture, initial encounter for closed fracture
S12.110B	Anterior displaced Type II dens fracture, initial encounter for open fracture
S12.111A	Posterior displaced Type II dens fracture, initial encounter for closed fracture
S12.111B	Posterior displaced Type II dens fracture, initial encounter for open fracture
S12.112A	Nondisplaced Type II dens fracture, initial encounter for closed fracture
S12.112B	Nondisplaced Type II dens fracture, initial encounter for open fracture
S12.120A	Other displaced dens fracture, initial encounter for closed fracture
S12.120B	Other displaced dens fracture, initial encounter for open fracture
S12.121A	Other nondisplaced dens fracture, initial encounter for closed fracture
S12.121B	Other nondisplaced dens fracture, initial encounter for open fracture
S12.130A	Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.130B	Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.131A	Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.131B	Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.14XA	Type III traumatic spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.14XB	Type III traumatic spondylolisthesis of second cervical vertebra, initial encounter for open fracture



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Code	Description
S12.150A	Other traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.150B	Other traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.151A	Other traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture
S12.151B	Other traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture
S12.190A	Other displaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.190B	Other displaced fracture of second cervical vertebra, initial encounter for open fracture
S12.191A	Other nondisplaced fracture of second cervical vertebra, initial encounter for closed fracture
S12.191B	Other nondisplaced fracture of second cervical vertebra, initial encounter for open fracture
S12.200A	Unspecified displaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.200B	Unspecified displaced fracture of third cervical vertebra, initial encounter for open fracture
S12.201A	Unspecified nondisplaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.201B	Unspecified nondisplaced fracture of third cervical vertebra, initial encounter for open fracture
S12.230A	Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.230B	Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.231A	Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.231B	Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.24XA	Type III traumatic spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.24XB	Type III traumatic spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.250A	Other traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.250B	Other traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture

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Code	Description
S12.251A	Other traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture
S12.251B	Other traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture
S12.290A	Other displaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.290B	Other displaced fracture of third cervical vertebra, initial encounter for open fracture
S12.291A	Other nondisplaced fracture of third cervical vertebra, initial encounter for closed fracture
S12.291B	Other nondisplaced fracture of third cervical vertebra, initial encounter for open fracture
S12.300A	Unspecified displaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.300B	Unspecified displaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.301A	Unspecified nondisplaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.301B	Unspecified nondisplaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.330A	Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.330B	Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.331A	Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.331B	Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.34XA	Type III traumatic spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.34XB	Type III traumatic spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.350A	Other traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.350B	Other traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture
S12.351A	Other traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture
S12.351B	Other traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture

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Code	Description
S12.390A	Other displaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.390B	Other displaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.391A	Other nondisplaced fracture of fourth cervical vertebra, initial encounter for closed fracture
S12.391B	Other nondisplaced fracture of fourth cervical vertebra, initial encounter for open fracture
S12.400A	Unspecified displaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.400B	Unspecified displaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.401A	Unspecified nondisplaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.401B	Unspecified nondisplaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.430A	Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.430B	Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.431A	Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.431B	Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.44XA	Type III traumatic spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.44XB	Type III traumatic spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.450A	Other traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.450B	Other traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.451A	Other traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
S12.451B	Other traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture
S12.490A	Other displaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.490B	Other displaced fracture of fifth cervical vertebra, initial encounter for open fracture
S12.491A	Other nondisplaced fracture of fifth cervical vertebra, initial encounter for closed fracture
S12.491B	Other nondisplaced fracture of fifth cervical vertebra, initial encounter for open fracture

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Code	Description
S12.500A	Unspecified displaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.500B	Unspecified displaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.501A	Unspecified nondisplaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.501B	Unspecified nondisplaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.530A	Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.530B	Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.531A	Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.531B	Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.54XA	Type III traumatic spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.54XB	Type III traumatic spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.550A	Other traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.550B	Other traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.551A	Other traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture
S12.551B	Other traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture
S12.590A	Other displaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.590B	Other displaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.591A	Other nondisplaced fracture of sixth cervical vertebra, initial encounter for closed fracture
S12.591B	Other nondisplaced fracture of sixth cervical vertebra, initial encounter for open fracture
S12.600A	Unspecified displaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.600B	Unspecified displaced fracture of seventh cervical vertebra, initial encounter for open fracture

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Code	Description
S12.601A	Unspecified nondisplaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.601B	Unspecified nondisplaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.630A	Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.630B	Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.631A	Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.631B	Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.64XA	Type III traumatic spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.64XB	Type III traumatic spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.650A	Other traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.650B	Other traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.651A	Other traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.651B	Other traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.690A	Other displaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.690B	Other displaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.691A	Other nondisplaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.691B	Other nondisplaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.9XXA	Fracture of neck, unspecified, initial encounter
S15.001A	Unspecified injury of right carotid artery, initial encounter
S15.002A	Unspecified injury of left carotid artery, initial encounter
S15.009A	Unspecified injury of unspecified carotid artery, initial encounter
S15.011A	Minor laceration of right carotid artery, initial encounter
S15.012A	Minor laceration of left carotid artery, initial encounter

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Code	Description
S15.019A	Minor laceration of unspecified carotid artery, initial encounter
S15.021A	Major laceration of right carotid artery, initial encounter
S15.022A	Major laceration of left carotid artery, initial encounter
S15.029A	Major laceration of unspecified carotid artery, initial encounter
S15.091A	Other specified injury of right carotid artery, initial encounter
S15.092A	Other specified injury of left carotid artery, initial encounter
S15.099A	Other specified injury of unspecified carotid artery, initial encounter
S15.101A	Unspecified injury of right vertebral artery, initial encounter
S15.102A	Unspecified injury of left vertebral artery, initial encounter
S15.109A	Unspecified injury of unspecified vertebral artery, initial encounter
S15.111A	Minor laceration of right vertebral artery, initial encounter
S15.112A	Minor laceration of left vertebral artery, initial encounter
S15.119A	Minor laceration of unspecified vertebral artery, initial encounter
S15.121A	Major laceration of right vertebral artery, initial encounter
S15.122A	Major laceration of left vertebral artery, initial encounter
S15.129A	Major laceration of unspecified vertebral artery, initial encounter
S15.191A	Other specified injury of right vertebral artery, initial encounter
S15.192A	Other specified injury of left vertebral artery, initial encounter
S15.199A	Other specified injury of unspecified vertebral artery, initial encounter
S15.201A	Unspecified injury of right external jugular vein, initial encounter
S15.202A	Unspecified injury of left external jugular vein, initial encounter
S15.209A	Unspecified injury of unspecified external jugular vein, initial encounter
S15.211A	Minor laceration of right external jugular vein, initial encounter
S15.212A	Minor laceration of left external jugular vein, initial encounter
S15.219A	Minor laceration of unspecified external jugular vein, initial encounter
S15.221A	Major laceration of right external jugular vein, initial encounter
S15.222A	Major laceration of left external jugular vein, initial encounter
S15.229A	Major laceration of unspecified external jugular vein, initial encounter
S15.291A	Other specified injury of right external jugular vein, initial encounter
S15.292A	Other specified injury of left external jugular vein, initial encounter



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Code	Description
S15.299A	Other specified injury of unspecified external jugular vein, initial encounter
S15.301A	Unspecified injury of right internal jugular vein, initial encounter
S15.302A	Unspecified injury of left internal jugular vein, initial encounter
S15.309A	Unspecified injury of unspecified internal jugular vein, initial encounter
S15.311A	Minor laceration of right internal jugular vein, initial encounter
S15.312A	Minor laceration of left internal jugular vein, initial encounter
S15.319A	Minor laceration of unspecified internal jugular vein, initial encounter
S15.321A	Major laceration of right internal jugular vein, initial encounter
S15.322A	Major laceration of left internal jugular vein, initial encounter
S15.329A	Major laceration of unspecified internal jugular vein, initial encounter
S15.391A	Other specified injury of right internal jugular vein, initial encounter
S15.392A	Other specified injury of left internal jugular vein, initial encounter
S15.399A	Other specified injury of unspecified internal jugular vein, initial encounter
S15.8XXA	Injury of other specified blood vessels at neck level, initial encounter
S15.9XXA	Injury of unspecified blood vessel at neck level, initial encounter
S17.0XXA	Crushing injury of larynx and trachea, initial encounter
S17.8XXA	Crushing injury of other specified parts of neck, initial encounter
S17.9XXA	Crushing injury of neck, part unspecified, initial encounter
S20.00XA	Contusion of breast, unspecified breast, initial encounter
S20.01XA	Contusion of right breast, initial encounter
S20.02XA	Contusion of left breast, initial encounter
S20.20XA	Contusion of thorax, unspecified, initial encounter
S20.211A	Contusion of right front wall of thorax, initial encounter
S20.212A	Contusion of left front wall of thorax, initial encounter
S20.219A	Contusion of unspecified front wall of thorax, initial encounter
S20.221A	Contusion of right back wall of thorax, initial encounter
S20.222A	Contusion of left back wall of thorax, initial encounter
S20.229A	Contusion of unspecified back wall of thorax, initial encounter
S21.301A	Unspecified open wound of right front wall of thorax with penetration into thoracic cavity, initial encounter



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Code	Description
S21.302A	Unspecified open wound of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.309A	Unspecified open wound of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.311A	Laceration without foreign body of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.312A	Laceration without foreign body of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.319A	Laceration without foreign body of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.321A	Laceration with foreign body of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.322A	Laceration with foreign body of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.329A	Laceration with foreign body of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.331A	Puncture wound without foreign body of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.332A	Puncture wound without foreign body of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.339A	Puncture wound without foreign body of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.341A	Puncture wound with foreign body of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.342A	Puncture wound with foreign body of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.349A	Puncture wound with foreign body of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.351A	Open bite of right front wall of thorax with penetration into thoracic cavity, initial encounter
S21.352A	Open bite of left front wall of thorax with penetration into thoracic cavity, initial encounter
S21.359A	Open bite of unspecified front wall of thorax with penetration into thoracic cavity, initial encounter
S21.401A	Unspecified open wound of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.402A	Unspecified open wound of left back wall of thorax with penetration into thoracic cavity, initial encounter



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Code	Description
S21.409A	Unspecified open wound of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.411A	Laceration without foreign body of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.412A	Laceration without foreign body of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.419A	Laceration without foreign body of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.421A	Laceration with foreign body of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.422A	Laceration with foreign body of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.429A	Laceration with foreign body of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.431A	Puncture wound without foreign body of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.432A	Puncture wound without foreign body of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.439A	Puncture wound without foreign body of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.441A	Puncture wound with foreign body of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.442A	Puncture wound with foreign body of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.449A	Puncture wound with foreign body of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S21.451A	Open bite of right back wall of thorax with penetration into thoracic cavity, initial encounter
S21.452A	Open bite of left back wall of thorax with penetration into thoracic cavity, initial encounter
S21.459A	Open bite of unspecified back wall of thorax with penetration into thoracic cavity, initial encounter
S22.000A	Wedge compression fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.000B	Wedge compression fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.001A	Stable burst fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.001B	Stable burst fracture of unspecified thoracic vertebra, initial encounter for open fracture

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Code	Description
S22.002A	Unstable burst fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.002B	Unstable burst fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.008A	Other fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.008B	Other fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.009A	Unspecified fracture of unspecified thoracic vertebra, initial encounter for closed fracture
S22.009B	Unspecified fracture of unspecified thoracic vertebra, initial encounter for open fracture
S22.010A	Wedge compression fracture of first thoracic vertebra, initial encounter for closed fracture
S22.010B	Wedge compression fracture of first thoracic vertebra, initial encounter for open fracture
S22.011A	Stable burst fracture of first thoracic vertebra, initial encounter for closed fracture
S22.011B	Stable burst fracture of first thoracic vertebra, initial encounter for open fracture
S22.012A	Unstable burst fracture of first thoracic vertebra, initial encounter for closed fracture
S22.012B	Unstable burst fracture of first thoracic vertebra, initial encounter for open fracture
S22.018A	Other fracture of first thoracic vertebra, initial encounter for closed fracture
S22.018B	Other fracture of first thoracic vertebra, initial encounter for open fracture
S22.019A	Unspecified fracture of first thoracic vertebra, initial encounter for closed fracture
S22.019B	Unspecified fracture of first thoracic vertebra, initial encounter for open fracture
S22.020A	Wedge compression fracture of second thoracic vertebra, initial encounter for closed fracture
S22.020B	Wedge compression fracture of second thoracic vertebra, initial encounter for open fracture
S22.021A	Stable burst fracture of second thoracic vertebra, initial encounter for closed fracture
S22.021B	Stable burst fracture of second thoracic vertebra, initial encounter for open fracture
S22.022A	Unstable burst fracture of second thoracic vertebra, initial encounter for closed fracture
S22.022B	Unstable burst fracture of second thoracic vertebra, initial encounter for open fracture
S22.028A	Other fracture of second thoracic vertebra, initial encounter for closed fracture
S22.028B	Other fracture of second thoracic vertebra, initial encounter for open fracture
S22.029A	Unspecified fracture of second thoracic vertebra, initial encounter for closed fracture
S22.029B	Unspecified fracture of second thoracic vertebra, initial encounter for open fracture
S22.030A	Wedge compression fracture of third thoracic vertebra, initial encounter for closed fracture
S22.030B	Wedge compression fracture of third thoracic vertebra, initial encounter for open fracture
S22.031A	Stable burst fracture of third thoracic vertebra, initial encounter for closed fracture

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Code	Description
S22.031B	Stable burst fracture of third thoracic vertebra, initial encounter for open fracture
S22.032A	Unstable burst fracture of third thoracic vertebra, initial encounter for closed fracture
S22.032B	Unstable burst fracture of third thoracic vertebra, initial encounter for open fracture
S22.038A	Other fracture of third thoracic vertebra, initial encounter for closed fracture
S22.038B	Other fracture of third thoracic vertebra, initial encounter for open fracture
S22.039A	Unspecified fracture of third thoracic vertebra, initial encounter for closed fracture
S22.039B	Unspecified fracture of third thoracic vertebra, initial encounter for open fracture
S22.040A	Wedge compression fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.040B	Wedge compression fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.041A	Stable burst fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.041B	Stable burst fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.042A	Unstable burst fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.042B	Unstable burst fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.048A	Other fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.048B	Other fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.049A	Unspecified fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.049B	Unspecified fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.050A	Wedge compression fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.050B	Wedge compression fracture of T5-T6 vertebra, initial encounter for open fracture
S22.051A	Stable burst fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.051B	Stable burst fracture of T5-T6 vertebra, initial encounter for open fracture
S22.052A	Unstable burst fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.052B	Unstable burst fracture of T5-T6 vertebra, initial encounter for open fracture
S22.058A	Other fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.058B	Other fracture of T5-T6 vertebra, initial encounter for open fracture
S22.059A	Unspecified fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.059B	Unspecified fracture of T5-T6 vertebra, initial encounter for open fracture
S22.060A	Wedge compression fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.060B	Wedge compression fracture of T7-T8 vertebra, initial encounter for open fracture
S22.061A	Stable burst fracture of T7-T8 vertebra, initial encounter for closed fracture

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Code	Description
S22.061B	Stable burst fracture of T7-T8 vertebra, initial encounter for open fracture
S22.062A	Unstable burst fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.062B	Unstable burst fracture of T7-T8 vertebra, initial encounter for open fracture
S22.068A	Other fracture of T7-T8 thoracic vertebra, initial encounter for closed fracture
S22.068B	Other fracture of T7-T8 thoracic vertebra, initial encounter for open fracture
S22.069A	Unspecified fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.069B	Unspecified fracture of T7-T8 vertebra, initial encounter for open fracture
S22.070A	Wedge compression fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.070B	Wedge compression fracture of T9-T10 vertebra, initial encounter for open fracture
S22.071A	Stable burst fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.071B	Stable burst fracture of T9-T10 vertebra, initial encounter for open fracture
S22.072A	Unstable burst fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.072B	Unstable burst fracture of T9-T10 vertebra, initial encounter for open fracture
S22.078A	Other fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.078B	Other fracture of T9-T10 vertebra, initial encounter for open fracture
S22.079A	Unspecified fracture of T9-T10 vertebra, initial encounter for closed fracture
S22.079B	Unspecified fracture of T9-T10 vertebra, initial encounter for open fracture
S22.080A	Wedge compression fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.080B	Wedge compression fracture of T11-T12 vertebra, initial encounter for open fracture
S22.081A	Stable burst fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.081B	Stable burst fracture of T11-T12 vertebra, initial encounter for open fracture
S22.082A	Unstable burst fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.082B	Unstable burst fracture of T11-T12 vertebra, initial encounter for open fracture
S22.088A	Other fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.088B	Other fracture of T11-T12 vertebra, initial encounter for open fracture
S22.089A	Unspecified fracture of T11-T12 vertebra, initial encounter for closed fracture
S22.089B	Unspecified fracture of T11-T12 vertebra, initial encounter for open fracture
*S22.20XA	*Unspecified fracture of sternum, initial encounter for closed fracture
*S22.20XB	*Unspecified fracture of sternum, initial encounter for open fracture
S22.31XA	Fracture of one rib, right side, initial encounter for closed fracture



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Code	Description
S22.31XB	Fracture of one rib, right side, initial encounter for open fracture
S22.32XA	Fracture of one rib, left side, initial encounter for closed fracture
S22.32XB	Fracture of one rib, left side, initial encounter for open fracture
S22.39XA	Fracture of one rib, unspecified side, initial encounter for closed fracture
S22.39XB	Fracture of one rib, unspecified side, initial encounter for open fracture
S22.41XA	Multiple fractures of ribs, right side, initial encounter for closed fracture
S22.41XB	Multiple fractures of ribs, right side, initial encounter for open fracture
S22.42XA	Multiple fractures of ribs, left side, initial encounter for closed fracture
S22.42XB	Multiple fractures of ribs, left side, initial encounter for open fracture
S22.43XA	Multiple fractures of ribs, bilateral, initial encounter for closed fracture
S22.43XB	Multiple fractures of ribs, bilateral, initial encounter for open fracture
S22.49XA	Multiple fractures of ribs, unspecified side, initial encounter for closed fracture
S22.49XB	Multiple fractures of ribs, unspecified side, initial encounter for open fracture
S22.9XXA	Fracture of bony thorax, part unspecified, initial encounter for closed fracture
S22.9XXB	Fracture of bony thorax, part unspecified, initial encounter for open fracture
S25.00XA	Unspecified injury of thoracic aorta, initial encounter
S25.01XA	Minor laceration of thoracic aorta, initial encounter
S25.02XA	Major laceration of thoracic aorta, initial encounter
S25.09XA	Other specified injury of thoracic aorta, initial encounter
S25.101A	Unspecified injury of right innominate or subclavian artery, initial encounter
S25.102A	Unspecified injury of left innominate or subclavian artery, initial encounter
S25.109A	Unspecified injury of unspecified innominate or subclavian artery, initial encounter
S25.111A	Minor laceration of right innominate or subclavian artery, initial encounter
S25.112A	Minor laceration of left innominate or subclavian artery, initial encounter
S25.119A	Minor laceration of unspecified innominate or subclavian artery, initial encounter
S25.121A	Major laceration of right innominate or subclavian artery, initial encounter
S25.122A	Major laceration of left innominate or subclavian artery, initial encounter
S25.129A	Major laceration of unspecified innominate or subclavian artery, initial encounter
S25.191A	Other specified injury of right innominate or subclavian artery, initial encounter
S25.192A	Other specified injury of left innominate or subclavian artery, initial encounter

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Code	Description
S25.199A	Other specified injury of unspecified innominate or subclavian artery, initial encounter
S25.20XA	Unspecified injury of superior vena cava, initial encounter
S25.21XA	Minor laceration of superior vena cava, initial encounter
S25.22XA	Major laceration of superior vena cava, initial encounter
S25.29XA	Other specified injury of superior vena cava, initial encounter
S25.301A	Unspecified injury of right innominate or subclavian vein, initial encounter
S25.302A	Unspecified injury of left innominate or subclavian vein, initial encounter
S25.309A	Unspecified injury of unspecified innominate or subclavian vein, initial encounter
S25.311A	Minor laceration of right innominate or subclavian vein, initial encounter
S25.312A	Minor laceration of left innominate or subclavian vein, initial encounter
S25.319A	Minor laceration of unspecified innominate or subclavian vein, initial encounter
S25.321A	Major laceration of right innominate or subclavian vein, initial encounter
S25.322A	Major laceration of left innominate or subclavian vein, initial encounter
S25.329A	Major laceration of unspecified innominate or subclavian vein, initial encounter
S25.391A	Other specified injury of right innominate or subclavian vein, initial encounter
S25.392A	Other specified injury of left innominate or subclavian vein, initial encounter
S25.399A	Other specified injury of unspecified innominate or subclavian vein, initial encounter
S25.401A	Unspecified injury of right pulmonary blood vessels, initial encounter
S25.402A	Unspecified injury of left pulmonary blood vessels, initial encounter
S25.409A	Unspecified injury of unspecified pulmonary blood vessels, initial encounter
S25.411A	Minor laceration of right pulmonary blood vessels, initial encounter
S25.412A	Minor laceration of left pulmonary blood vessels, initial encounter
S25.419A	Minor laceration of unspecified pulmonary blood vessels, initial encounter
S25.421A	Major laceration of right pulmonary blood vessels, initial encounter
S25.422A	Major laceration of left pulmonary blood vessels, initial encounter
S25.429A	Major laceration of unspecified pulmonary blood vessels, initial encounter
S25.491A	Other specified injury of right pulmonary blood vessels, initial encounter
S25.492A	Other specified injury of left pulmonary blood vessels, initial encounter
S25.499A	Other specified injury of unspecified pulmonary blood vessels, initial encounter
S25.501A	Unspecified injury of intercostal blood vessels, right side, initial encounter



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Code	Description
S25.502A	Unspecified injury of intercostal blood vessels, left side, initial encounter
S25.509A	Unspecified injury of intercostal blood vessels, unspecified side, initial encounter
S25.511A	Laceration of intercostal blood vessels, right side, initial encounter
S25.512A	Laceration of intercostal blood vessels, left side, initial encounter
S25.519A	Laceration of intercostal blood vessels, unspecified side, initial encounter
S25.591A	Other specified injury of intercostal blood vessels, right side, initial encounter
S25.592A	Other specified injury of intercostal blood vessels, left side, initial encounter
S25.599A	Other specified injury of intercostal blood vessels, unspecified side, initial encounter
S25.801A	Unspecified injury of other blood vessels of thorax, right side, initial encounter
S25.802A	Unspecified injury of other blood vessels of thorax, left side, initial encounter
S25.809A	Unspecified injury of other blood vessels of thorax, unspecified side, initial encounter
S25.811A	Laceration of other blood vessels of thorax, right side, initial encounter
S25.812A	Laceration of other blood vessels of thorax, left side, initial encounter
S25.819A	Laceration of other blood vessels of thorax, unspecified side, initial encounter
S25.891A	Other specified injury of other blood vessels of thorax, right side, initial encounter
S25.892A	Other specified injury of other blood vessels of thorax, left side, initial encounter
S25.899A	Other specified injury of other blood vessels of thorax, unspecified side, initial encounter
S25.90XA	Unspecified injury of unspecified blood vessel of thorax, initial encounter
S25.91XA	Laceration of unspecified blood vessel of thorax, initial encounter
S25.99XA	Other specified injury of unspecified blood vessel of thorax, initial encounter
S26.00XA	Unspecified injury of heart with hemopericardium, initial encounter
S26.01XA	Contusion of heart with hemopericardium, initial encounter
S26.020A	Mild laceration of heart with hemopericardium, initial encounter
S26.021A	Moderate laceration of heart with hemopericardium, initial encounter
S26.022A	Major laceration of heart with hemopericardium, initial encounter
S26.09XA	Other injury of heart with hemopericardium, initial encounter
S26.10XA	Unspecified injury of heart without hemopericardium, initial encounter
S26.11XA	Contusion of heart without hemopericardium, initial encounter
S26.12XA	Laceration of heart without hemopericardium, initial encounter
S26.19XA	Other injury of heart without hemopericardium, initial encounter

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Code	Description
S26.90XA	Unspecified injury of heart, unspecified with or without hemopericardium, initial encounter
S26.91XA	Contusion of heart, unspecified with or without hemopericardium, initial encounter
S26.92XA	Laceration of heart, unspecified with or without hemopericardium, initial encounter
S26.99XA	Other injury of heart, unspecified with or without hemopericardium, initial encounter
S27.0XXA	Traumatic pneumothorax, initial encounter
S27.1XXA	Traumatic hemothorax, initial encounter
S27.2XXA	Traumatic hemopneumothorax, initial encounter
S27.301A	Unspecified injury of lung, unilateral, initial encounter
S27.302A	Unspecified injury of lung, bilateral, initial encounter
S27.309A	Unspecified injury of lung, unspecified, initial encounter
S27.311A	Primary blast injury of lung, unilateral, initial encounter
S27.312A	Primary blast injury of lung, bilateral, initial encounter
S27.319A	Primary blast injury of lung, unspecified, initial encounter
S27.321A	Contusion of lung, unilateral, initial encounter
S27.322A	Contusion of lung, bilateral, initial encounter
S27.329A	Contusion of lung, unspecified, initial encounter
S27.331A	Laceration of lung, unilateral, initial encounter
S27.332A	Laceration of lung, bilateral, initial encounter
S27.339A	Laceration of lung, unspecified, initial encounter
S27.391A	Other injuries of lung, unilateral, initial encounter
S27.392A	Other injuries of lung, bilateral, initial encounter
S27.399A	Other injuries of lung, unspecified, initial encounter
S27.401A	Unspecified injury of bronchus, unilateral, initial encounter
S27.402A	Unspecified injury of bronchus, bilateral, initial encounter
S27.409A	Unspecified injury of bronchus, unspecified, initial encounter
S27.411A	Primary blast injury of bronchus, unilateral, initial encounter
S27.412A	Primary blast injury of bronchus, bilateral, initial encounter
S27.419A	Primary blast injury of bronchus, unspecified, initial encounter
S27.421A	Contusion of bronchus, unilateral, initial encounter
S27.422A	Contusion of bronchus, bilateral, initial encounter



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Code	Description
S27.429A	Contusion of bronchus, unspecified, initial encounter
S27.431A	Laceration of bronchus, unilateral, initial encounter
S27.432A	Laceration of bronchus, bilateral, initial encounter
S27.439A	Laceration of bronchus, unspecified, initial encounter
S27.491A	Other injury of bronchus, unilateral, initial encounter
S27.492A	Other injury of bronchus, bilateral, initial encounter
S27.499A	Other injury of bronchus, unspecified, initial encounter
S27.50XA	Unspecified injury of thoracic trachea, initial encounter
S27.51XA	Primary blast injury of thoracic trachea, initial encounter
S27.52XA	Contusion of thoracic trachea, initial encounter
S27.53XA	Laceration of thoracic trachea, initial encounter
S27.59XA	Other injury of thoracic trachea, initial encounter
S27.60XA	Unspecified injury of pleura, initial encounter
S27.63XA	Laceration of pleura, initial encounter
S27.69XA	Other injury of pleura, initial encounter
S27.802A	Contusion of diaphragm, initial encounter
S27.803A	Laceration of diaphragm, initial encounter
S27.808A	Other injury of diaphragm, initial encounter
S27.809A	Unspecified injury of diaphragm, initial encounter
S27.812A	Contusion of esophagus (thoracic part), initial encounter
S27.813A	Laceration of esophagus (thoracic part), initial encounter
S27.818A	Other injury of esophagus (thoracic part), initial encounter
S27.819A	Unspecified injury of esophagus (thoracic part), initial encounter
S27.892A	Contusion of other specified intrathoracic organs, initial encounter
S27.893A	Laceration of other specified intrathoracic organs, initial encounter
S27.898A	Other injury of other specified intrathoracic organs, initial encounter
S27.899A	Unspecified injury of other specified intrathoracic organs, initial encounter
S27.9XXA	Injury of unspecified intrathoracic organ, initial encounter
S28.0XXA	Crushed chest, initial encounter
S30.0XXA	Contusion of lower back and pelvis, initial encounter

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Code	Description
S30.1XXA	Contusion of abdominal wall, initial encounter
S30.201A	Contusion of unspecified external genital organ, male, initial encounter
S30.202A	Contusion of unspecified external genital organ, female, initial encounter
S30.21XA	Contusion of penis, initial encounter
S30.22XA	Contusion of scrotum and testes, initial encounter
S30.23XA	Contusion of vagina and vulva, initial encounter
S30.3XXA	Contusion of anus, initial encounter
S31.001A	Unspecified open wound of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.011A	Laceration without foreign body of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.021A	Laceration with foreign body of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.031A	Puncture wound without foreign body of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.041A	Puncture wound with foreign body of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.051A	Open bite of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.600A	Unspecified open wound of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.601A	Unspecified open wound of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.602A	Unspecified open wound of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.603A	Unspecified open wound of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.604A	Unspecified open wound of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.605A	Unspecified open wound of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.609A	Unspecified open wound of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.610A	Laceration without foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter



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Code	Description
S31.611A	Laceration without foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.612A	Laceration without foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.613A	Laceration without foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.614A	Laceration without foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.615A	Laceration without foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.619A	Laceration without foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.620A	Laceration with foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.621A	Laceration with foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.622A	Laceration with foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.623A	Laceration with foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.624A	Laceration with foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.625A	Laceration with foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.629A	Laceration with foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.630A	Puncture wound without foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.631A	Puncture wound without foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.632A	Puncture wound without foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.633A	Puncture wound without foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.634A	Puncture wound without foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter



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Code	Description
S31.635A	Puncture wound without foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.639A	Puncture wound without foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.640A	Puncture wound with foreign body of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.641A	Puncture wound with foreign body of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.642A	Puncture wound with foreign body of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.643A	Puncture wound with foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.644A	Puncture wound with foreign body of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.645A	Puncture wound with foreign body of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.649A	Puncture wound with foreign body of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S31.650A	Open bite of abdominal wall, right upper quadrant with penetration into peritoneal cavity, initial encounter
S31.651A	Open bite of abdominal wall, left upper quadrant with penetration into peritoneal cavity, initial encounter
S31.652A	Open bite of abdominal wall, epigastric region with penetration into peritoneal cavity, initial encounter
S31.653A	Open bite of abdominal wall, right lower quadrant with penetration into peritoneal cavity, initial encounter
S31.654A	Open bite of abdominal wall, left lower quadrant with penetration into peritoneal cavity, initial encounter
S31.655A	Open bite of abdominal wall, periumbilic region with penetration into peritoneal cavity, initial encounter
S31.659A	Open bite of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S32.000A	Wedge compression fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.000B	Wedge compression fracture of unspecified lumbar vertebra, initial encounter for open fracture



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Code	Description
S32.001A	Stable burst fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.001B	Stable burst fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.002A	Unstable burst fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.002B	Unstable burst fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.008A	Other fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.008B	Other fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.009A	Unspecified fracture of unspecified lumbar vertebra, initial encounter for closed fracture
S32.009B	Unspecified fracture of unspecified lumbar vertebra, initial encounter for open fracture
S32.010A	Wedge compression fracture of first lumbar vertebra, initial encounter for closed fracture
S32.010B	Wedge compression fracture of first lumbar vertebra, initial encounter for open fracture
S32.011A	Stable burst fracture of first lumbar vertebra, initial encounter for closed fracture
S32.011B	Stable burst fracture of first lumbar vertebra, initial encounter for open fracture
S32.012A	Unstable burst fracture of first lumbar vertebra, initial encounter for closed fracture
S32.012B	Unstable burst fracture of first lumbar vertebra, initial encounter for open fracture
S32.018A	Other fracture of first lumbar vertebra, initial encounter for closed fracture
S32.018B	Other fracture of first lumbar vertebra, initial encounter for open fracture
S32.019A	Unspecified fracture of first lumbar vertebra, initial encounter for closed fracture
S32.019B	Unspecified fracture of first lumbar vertebra, initial encounter for open fracture
S32.020A	Wedge compression fracture of second lumbar vertebra, initial encounter for closed fracture
S32.020B	Wedge compression fracture of second lumbar vertebra, initial encounter for open fracture
S32.021A	Stable burst fracture of second lumbar vertebra, initial encounter for closed fracture
S32.021B	Stable burst fracture of second lumbar vertebra, initial encounter for open fracture
S32.022A	Unstable burst fracture of second lumbar vertebra, initial encounter for closed fracture
S32.022B	Unstable burst fracture of second lumbar vertebra, initial encounter for open fracture
S32.028A	Other fracture of second lumbar vertebra, initial encounter for closed fracture
S32.028B	Other fracture of second lumbar vertebra, initial encounter for open fracture
S32.029A	Unspecified fracture of second lumbar vertebra, initial encounter for closed fracture
S32.029B	Unspecified fracture of second lumbar vertebra, initial encounter for open fracture
S32.030A	Wedge compression fracture of third lumbar vertebra, initial encounter for closed fracture
S32.030B	Wedge compression fracture of third lumbar vertebra, initial encounter for open fracture

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Code	Description
S32.031A	Stable burst fracture of third lumbar vertebra, initial encounter for closed fracture
S32.031B	Stable burst fracture of third lumbar vertebra, initial encounter for open fracture
S32.032A	Unstable burst fracture of third lumbar vertebra, initial encounter for closed fracture
S32.032B	Unstable burst fracture of third lumbar vertebra, initial encounter for open fracture
S32.038A	Other fracture of third lumbar vertebra, initial encounter for closed fracture
S32.038B	Other fracture of third lumbar vertebra, initial encounter for open fracture
S32.039A	Unspecified fracture of third lumbar vertebra, initial encounter for closed fracture
S32.039B	Unspecified fracture of third lumbar vertebra, initial encounter for open fracture
S32.040A	Wedge compression fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.040B	Wedge compression fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.041A	Stable burst fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.041B	Stable burst fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.042A	Unstable burst fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.042B	Unstable burst fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.048A	Other fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.048B	Other fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.049A	Unspecified fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.049B	Unspecified fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.050A	Wedge compression fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.050B	Wedge compression fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.051A	Stable burst fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.051B	Stable burst fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.052A	Unstable burst fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.052B	Unstable burst fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.058A	Other fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.058B	Other fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.059A	Unspecified fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.059B	Unspecified fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.10XA	Unspecified fracture of sacrum, initial encounter for closed fracture
S32.10XB	Unspecified fracture of sacrum, initial encounter for open fracture



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Code	Description
S32.110A	Nondisplaced Zone I fracture of sacrum, initial encounter for closed fracture
S32.110B	Nondisplaced Zone I fracture of sacrum, initial encounter for open fracture
S32.111A	Minimally displaced Zone I fracture of sacrum, initial encounter for closed fracture
S32.111B	Minimally displaced Zone I fracture of sacrum, initial encounter for open fracture
S32.112A	Severely displaced Zone I fracture of sacrum, initial encounter for closed fracture
S32.112B	Severely displaced Zone I fracture of sacrum, initial encounter for open fracture
S32.119A	Unspecified Zone I fracture of sacrum, initial encounter for closed fracture
S32.119B	Unspecified Zone I fracture of sacrum, initial encounter for open fracture
S32.120A	Nondisplaced Zone II fracture of sacrum, initial encounter for closed fracture
S32.120B	Nondisplaced Zone II fracture of sacrum, initial encounter for open fracture
S32.121A	Minimally displaced Zone II fracture of sacrum, initial encounter for closed fracture
S32.121B	Minimally displaced Zone II fracture of sacrum, initial encounter for open fracture
S32.122A	Severely displaced Zone II fracture of sacrum, initial encounter for closed fracture
S32.122B	Severely displaced Zone II fracture of sacrum, initial encounter for open fracture
S32.129A	Unspecified Zone II fracture of sacrum, initial encounter for closed fracture
S32.129B	Unspecified Zone II fracture of sacrum, initial encounter for open fracture
S32.130A	Nondisplaced Zone III fracture of sacrum, initial encounter for closed fracture
S32.130B	Nondisplaced Zone III fracture of sacrum, initial encounter for open fracture
S32.131A	Minimally displaced Zone III fracture of sacrum, initial encounter for closed fracture
S32.131B	Minimally displaced Zone III fracture of sacrum, initial encounter for open fracture
S32.132A	Severely displaced Zone III fracture of sacrum, initial encounter for closed fracture
S32.132B	Severely displaced Zone III fracture of sacrum, initial encounter for open fracture
S32.139A	Unspecified Zone III fracture of sacrum, initial encounter for closed fracture
S32.139B	Unspecified Zone III fracture of sacrum, initial encounter for open fracture
S32.14XA	Type 1 fracture of sacrum, initial encounter for closed fracture
S32.14XB	Type 1 fracture of sacrum, initial encounter for open fracture
S32.15XA	Type 2 fracture of sacrum, initial encounter for closed fracture
S32.15XB	Type 2 fracture of sacrum, initial encounter for open fracture
S32.16XA	Type 3 fracture of sacrum, initial encounter for closed fracture
S32.16XB	Type 3 fracture of sacrum, initial encounter for open fracture

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Code	Description
S32.17XA	Type 4 fracture of sacrum, initial encounter for closed fracture
S32.17XB	Type 4 fracture of sacrum, initial encounter for open fracture
S32.19XA	Other fracture of sacrum, initial encounter for closed fracture
S32.19XB	Other fracture of sacrum, initial encounter for open fracture
S32.2XXA	Fracture of coccyx, initial encounter for closed fracture
S32.2XXB	Fracture of coccyx, initial encounter for open fracture
S32.9XXA	Fracture of unspecified parts of lumbosacral spine and pelvis, initial encounter for closed fracture
S32.9XXB	Fracture of unspecified parts of lumbosacral spine and pelvis, initial encounter for open fracture
S35.00XA	Unspecified injury of abdominal aorta, initial encounter
S35.01XA	Minor laceration of abdominal aorta, initial encounter
S35.02XA	Major laceration of abdominal aorta, initial encounter
S35.09XA	Other injury of abdominal aorta, initial encounter
S35.10XA	Unspecified injury of inferior vena cava, initial encounter
S35.11XA	Minor laceration of inferior vena cava, initial encounter
S35.12XA	Major laceration of inferior vena cava, initial encounter
S35.19XA	Other injury of inferior vena cava, initial encounter
S35.211A	Minor laceration of celiac artery, initial encounter
S35.212A	Major laceration of celiac artery, initial encounter
S35.218A	Other injury of celiac artery, initial encounter
S35.219A	Unspecified injury of celiac artery, initial encounter
S35.221A	Minor laceration of superior mesenteric artery, initial encounter
S35.222A	Major laceration of superior mesenteric artery, initial encounter
S35.228A	Other injury of superior mesenteric artery, initial encounter
S35.229A	Unspecified injury of superior mesenteric artery, initial encounter
S35.231A	Minor laceration of inferior mesenteric artery, initial encounter
S35.232A	Major laceration of inferior mesenteric artery, initial encounter
S35.238A	Other injury of inferior mesenteric artery, initial encounter
S35.239A	Unspecified injury of inferior mesenteric artery, initial encounter
S35.291A	Minor laceration of branches of celiac and mesenteric artery, initial encounter

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Code	Description
S35.292A	Major laceration of branches of celiac and mesenteric artery, initial encounter
S35.298A	Other injury of branches of celiac and mesenteric artery, initial encounter
S35.299A	Unspecified injury of branches of celiac and mesenteric artery, initial encounter
S35.311A	Laceration of portal vein, initial encounter
S35.318A	Other specified injury of portal vein, initial encounter
S35.319A	Unspecified injury of portal vein, initial encounter
S35.321A	Laceration of splenic vein, initial encounter
S35.328A	Other specified injury of splenic vein, initial encounter
S35.329A	Unspecified injury of splenic vein, initial encounter
S35.331A	Laceration of superior mesenteric vein, initial encounter
S35.338A	Other specified injury of superior mesenteric vein, initial encounter
S35.339A	Unspecified injury of superior mesenteric vein, initial encounter
S35.341A	Laceration of inferior mesenteric vein, initial encounter
S35.348A	Other specified injury of inferior mesenteric vein, initial encounter
S35.349A	Unspecified injury of inferior mesenteric vein, initial encounter
S35.401A	Unspecified injury of right renal artery, initial encounter
S35.402A	Unspecified injury of left renal artery, initial encounter
S35.403A	Unspecified injury of unspecified renal artery, initial encounter
S35.404A	Unspecified injury of right renal vein, initial encounter
S35.405A	Unspecified injury of left renal vein, initial encounter
S35.406A	Unspecified injury of unspecified renal vein, initial encounter
S35.411A	Laceration of right renal artery, initial encounter
S35.412A	Laceration of left renal artery, initial encounter
S35.413A	Laceration of unspecified renal artery, initial encounter
S35.414A	Laceration of right renal vein, initial encounter
S35.415A	Laceration of left renal vein, initial encounter
S35.416A	Laceration of unspecified renal vein, initial encounter
S35.491A	Other specified injury of right renal artery, initial encounter
S35.492A	Other specified injury of left renal artery, initial encounter
S35.493A	Other specified injury of unspecified renal artery, initial encounter

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Code	Description
S35.494A	Other specified injury of right renal vein, initial encounter
S35.495A	Other specified injury of left renal vein, initial encounter
S35.496A	Other specified injury of unspecified renal vein, initial encounter
S35.50XA	Injury of unspecified iliac blood vessel(s), initial encounter
S35.511A	Injury of right iliac artery, initial encounter
S35.512A	Injury of left iliac artery, initial encounter
S35.513A	Injury of unspecified iliac artery, initial encounter
S35.514A	Injury of right iliac vein, initial encounter
S35.515A	Injury of left iliac vein, initial encounter
S35.516A	Injury of unspecified iliac vein, initial encounter
S35.531A	Injury of right uterine artery, initial encounter
S35.532A	Injury of left uterine artery, initial encounter
S35.533A	Injury of unspecified uterine artery, initial encounter
S35.534A	Injury of right uterine vein, initial encounter
S35.535A	Injury of left uterine vein, initial encounter
S35.536A	Injury of unspecified uterine vein, initial encounter
S35.59XA	Injury of other iliac blood vessels, initial encounter
S35.8X1A	Laceration of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.8X8A	Other specified injury of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.8X9A	Unspecified injury of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.90XA	Unspecified injury of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S35.91XA	Laceration of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S35.99XA	Other specified injury of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S36.00XA	Unspecified injury of spleen, initial encounter
S36.020A	Minor contusion of spleen, initial encounter
S36.021A	Major contusion of spleen, initial encounter



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Code	Description
S36.029A	Unspecified contusion of spleen, initial encounter
S36.030A	Superficial (capsular) laceration of spleen, initial encounter
S36.031A	Moderate laceration of spleen, initial encounter
S36.032A	Major laceration of spleen, initial encounter
S36.039A	Unspecified laceration of spleen, initial encounter
S36.09XA	Other injury of spleen, initial encounter
S36.112A	Contusion of liver, initial encounter
S36.113A	Laceration of liver, unspecified degree, initial encounter
S36.114A	Minor laceration of liver, initial encounter
S36.115A	Moderate laceration of liver, initial encounter
S36.116A	Major laceration of liver, initial encounter
S36.118A	Other injury of liver, initial encounter
S36.119A	Unspecified injury of liver, initial encounter
S36.122A	Contusion of gallbladder, initial encounter
S36.123A	Laceration of gallbladder, initial encounter
S36.128A	Other injury of gallbladder, initial encounter
S36.129A	Unspecified injury of gallbladder, initial encounter
S36.13XA	Injury of bile duct, initial encounter
S36.200A	Unspecified injury of head of pancreas, initial encounter
S36.201A	Unspecified injury of body of pancreas, initial encounter
S36.202A	Unspecified injury of tail of pancreas, initial encounter
S36.209A	Unspecified injury of unspecified part of pancreas, initial encounter
S36.220A	Contusion of head of pancreas, initial encounter
S36.221A	Contusion of body of pancreas, initial encounter
S36.222A	Contusion of tail of pancreas, initial encounter
S36.229A	Contusion of unspecified part of pancreas, initial encounter
S36.230A	Laceration of head of pancreas, unspecified degree, initial encounter
S36.231A	Laceration of body of pancreas, unspecified degree, initial encounter
S36.232A	Laceration of tail of pancreas, unspecified degree, initial encounter
S36.239A	Laceration of unspecified part of pancreas, unspecified degree, initial encounter

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Code	Description
S36.240A	Minor laceration of head of pancreas, initial encounter
S36.241A	Minor laceration of body of pancreas, initial encounter
S36.242A	Minor laceration of tail of pancreas, initial encounter
S36.249A	Minor laceration of unspecified part of pancreas, initial encounter
S36.250A	Moderate laceration of head of pancreas, initial encounter
S36.251A	Moderate laceration of body of pancreas, initial encounter
S36.252A	Moderate laceration of tail of pancreas, initial encounter
S36.259A	Moderate laceration of unspecified part of pancreas, initial encounter
S36.260A	Major laceration of head of pancreas, initial encounter
S36.261A	Major laceration of body of pancreas, initial encounter
S36.262A	Major laceration of tail of pancreas, initial encounter
S36.269A	Major laceration of unspecified part of pancreas, initial encounter
S36.290A	Other injury of head of pancreas, initial encounter
S36.291A	Other injury of body of pancreas, initial encounter
S36.292A	Other injury of tail of pancreas, initial encounter
S36.299A	Other injury of unspecified part of pancreas, initial encounter
S36.30XA	Unspecified injury of stomach, initial encounter
S36.32XA	Contusion of stomach, initial encounter
S36.33XA	Laceration of stomach, initial encounter
S36.39XA	Other injury of stomach, initial encounter
S36.400A	Unspecified injury of duodenum, initial encounter
S36.408A	Unspecified injury of other part of small intestine, initial encounter
S36.409A	Unspecified injury of unspecified part of small intestine, initial encounter
S36.410A	Primary blast injury of duodenum, initial encounter
S36.418A	Primary blast injury of other part of small intestine, initial encounter
S36.419A	Primary blast injury of unspecified part of small intestine, initial encounter
S36.420A	Contusion of duodenum, initial encounter
S36.428A	Contusion of other part of small intestine, initial encounter
S36.429A	Contusion of unspecified part of small intestine, initial encounter
S36.430A	Laceration of duodenum, initial encounter



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Code	Description
S36.438A	Laceration of other part of small intestine, initial encounter
S36.439A	Laceration of unspecified part of small intestine, initial encounter
S36.490A	Other injury of duodenum, initial encounter
S36.498A	Other injury of other part of small intestine, initial encounter
S36.499A	Other injury of unspecified part of small intestine, initial encounter
S36.500A	Unspecified injury of ascending [right] colon, initial encounter
S36.501A	Unspecified injury of transverse colon, initial encounter
S36.502A	Unspecified injury of descending [left] colon, initial encounter
S36.503A	Unspecified injury of sigmoid colon, initial encounter
S36.508A	Unspecified injury of other part of colon, initial encounter
S36.509A	Unspecified injury of unspecified part of colon, initial encounter
S36.510A	Primary blast injury of ascending [right] colon, initial encounter
S36.511A	Primary blast injury of transverse colon, initial encounter
S36.512A	Primary blast injury of descending [left] colon, initial encounter
S36.513A	Primary blast injury of sigmoid colon, initial encounter
S36.518A	Primary blast injury of other part of colon, initial encounter
S36.519A	Primary blast injury of unspecified part of colon, initial encounter
S36.520A	Contusion of ascending [right] colon, initial encounter
S36.521A	Contusion of transverse colon, initial encounter
S36.522A	Contusion of descending [left] colon, initial encounter
S36.523A	Contusion of sigmoid colon, initial encounter
S36.528A	Contusion of other part of colon, initial encounter
S36.529A	Contusion of unspecified part of colon, initial encounter
S36.530A	Laceration of ascending [right] colon, initial encounter
S36.531A	Laceration of transverse colon, initial encounter
S36.532A	Laceration of descending [left] colon, initial encounter
S36.533A	Laceration of sigmoid colon, initial encounter
S36.538A	Laceration of other part of colon, initial encounter
S36.539A	Laceration of unspecified part of colon, initial encounter
S36.590A	Other injury of ascending [right] colon, initial encounter

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Code	Description
S36.591A	Other injury of transverse colon, initial encounter
S36.592A	Other injury of descending [left] colon, initial encounter
S36.593A	Other injury of sigmoid colon, initial encounter
S36.598A	Other injury of other part of colon, initial encounter
S36.599A	Other injury of unspecified part of colon, initial encounter
S36.60XA	Unspecified injury of rectum, initial encounter
S36.61XA	Primary blast injury of rectum, initial encounter
S36.62XA	Contusion of rectum, initial encounter
S36.63XA	Laceration of rectum, initial encounter
S36.69XA	Other injury of rectum, initial encounter
S36.81XA	Injury of peritoneum, initial encounter
S36.892A	Contusion of other intra-abdominal organs, initial encounter
S36.893A	Laceration of other intra-abdominal organs, initial encounter
S36.898A	Other injury of other intra-abdominal organs, initial encounter
S36.899A	Unspecified injury of other intra-abdominal organs, initial encounter
S36.90XA	Unspecified injury of unspecified intra-abdominal organ, initial encounter
S36.92XA	Contusion of unspecified intra-abdominal organ, initial encounter
S36.93XA	Laceration of unspecified intra-abdominal organ, initial encounter
S36.99XA	Other injury of unspecified intra-abdominal organ, initial encounter
S37.001A	Unspecified injury of right kidney, initial encounter
S37.002A	Unspecified injury of left kidney, initial encounter
S37.009A	Unspecified injury of unspecified kidney, initial encounter
S37.011A	Minor contusion of right kidney, initial encounter
S37.012A	Minor contusion of left kidney, initial encounter
S37.019A	Minor contusion of unspecified kidney, initial encounter
S37.021A	Major contusion of right kidney, initial encounter
S37.022A	Major contusion of left kidney, initial encounter
S37.029A	Major contusion of unspecified kidney, initial encounter
S37.031A	Laceration of right kidney, unspecified degree, initial encounter
S37.032A	Laceration of left kidney, unspecified degree, initial encounter

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Code	Description
S37.039A	Laceration of unspecified kidney, unspecified degree, initial encounter
S37.041A	Minor laceration of right kidney, initial encounter
S37.042A	Minor laceration of left kidney, initial encounter
S37.049A	Minor laceration of unspecified kidney, initial encounter
S37.051A	Moderate laceration of right kidney, initial encounter
S37.052A	Moderate laceration of left kidney, initial encounter
S37.059A	Moderate laceration of unspecified kidney, initial encounter
S37.061A	Major laceration of right kidney, initial encounter
S37.062A	Major laceration of left kidney, initial encounter
S37.069A	Major laceration of unspecified kidney, initial encounter
S37.091A	Other injury of right kidney, initial encounter
S37.092A	Other injury of left kidney, initial encounter
S37.099A	Other injury of unspecified kidney, initial encounter
S37.10XA	Unspecified injury of ureter, initial encounter
S37.12XA	Contusion of ureter, initial encounter
S37.13XA	Laceration of ureter, initial encounter
S37.19XA	Other injury of ureter, initial encounter
S37.20XA	Unspecified injury of bladder, initial encounter
S37.22XA	Contusion of bladder, initial encounter
S37.23XA	Laceration of bladder, initial encounter
S37.29XA	Other injury of bladder, initial encounter
S37.30XA	Unspecified injury of urethra, initial encounter
S37.32XA	Contusion of urethra, initial encounter
S37.33XA	Laceration of urethra, initial encounter
S37.39XA	Other injury of urethra, initial encounter
S37.401A	Unspecified injury of ovary, unilateral, initial encounter
S37.402A	Unspecified injury of ovary, bilateral, initial encounter
S37.409A	Unspecified injury of ovary, unspecified, initial encounter
S37.421A	Contusion of ovary, unilateral, initial encounter
S37.422A	Contusion of ovary, bilateral, initial encounter



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Code	Description
S37.429A	Contusion of ovary, unspecified, initial encounter
S37.431A	Laceration of ovary, unilateral, initial encounter
S37.432A	Laceration of ovary, bilateral, initial encounter
S37.439A	Laceration of ovary, unspecified, initial encounter
S37.491A	Other injury of ovary, unilateral, initial encounter
S37.492A	Other injury of ovary, bilateral, initial encounter
S37.499A	Other injury of ovary, unspecified, initial encounter
S37.501A	Unspecified injury of fallopian tube, unilateral, initial encounter
S37.502A	Unspecified injury of fallopian tube, bilateral, initial encounter
S37.509A	Unspecified injury of fallopian tube, unspecified, initial encounter
S37.511A	Primary blast injury of fallopian tube, unilateral, initial encounter
S37.512A	Primary blast injury of fallopian tube, bilateral, initial encounter
S37.519A	Primary blast injury of fallopian tube, unspecified, initial encounter
S37.521A	Contusion of fallopian tube, unilateral, initial encounter
S37.522A	Contusion of fallopian tube, bilateral, initial encounter
S37.529A	Contusion of fallopian tube, unspecified, initial encounter
S37.531A	Laceration of fallopian tube, unilateral, initial encounter
S37.532A	Laceration of fallopian tube, bilateral, initial encounter
S37.539A	Laceration of fallopian tube, unspecified, initial encounter
S37.591A	Other injury of fallopian tube, unilateral, initial encounter
S37.592A	Other injury of fallopian tube, bilateral, initial encounter
S37.599A	Other injury of fallopian tube, unspecified, initial encounter
S37.60XA	Unspecified injury of uterus, initial encounter
S37.62XA	Contusion of uterus, initial encounter
S37.63XA	Laceration of uterus, initial encounter
S37.69XA	Other injury of uterus, initial encounter
S37.812A	Contusion of adrenal gland, initial encounter
S37.813A	Laceration of adrenal gland, initial encounter
S37.818A	Other injury of adrenal gland, initial encounter
S37.819A	Unspecified injury of adrenal gland, initial encounter

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Code	Description
S37.822A	Contusion of prostate, initial encounter
S37.823A	Laceration of prostate, initial encounter
S37.828A	Other injury of prostate, initial encounter
S37.829A	Unspecified injury of prostate, initial encounter
S37.892A	Contusion of other urinary and pelvic organ, initial encounter
S37.893A	Laceration of other urinary and pelvic organ, initial encounter
S37.898A	Other injury of other urinary and pelvic organ, initial encounter
S37.899A	Unspecified injury of other urinary and pelvic organ, initial encounter
S37.90XA	Unspecified injury of unspecified urinary and pelvic organ, initial encounter
S37.92XA	Contusion of unspecified urinary and pelvic organ, initial encounter
S37.93XA	Laceration of unspecified urinary and pelvic organ, initial encounter
S37.99XA	Other injury of unspecified urinary and pelvic organ, initial encounter
S38.001A	Crushing injury of unspecified external genital organs, male, initial encounter
S38.002A	Crushing injury of unspecified external genital organs, female, initial encounter
S38.01XA	Crushing injury of penis, initial encounter
S38.02XA	Crushing injury of scrotum and testis, initial encounter
S38.03XA	Crushing injury of vulva, initial encounter
S38.1XXA	Crushing injury of abdomen, lower back, and pelvis, initial encounter
S40.011A	Contusion of right shoulder, initial encounter
S40.012A	Contusion of left shoulder, initial encounter
S40.019A	Contusion of unspecified shoulder, initial encounter
S40.021A	Contusion of right upper arm, initial encounter
S40.022A	Contusion of left upper arm, initial encounter
S40.029A	Contusion of unspecified upper arm, initial encounter
S42.001A	Fracture of unspecified part of right clavicle, initial encounter for closed fracture
S42.001B	Fracture of unspecified part of right clavicle, initial encounter for open fracture
S42.002A	Fracture of unspecified part of left clavicle, initial encounter for closed fracture
S42.002B	Fracture of unspecified part of left clavicle, initial encounter for open fracture
S42.009A	Fracture of unspecified part of unspecified clavicle, initial encounter for closed fracture
S42.009B	Fracture of unspecified part of unspecified clavicle, initial encounter for open fracture

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Code	Description
S42.011A	Anterior displaced fracture of sternal end of right clavicle, initial encounter for closed fracture
S42.011B	Anterior displaced fracture of sternal end of right clavicle, initial encounter for open fracture
S42.012A	Anterior displaced fracture of sternal end of left clavicle, initial encounter for closed fracture
S42.012B	Anterior displaced fracture of sternal end of left clavicle, initial encounter for open fracture
S42.013A	Anterior displaced fracture of sternal end of unspecified clavicle, initial encounter for closed fracture
S42.013B	Anterior displaced fracture of sternal end of unspecified clavicle, initial encounter for open fracture
S42.014A	Posterior displaced fracture of sternal end of right clavicle, initial encounter for closed fracture
S42.014B	Posterior displaced fracture of sternal end of right clavicle, initial encounter for open fracture
S42.015A	Posterior displaced fracture of sternal end of left clavicle, initial encounter for closed fracture
S42.015B	Posterior displaced fracture of sternal end of left clavicle, initial encounter for open fracture
S42.016A	Posterior displaced fracture of sternal end of unspecified clavicle, initial encounter for closed fracture
S42.016B	Posterior displaced fracture of sternal end of unspecified clavicle, initial encounter for open fracture
S42.017A	Nondisplaced fracture of sternal end of right clavicle, initial encounter for closed fracture
S42.017B	Nondisplaced fracture of sternal end of right clavicle, initial encounter for open fracture
S42.018A	Nondisplaced fracture of sternal end of left clavicle, initial encounter for closed fracture
S42.018B	Nondisplaced fracture of sternal end of left clavicle, initial encounter for open fracture
S42.019A	Nondisplaced fracture of sternal end of unspecified clavicle, initial encounter for closed fracture
S42.019B	Nondisplaced fracture of sternal end of unspecified clavicle, initial encounter for open fracture
S42.021A	Displaced fracture of shaft of right clavicle, initial encounter for closed fracture
S42.021B	Displaced fracture of shaft of right clavicle, initial encounter for open fracture
S42.022A	Displaced fracture of shaft of left clavicle, initial encounter for closed fracture
S42.022B	Displaced fracture of shaft of left clavicle, initial encounter for open fracture
S42.023A	Displaced fracture of shaft of unspecified clavicle, initial encounter for closed fracture
S42.023B	Displaced fracture of shaft of unspecified clavicle, initial encounter for open fracture

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.024A	Nondisplaced fracture of shaft of right clavicle, initial encounter for closed fracture
S42.024B	Nondisplaced fracture of shaft of right clavicle, initial encounter for open fracture
S42.025A	Nondisplaced fracture of shaft of left clavicle, initial encounter for closed fracture
S42.025B	Nondisplaced fracture of shaft of left clavicle, initial encounter for open fracture
S42.026A	Nondisplaced fracture of shaft of unspecified clavicle, initial encounter for closed fracture
S42.026B	Nondisplaced fracture of shaft of unspecified clavicle, initial encounter for open fracture
S42.031A	Displaced fracture of lateral end of right clavicle, initial encounter for closed fracture
S42.031B	Displaced fracture of lateral end of right clavicle, initial encounter for open fracture
S42.032A	Displaced fracture of lateral end of left clavicle, initial encounter for closed fracture
S42.032B	Displaced fracture of lateral end of left clavicle, initial encounter for open fracture
S42.033A	Displaced fracture of lateral end of unspecified clavicle, initial encounter for closed fracture
S42.033B	Displaced fracture of lateral end of unspecified clavicle, initial encounter for open fracture
S42.034A	Nondisplaced fracture of lateral end of right clavicle, initial encounter for closed fracture
S42.034B	Nondisplaced fracture of lateral end of right clavicle, initial encounter for open fracture
S42.035A	Nondisplaced fracture of lateral end of left clavicle, initial encounter for closed fracture
S42.035B	Nondisplaced fracture of lateral end of left clavicle, initial encounter for open fracture
S42.036A	Nondisplaced fracture of lateral end of unspecified clavicle, initial encounter for closed fracture
S42.036B	Nondisplaced fracture of lateral end of unspecified clavicle, initial encounter for open fracture
S42.101A	Fracture of unspecified part of scapula, right shoulder, initial encounter for closed fracture
S42.101B	Fracture of unspecified part of scapula, right shoulder, initial encounter for open fracture
S42.102A	Fracture of unspecified part of scapula, left shoulder, initial encounter for closed fracture
S42.102B	Fracture of unspecified part of scapula, left shoulder, initial encounter for open fracture
S42.109A	Fracture of unspecified part of scapula, unspecified shoulder, initial encounter for closed fracture
S42.109B	Fracture of unspecified part of scapula, unspecified shoulder, initial encounter for open fracture
S42.111A	Displaced fracture of body of scapula, right shoulder, initial encounter for closed fracture
S42.111B	Displaced fracture of body of scapula, right shoulder, initial encounter for open fracture
S42.112A	Displaced fracture of body of scapula, left shoulder, initial encounter for closed fracture
S42.112B	Displaced fracture of body of scapula, left shoulder, initial encounter for open fracture

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Code	Description
S42.113A	Displaced fracture of body of scapula, unspecified shoulder, initial encounter for closed fracture
S42.113B	Displaced fracture of body of scapula, unspecified shoulder, initial encounter for open fracture
S42.114A	Nondisplaced fracture of body of scapula, right shoulder, initial encounter for closed fracture
S42.114B	Nondisplaced fracture of body of scapula, right shoulder, initial encounter for open fracture
S42.115A	Nondisplaced fracture of body of scapula, left shoulder, initial encounter for closed fracture
S42.115B	Nondisplaced fracture of body of scapula, left shoulder, initial encounter for open fracture
S42.116A	Nondisplaced fracture of body of scapula, unspecified shoulder, initial encounter for closed fracture
S42.116B	Nondisplaced fracture of body of scapula, unspecified shoulder, initial encounter for open fracture
S42.121A	Displaced fracture of acromial process, right shoulder, initial encounter for closed fracture
S42.121B	Displaced fracture of acromial process, right shoulder, initial encounter for open fracture
S42.122A	Displaced fracture of acromial process, left shoulder, initial encounter for closed fracture
S42.122B	Displaced fracture of acromial process, left shoulder, initial encounter for open fracture
S42.123A	Displaced fracture of acromial process, unspecified shoulder, initial encounter for closed fracture
S42.123B	Displaced fracture of acromial process, unspecified shoulder, initial encounter for open fracture
S42.124A	Nondisplaced fracture of acromial process, right shoulder, initial encounter for closed fracture
S42.124B	Nondisplaced fracture of acromial process, right shoulder, initial encounter for open fracture
S42.125A	Nondisplaced fracture of acromial process, left shoulder, initial encounter for closed fracture
S42.125B	Nondisplaced fracture of acromial process, left shoulder, initial encounter for open fracture
S42.126A	Nondisplaced fracture of acromial process, unspecified shoulder, initial encounter for closed fracture
S42.126B	Nondisplaced fracture of acromial process, unspecified shoulder, initial encounter for open fracture
S42.131A	Displaced fracture of coracoid process, right shoulder, initial encounter for closed fracture
S42.131B	Displaced fracture of coracoid process, right shoulder, initial encounter for open fracture

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Code	Description
S42.132A	Displaced fracture of coracoid process, left shoulder, initial encounter for closed fracture
S42.132B	Displaced fracture of coracoid process, left shoulder, initial encounter for open fracture
S42.133A	Displaced fracture of coracoid process, unspecified shoulder, initial encounter for closed fracture
S42.133B	Displaced fracture of coracoid process, unspecified shoulder, initial encounter for open fracture
S42.134A	Nondisplaced fracture of coracoid process, right shoulder, initial encounter for closed fracture
S42.134B	Nondisplaced fracture of coracoid process, right shoulder, initial encounter for open fracture
S42.135A	Nondisplaced fracture of coracoid process, left shoulder, initial encounter for closed fracture
S42.135B	Nondisplaced fracture of coracoid process, left shoulder, initial encounter for open fracture
S42.136A	Nondisplaced fracture of coracoid process, unspecified shoulder, initial encounter for closed fracture
S42.136B	Nondisplaced fracture of coracoid process, unspecified shoulder, initial encounter for open fracture
S42.141A	Displaced fracture of glenoid cavity of scapula, right shoulder, initial encounter for closed fracture
S42.141B	Displaced fracture of glenoid cavity of scapula, right shoulder, initial encounter for open fracture
S42.142A	Displaced fracture of glenoid cavity of scapula, left shoulder, initial encounter for closed fracture
S42.142B	Displaced fracture of glenoid cavity of scapula, left shoulder, initial encounter for open fracture
S42.143A	Displaced fracture of glenoid cavity of scapula, unspecified shoulder, initial encounter for closed fracture
S42.143B	Displaced fracture of glenoid cavity of scapula, unspecified shoulder, initial encounter for open fracture
S42.144A	Nondisplaced fracture of glenoid cavity of scapula, right shoulder, initial encounter for closed fracture
S42.144B	Nondisplaced fracture of glenoid cavity of scapula, right shoulder, initial encounter for open fracture
S42.145A	Nondisplaced fracture of glenoid cavity of scapula, left shoulder, initial encounter for closed fracture



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Code	Description
S42.145B	Nondisplaced fracture of glenoid cavity of scapula, left shoulder, initial encounter for open fracture
S42.146A	Nondisplaced fracture of glenoid cavity of scapula, unspecified shoulder, initial encounter for closed fracture
S42.146B	Nondisplaced fracture of glenoid cavity of scapula, unspecified shoulder, initial encounter for open fracture
S42.151A	Displaced fracture of neck of scapula, right shoulder, initial encounter for closed fracture
S42.151B	Displaced fracture of neck of scapula, right shoulder, initial encounter for open fracture
S42.152A	Displaced fracture of neck of scapula, left shoulder, initial encounter for closed fracture
S42.152B	Displaced fracture of neck of scapula, left shoulder, initial encounter for open fracture
S42.153A	Displaced fracture of neck of scapula, unspecified shoulder, initial encounter for closed fracture
S42.153B	Displaced fracture of neck of scapula, unspecified shoulder, initial encounter for open fracture
S42.154A	Nondisplaced fracture of neck of scapula, right shoulder, initial encounter for closed fracture
S42.154B	Nondisplaced fracture of neck of scapula, right shoulder, initial encounter for open fracture
S42.155A	Nondisplaced fracture of neck of scapula, left shoulder, initial encounter for closed fracture
S42.155B	Nondisplaced fracture of neck of scapula, left shoulder, initial encounter for open fracture
S42.156A	Nondisplaced fracture of neck of scapula, unspecified shoulder, initial encounter for closed fracture
S42.156B	Nondisplaced fracture of neck of scapula, unspecified shoulder, initial encounter for open fracture
S42.191A	Fracture of other part of scapula, right shoulder, initial encounter for closed fracture
S42.191B	Fracture of other part of scapula, right shoulder, initial encounter for open fracture
S42.192A	Fracture of other part of scapula, left shoulder, initial encounter for closed fracture
S42.192B	Fracture of other part of scapula, left shoulder, initial encounter for open fracture
S42.199A	Fracture of other part of scapula, unspecified shoulder, initial encounter for closed fracture
S42.199B	Fracture of other part of scapula, unspecified shoulder, initial encounter for open fracture
S42.201A	Unspecified fracture of upper end of right humerus, initial encounter for closed fracture
S42.201B	Unspecified fracture of upper end of right humerus, initial encounter for open fracture
S42.202A	Unspecified fracture of upper end of left humerus, initial encounter for closed fracture
S42.202B	Unspecified fracture of upper end of left humerus, initial encounter for open fracture

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Code	Description
S42.209A	Unspecified fracture of upper end of unspecified humerus, initial encounter for closed fracture
S42.209B	Unspecified fracture of upper end of unspecified humerus, initial encounter for open fracture
S42.211A	Unspecified displaced fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.211B	Unspecified displaced fracture of surgical neck of right humerus, initial encounter for open fracture
S42.212A	Unspecified displaced fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.212B	Unspecified displaced fracture of surgical neck of left humerus, initial encounter for open fracture
S42.213A	Unspecified displaced fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.213B	Unspecified displaced fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.214A	Unspecified nondisplaced fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.214B	Unspecified nondisplaced fracture of surgical neck of right humerus, initial encounter for open fracture
S42.215A	Unspecified nondisplaced fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.215B	Unspecified nondisplaced fracture of surgical neck of left humerus, initial encounter for open fracture
S42.216A	Unspecified nondisplaced fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.216B	Unspecified nondisplaced fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.221A	2-part displaced fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.221B	2-part displaced fracture of surgical neck of right humerus, initial encounter for open fracture
S42.222A	2-part displaced fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.222B	2-part displaced fracture of surgical neck of left humerus, initial encounter for open fracture



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Code	Description
S42.223A	2-part displaced fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.223B	2-part displaced fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.224A	2-part nondisplaced fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.224B	2-part nondisplaced fracture of surgical neck of right humerus, initial encounter for open fracture
S42.225A	2-part nondisplaced fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.225B	2-part nondisplaced fracture of surgical neck of left humerus, initial encounter for open fracture
S42.226A	2-part nondisplaced fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.226B	2-part nondisplaced fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.231A	3-part fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.231B	3-part fracture of surgical neck of right humerus, initial encounter for open fracture
S42.232A	3-part fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.232B	3-part fracture of surgical neck of left humerus, initial encounter for open fracture
S42.239A	3-part fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.239B	3-part fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.241A	4-part fracture of surgical neck of right humerus, initial encounter for closed fracture
S42.241B	4-part fracture of surgical neck of right humerus, initial encounter for open fracture
S42.242A	4-part fracture of surgical neck of left humerus, initial encounter for closed fracture
S42.242B	4-part fracture of surgical neck of left humerus, initial encounter for open fracture
S42.249A	4-part fracture of surgical neck of unspecified humerus, initial encounter for closed fracture
S42.249B	4-part fracture of surgical neck of unspecified humerus, initial encounter for open fracture
S42.251A	Displaced fracture of greater tuberosity of right humerus, initial encounter for closed fracture
S42.251B	Displaced fracture of greater tuberosity of right humerus, initial encounter for open fracture
S42.252A	Displaced fracture of greater tuberosity of left humerus, initial encounter for closed fracture
S42.252B	Displaced fracture of greater tuberosity of left humerus, initial encounter for open fracture



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Code	Description
S42.253A	Displaced fracture of greater tuberosity of unspecified humerus, initial encounter for closed fracture
S42.253B	Displaced fracture of greater tuberosity of unspecified humerus, initial encounter for open fracture
S42.254A	Nondisplaced fracture of greater tuberosity of right humerus, initial encounter for closed fracture
S42.254B	Nondisplaced fracture of greater tuberosity of right humerus, initial encounter for open fracture
S42.255A	Nondisplaced fracture of greater tuberosity of left humerus, initial encounter for closed fracture
S42.255B	Nondisplaced fracture of greater tuberosity of left humerus, initial encounter for open fracture
S42.256A	Nondisplaced fracture of greater tuberosity of unspecified humerus, initial encounter for closed fracture
S42.256B	Nondisplaced fracture of greater tuberosity of unspecified humerus, initial encounter for open fracture
S42.261A	Displaced fracture of lesser tuberosity of right humerus, initial encounter for closed fracture
S42.261B	Displaced fracture of lesser tuberosity of right humerus, initial encounter for open fracture
S42.262A	Displaced fracture of lesser tuberosity of left humerus, initial encounter for closed fracture
S42.262B	Displaced fracture of lesser tuberosity of left humerus, initial encounter for open fracture
S42.263A	Displaced fracture of lesser tuberosity of unspecified humerus, initial encounter for closed fracture
S42.263B	Displaced fracture of lesser tuberosity of unspecified humerus, initial encounter for open fracture
S42.264A	Nondisplaced fracture of lesser tuberosity of right humerus, initial encounter for closed fracture
S42.264B	Nondisplaced fracture of lesser tuberosity of right humerus, initial encounter for open fracture
S42.265A	Nondisplaced fracture of lesser tuberosity of left humerus, initial encounter for closed fracture
S42.265B	Nondisplaced fracture of lesser tuberosity of left humerus, initial encounter for open fracture
S42.266A	Nondisplaced fracture of lesser tuberosity of unspecified humerus, initial encounter for closed fracture
S42.266B	Nondisplaced fracture of lesser tuberosity of unspecified humerus, initial encounter for open fracture

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Code	Description
S42.271A	Torus fracture of upper end of right humerus, initial encounter for closed fracture
S42.272A	Torus fracture of upper end of left humerus, initial encounter for closed fracture
S42.279A	Torus fracture of upper end of unspecified humerus, initial encounter for closed fracture
S42.291A	Other displaced fracture of upper end of right humerus, initial encounter for closed fracture
S42.291B	Other displaced fracture of upper end of right humerus, initial encounter for open fracture
S42.292A	Other displaced fracture of upper end of left humerus, initial encounter for closed fracture
S42.292B	Other displaced fracture of upper end of left humerus, initial encounter for open fracture
S42.293A	Other displaced fracture of upper end of unspecified humerus, initial encounter for closed fracture
S42.293B	Other displaced fracture of upper end of unspecified humerus, initial encounter for open fracture
S42.294A	Other nondisplaced fracture of upper end of right humerus, initial encounter for closed fracture
S42.294B	Other nondisplaced fracture of upper end of right humerus, initial encounter for open fracture
S42.295A	Other nondisplaced fracture of upper end of left humerus, initial encounter for closed fracture
S42.295B	Other nondisplaced fracture of upper end of left humerus, initial encounter for open fracture
S42.296A	Other nondisplaced fracture of upper end of unspecified humerus, initial encounter for closed fracture
S42.296B	Other nondisplaced fracture of upper end of unspecified humerus, initial encounter for open fracture
S42.301A	Unspecified fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.301B	Unspecified fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.302A	Unspecified fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.302B	Unspecified fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.309A	Unspecified fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.309B	Unspecified fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.311A	Greenstick fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.312A	Greenstick fracture of shaft of humerus, left arm, initial encounter for closed fracture



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Code	Description
S42.319A	Greenstick fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.321A	Displaced transverse fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.321B	Displaced transverse fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.322A	Displaced transverse fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.322B	Displaced transverse fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.323A	Displaced transverse fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.323B	Displaced transverse fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.324A	Nondisplaced transverse fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.324B	Nondisplaced transverse fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.325A	Nondisplaced transverse fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.325B	Nondisplaced transverse fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.326A	Nondisplaced transverse fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.326B	Nondisplaced transverse fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.331A	Displaced oblique fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.331B	Displaced oblique fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.332A	Displaced oblique fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.332B	Displaced oblique fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.333A	Displaced oblique fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.333B	Displaced oblique fracture of shaft of humerus, unspecified arm, initial encounter for open fracture



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Code	Description
S42.334A	Nondisplaced oblique fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.334B	Nondisplaced oblique fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.335A	Nondisplaced oblique fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.335B	Nondisplaced oblique fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.336A	Nondisplaced oblique fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.336B	Nondisplaced oblique fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.341A	Displaced spiral fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.341B	Displaced spiral fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.342A	Displaced spiral fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.342B	Displaced spiral fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.343A	Displaced spiral fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.343B	Displaced spiral fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.344A	Nondisplaced spiral fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.344B	Nondisplaced spiral fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.345A	Nondisplaced spiral fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.345B	Nondisplaced spiral fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.346A	Nondisplaced spiral fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.346B	Nondisplaced spiral fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.351A	Displaced comminuted fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.351B	Displaced comminuted fracture of shaft of humerus, right arm, initial encounter for open fracture

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Code	Description
S42.352A	Displaced comminuted fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.352B	Displaced comminuted fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.353A	Displaced comminuted fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.353B	Displaced comminuted fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.354A	Nondisplaced comminuted fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.354B	Nondisplaced comminuted fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.355A	Nondisplaced comminuted fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.355B	Nondisplaced comminuted fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.356A	Nondisplaced comminuted fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.356B	Nondisplaced comminuted fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.361A	Displaced segmental fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.361B	Displaced segmental fracture of shaft of humerus, right arm, initial encounter for open fracture
S42.362A	Displaced segmental fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.362B	Displaced segmental fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.363A	Displaced segmental fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.363B	Displaced segmental fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.364A	Nondisplaced segmental fracture of shaft of humerus, right arm, initial encounter for closed fracture
S42.364B	Nondisplaced segmental fracture of shaft of humerus, right arm, initial encounter for open fracture



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Code	Description
S42.365A	Nondisplaced segmental fracture of shaft of humerus, left arm, initial encounter for closed fracture
S42.365B	Nondisplaced segmental fracture of shaft of humerus, left arm, initial encounter for open fracture
S42.366A	Nondisplaced segmental fracture of shaft of humerus, unspecified arm, initial encounter for closed fracture
S42.366B	Nondisplaced segmental fracture of shaft of humerus, unspecified arm, initial encounter for open fracture
S42.391A	Other fracture of shaft of right humerus, initial encounter for closed fracture
S42.391B	Other fracture of shaft of right humerus, initial encounter for open fracture
S42.392A	Other fracture of shaft of left humerus, initial encounter for closed fracture
S42.392B	Other fracture of shaft of left humerus, initial encounter for open fracture
S42.399A	Other fracture of shaft of unspecified humerus, initial encounter for closed fracture
S42.399B	Other fracture of shaft of unspecified humerus, initial encounter for open fracture
S42.401A	Unspecified fracture of lower end of right humerus, initial encounter for closed fracture
S42.401B	Unspecified fracture of lower end of right humerus, initial encounter for open fracture
S42.402A	Unspecified fracture of lower end of left humerus, initial encounter for closed fracture
S42.402B	Unspecified fracture of lower end of left humerus, initial encounter for open fracture
S42.409A	Unspecified fracture of lower end of unspecified humerus, initial encounter for closed fracture
S42.409B	Unspecified fracture of lower end of unspecified humerus, initial encounter for open fracture
S42.411A	Displaced simple supracondylar fracture without intercondylar fracture of right humerus, initial encounter for closed fracture
S42.411B	Displaced simple supracondylar fracture without intercondylar fracture of right humerus, initial encounter for open fracture
S42.412A	Displaced simple supracondylar fracture without intercondylar fracture of left humerus, initial encounter for closed fracture
S42.412B	Displaced simple supracondylar fracture without intercondylar fracture of left humerus, initial encounter for open fracture
S42.413A	Displaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.413B	Displaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for open fracture



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Code	Description
S42.414A	Nondisplaced simple supracondylar fracture without intercondylar fracture of right humerus, initial encounter for closed fracture
S42.414B	Nondisplaced simple supracondylar fracture without intercondylar fracture of right humerus, initial encounter for open fracture
S42.415A	Nondisplaced simple supracondylar fracture without intercondylar fracture of left humerus, initial encounter for closed fracture
S42.415B	Nondisplaced simple supracondylar fracture without intercondylar fracture of left humerus, initial encounter for open fracture
S42.416A	Nondisplaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.416B	Nondisplaced simple supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for open fracture
S42.421A	Displaced comminuted supracondylar fracture without intercondylar fracture of right humerus, initial encounter for closed fracture
S42.421B	Displaced comminuted supracondylar fracture without intercondylar fracture of right humerus, initial encounter for open fracture
S42.422A	Displaced comminuted supracondylar fracture without intercondylar fracture of left humerus, initial encounter for closed fracture
S42.422B	Displaced comminuted supracondylar fracture without intercondylar fracture of left humerus, initial encounter for open fracture
S42.423A	Displaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.423B	Displaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for open fracture
S42.424A	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of right humerus, initial encounter for closed fracture
S42.424B	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of right humerus, initial encounter for open fracture
S42.425A	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of left humerus, initial encounter for closed fracture
S42.425B	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of left humerus, initial encounter for open fracture
S42.426A	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.426B	Nondisplaced comminuted supracondylar fracture without intercondylar fracture of unspecified humerus, initial encounter for open fracture

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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.431A	Displaced fracture (avulsion) of lateral epicondyle of right humerus, initial encounter for closed fracture
S42.431B	Displaced fracture (avulsion) of lateral epicondyle of right humerus, initial encounter for open fracture
S42.432A	Displaced fracture (avulsion) of lateral epicondyle of left humerus, initial encounter for closed fracture
S42.432B	Displaced fracture (avulsion) of lateral epicondyle of left humerus, initial encounter for open fracture
S42.433A	Displaced fracture (avulsion) of lateral epicondyle of unspecified humerus, initial encounter for closed fracture
S42.433B	Displaced fracture (avulsion) of lateral epicondyle of unspecified humerus, initial encounter for open fracture
S42.434A	Nondisplaced fracture (avulsion) of lateral epicondyle of right humerus, initial encounter for closed fracture
S42.434B	Nondisplaced fracture (avulsion) of lateral epicondyle of right humerus, initial encounter for open fracture
S42.435A	Nondisplaced fracture (avulsion) of lateral epicondyle of left humerus, initial encounter for closed fracture
S42.435B	Nondisplaced fracture (avulsion) of lateral epicondyle of left humerus, initial encounter for open fracture
S42.436A	Nondisplaced fracture (avulsion) of lateral epicondyle of unspecified humerus, initial encounter for closed fracture
S42.436B	Nondisplaced fracture (avulsion) of lateral epicondyle of unspecified humerus, initial encounter for open fracture
S42.441A	Displaced fracture (avulsion) of medial epicondyle of right humerus, initial encounter for closed fracture
S42.441B	Displaced fracture (avulsion) of medial epicondyle of right humerus, initial encounter for open fracture
S42.442A	Displaced fracture (avulsion) of medial epicondyle of left humerus, initial encounter for closed fracture
S42.442B	Displaced fracture (avulsion) of medial epicondyle of left humerus, initial encounter for open fracture
S42.443A	Displaced fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for closed fracture
S42.443B	Displaced fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for open fracture



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Code	Description
S42.444A	Nondisplaced fracture (avulsion) of medial epicondyle of right humerus, initial encounter for closed fracture
S42.444B	Nondisplaced fracture (avulsion) of medial epicondyle of right humerus, initial encounter for open fracture
S42.445A	Nondisplaced fracture (avulsion) of medial epicondyle of left humerus, initial encounter for closed fracture
S42.445B	Nondisplaced fracture (avulsion) of medial epicondyle of left humerus, initial encounter for open fracture
S42.446A	Nondisplaced fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for closed fracture
S42.446B	Nondisplaced fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for open fracture
S42.447A	Incarcerated fracture (avulsion) of medial epicondyle of right humerus, initial encounter for closed fracture
S42.447B	Incarcerated fracture (avulsion) of medial epicondyle of right humerus, initial encounter for open fracture
S42.448A	Incarcerated fracture (avulsion) of medial epicondyle of left humerus, initial encounter for closed fracture
S42.448B	Incarcerated fracture (avulsion) of medial epicondyle of left humerus, initial encounter for open fracture
S42.449A	Incarcerated fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for closed fracture
S42.449B	Incarcerated fracture (avulsion) of medial epicondyle of unspecified humerus, initial encounter for open fracture
S42.451A	Displaced fracture of lateral condyle of right humerus, initial encounter for closed fracture
S42.451B	Displaced fracture of lateral condyle of right humerus, initial encounter for open fracture
S42.452A	Displaced fracture of lateral condyle of left humerus, initial encounter for closed fracture
S42.452B	Displaced fracture of lateral condyle of left humerus, initial encounter for open fracture
S42.453A	Displaced fracture of lateral condyle of unspecified humerus, initial encounter for closed fracture
S42.453B	Displaced fracture of lateral condyle of unspecified humerus, initial encounter for open fracture
S42.454A	Nondisplaced fracture of lateral condyle of right humerus, initial encounter for closed fracture
S42.454B	Nondisplaced fracture of lateral condyle of right humerus, initial encounter for open fracture

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.455A	Nondisplaced fracture of lateral condyle of left humerus, initial encounter for closed fracture
S42.455B	Nondisplaced fracture of lateral condyle of left humerus, initial encounter for open fracture
S42.456A	Nondisplaced fracture of lateral condyle of unspecified humerus, initial encounter for closed fracture
S42.456B	Nondisplaced fracture of lateral condyle of unspecified humerus, initial encounter for open fracture
S42.461A	Displaced fracture of medial condyle of right humerus, initial encounter for closed fracture
S42.461B	Displaced fracture of medial condyle of right humerus, initial encounter for open fracture
S42.462A	Displaced fracture of medial condyle of left humerus, initial encounter for closed fracture
S42.462B	Displaced fracture of medial condyle of left humerus, initial encounter for open fracture
S42.463A	Displaced fracture of medial condyle of unspecified humerus, initial encounter for closed fracture
S42.463B	Displaced fracture of medial condyle of unspecified humerus, initial encounter for open fracture
S42.464A	Nondisplaced fracture of medial condyle of right humerus, initial encounter for closed fracture
S42.464B	Nondisplaced fracture of medial condyle of right humerus, initial encounter for open fracture
S42.465A	Nondisplaced fracture of medial condyle of left humerus, initial encounter for closed fracture
S42.465B	Nondisplaced fracture of medial condyle of left humerus, initial encounter for open fracture
S42.466A	Nondisplaced fracture of medial condyle of unspecified humerus, initial encounter for closed fracture
S42.466B	Nondisplaced fracture of medial condyle of unspecified humerus, initial encounter for open fracture
S42.471A	Displaced transcondylar fracture of right humerus, initial encounter for closed fracture
S42.471B	Displaced transcondylar fracture of right humerus, initial encounter for open fracture
S42.472A	Displaced transcondylar fracture of left humerus, initial encounter for closed fracture
S42.472B	Displaced transcondylar fracture of left humerus, initial encounter for open fracture
S42.473A	Displaced transcondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.473B	Displaced transcondylar fracture of unspecified humerus, initial encounter for open fracture
S42.474A	Nondisplaced transcondylar fracture of right humerus, initial encounter for closed fracture



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Code	Description
S42.474B	Nondisplaced transcondylar fracture of right humerus, initial encounter for open fracture
S42.475A	Nondisplaced transcondylar fracture of left humerus, initial encounter for closed fracture
S42.475B	Nondisplaced transcondylar fracture of left humerus, initial encounter for open fracture
S42.476A	Nondisplaced transcondylar fracture of unspecified humerus, initial encounter for closed fracture
S42.476B	Nondisplaced transcondylar fracture of unspecified humerus, initial encounter for open fracture
S42.481A	Torus fracture of lower end of right humerus, initial encounter for closed fracture
S42.482A	Torus fracture of lower end of left humerus, initial encounter for closed fracture
S42.489A	Torus fracture of lower end of unspecified humerus, initial encounter for closed fracture
S42.491A	Other displaced fracture of lower end of right humerus, initial encounter for closed fracture
S42.491B	Other displaced fracture of lower end of right humerus, initial encounter for open fracture
S42.492A	Other displaced fracture of lower end of left humerus, initial encounter for closed fracture
S42.492B	Other displaced fracture of lower end of left humerus, initial encounter for open fracture
S42.493A	Other displaced fracture of lower end of unspecified humerus, initial encounter for closed fracture
S42.493B	Other displaced fracture of lower end of unspecified humerus, initial encounter for open fracture
S42.494A	Other nondisplaced fracture of lower end of right humerus, initial encounter for closed fracture
S42.494B	Other nondisplaced fracture of lower end of right humerus, initial encounter for open fracture
S42.495A	Other nondisplaced fracture of lower end of left humerus, initial encounter for closed fracture
S42.495B	Other nondisplaced fracture of lower end of left humerus, initial encounter for open fracture
S42.496A	Other nondisplaced fracture of lower end of unspecified humerus, initial encounter for closed fracture
S42.496B	Other nondisplaced fracture of lower end of unspecified humerus, initial encounter for open fracture
S42.90XA	Fracture of unspecified shoulder girdle, part unspecified, initial encounter for closed fracture
S42.90XB	Fracture of unspecified shoulder girdle, part unspecified, initial encounter for open fracture
S42.91XA	Fracture of right shoulder girdle, part unspecified, initial encounter for closed fracture
S42.91XB	Fracture of right shoulder girdle, part unspecified, initial encounter for open fracture

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S42.92XA	Fracture of left shoulder girdle, part unspecified, initial encounter for closed fracture
S42.92XB	Fracture of left shoulder girdle, part unspecified, initial encounter for open fracture
S45.001A	Unspecified injury of axillary artery, right side, initial encounter
S45.002A	Unspecified injury of axillary artery, left side, initial encounter
S45.009A	Unspecified injury of axillary artery, unspecified side, initial encounter
S45.011A	Laceration of axillary artery, right side, initial encounter
S45.012A	Laceration of axillary artery, left side, initial encounter
S45.019A	Laceration of axillary artery, unspecified side, initial encounter
S45.091A	Other specified injury of axillary artery, right side, initial encounter
S45.092A	Other specified injury of axillary artery, left side, initial encounter
S45.099A	Other specified injury of axillary artery, unspecified side, initial encounter
S45.101A	Unspecified injury of brachial artery, right side, initial encounter
S45.102A	Unspecified injury of brachial artery, left side, initial encounter
S45.109A	Unspecified injury of brachial artery, unspecified side, initial encounter
S45.111A	Laceration of brachial artery, right side, initial encounter
S45.112A	Laceration of brachial artery, left side, initial encounter
S45.119A	Laceration of brachial artery, unspecified side, initial encounter
S45.191A	Other specified injury of brachial artery, right side, initial encounter
S45.192A	Other specified injury of brachial artery, left side, initial encounter
S45.199A	Other specified injury of brachial artery, unspecified side, initial encounter
S45.201A	Unspecified injury of axillary or brachial vein, right side, initial encounter
S45.202A	Unspecified injury of axillary or brachial vein, left side, initial encounter
S45.209A	Unspecified injury of axillary or brachial vein, unspecified side, initial encounter
S45.211A	Laceration of axillary or brachial vein, right side, initial encounter
S45.212A	Laceration of axillary or brachial vein, left side, initial encounter
S45.219A	Laceration of axillary or brachial vein, unspecified side, initial encounter
S45.291A	Other specified injury of axillary or brachial vein, right side, initial encounter
S45.292A	Other specified injury of axillary or brachial vein, left side, initial encounter
S45.299A	Other specified injury of axillary or brachial vein, unspecified side, initial encounter
S45.301A	Unspecified injury of superficial vein at shoulder and upper arm level, right arm, initial encounter

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Code	Description
S45.302A	Unspecified injury of superficial vein at shoulder and upper arm level, left arm, initial encounter
S45.309A	Unspecified injury of superficial vein at shoulder and upper arm level, unspecified arm, initial encounter
S45.311A	Laceration of superficial vein at shoulder and upper arm level, right arm, initial encounter
S45.312A	Laceration of superficial vein at shoulder and upper arm level, left arm, initial encounter
S45.319A	Laceration of superficial vein at shoulder and upper arm level, unspecified arm, initial encounter
S45.391A	Other specified injury of superficial vein at shoulder and upper arm level, right arm, initial encounter
S45.392A	Other specified injury of superficial vein at shoulder and upper arm level, left arm, initial encounter
S45.399A	Other specified injury of superficial vein at shoulder and upper arm level, unspecified arm, initial encounter
S45.801A	Unspecified injury of other specified blood vessels at shoulder and upper arm level, right arm, initial encounter
S45.802A	Unspecified injury of other specified blood vessels at shoulder and upper arm level, left arm, initial encounter
S45.809A	Unspecified injury of other specified blood vessels at shoulder and upper arm level, unspecified arm, initial encounter
S45.811A	Laceration of other specified blood vessels at shoulder and upper arm level, right arm, initial encounter
S45.812A	Laceration of other specified blood vessels at shoulder and upper arm level, left arm, initial encounter
S45.819A	Laceration of other specified blood vessels at shoulder and upper arm level, unspecified arm, initial encounter
S45.891A	Other specified injury of other specified blood vessels at shoulder and upper arm level, right arm, initial encounter
S45.892A	Other specified injury of other specified blood vessels at shoulder and upper arm level, left arm, initial encounter
S45.899A	Other specified injury of other specified blood vessels at shoulder and upper arm level, unspecified arm, initial encounter
S45.901A	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, right arm, initial encounter
S45.902A	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, left arm, initial encounter



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Code	Description
S45.909A	Unspecified injury of unspecified blood vessel at shoulder and upper arm level, unspecified arm, initial encounter
S45.911A	Laceration of unspecified blood vessel at shoulder and upper arm level, right arm, initial encounter
S45.912A	Laceration of unspecified blood vessel at shoulder and upper arm level, left arm, initial encounter
S45.919A	Laceration of unspecified blood vessel at shoulder and upper arm level, unspecified arm, initial encounter
S45.991A	Other specified injury of unspecified blood vessel at shoulder and upper arm level, right arm, initial encounter
S45.992A	Other specified injury of unspecified blood vessel at shoulder and upper arm level, left arm, initial encounter
S45.999A	Other specified injury of unspecified blood vessel at shoulder and upper arm level, unspecified arm, initial encounter
S47.1XXA	Crushing injury of right shoulder and upper arm, initial encounter
S47.2XXA	Crushing injury of left shoulder and upper arm, initial encounter
S47.9XXA	Crushing injury of shoulder and upper arm, unspecified arm, initial encounter
S49.001A	Unspecified physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.002A	Unspecified physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.009A	Unspecified physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.011A	Salter-Harris Type I physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.012A	Salter-Harris Type I physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.019A	Salter-Harris Type I physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.021A	Salter-Harris Type II physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.022A	Salter-Harris Type II physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.029A	Salter-Harris Type II physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture



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Code	Description
S49.031A	Salter-Harris Type III physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.032A	Salter-Harris Type III physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.039A	Salter-Harris Type III physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.041A	Salter-Harris Type IV physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.042A	Salter-Harris Type IV physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.049A	Salter-Harris Type IV physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.091A	Other physeal fracture of upper end of humerus, right arm, initial encounter for closed fracture
S49.092A	Other physeal fracture of upper end of humerus, left arm, initial encounter for closed fracture
S49.099A	Other physeal fracture of upper end of humerus, unspecified arm, initial encounter for closed fracture
S49.101A	Unspecified physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.102A	Unspecified physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.109A	Unspecified physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.111A	Salter-Harris Type I physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.112A	Salter-Harris Type I physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.119A	Salter-Harris Type I physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.121A	Salter-Harris Type II physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.122A	Salter-Harris Type II physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.129A	Salter-Harris Type II physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture



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Code	Description
S49.131A	Salter-Harris Type III physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.132A	Salter-Harris Type III physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.139A	Salter-Harris Type III physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.141A	Salter-Harris Type IV physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.142A	Salter-Harris Type IV physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.149A	Salter-Harris Type IV physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S49.191A	Other physeal fracture of lower end of humerus, right arm, initial encounter for closed fracture
S49.192A	Other physeal fracture of lower end of humerus, left arm, initial encounter for closed fracture
S49.199A	Other physeal fracture of lower end of humerus, unspecified arm, initial encounter for closed fracture
S50.00XA	Contusion of unspecified elbow, initial encounter
S50.01XA	Contusion of right elbow, initial encounter
S50.02XA	Contusion of left elbow, initial encounter
S50.10XA	Contusion of unspecified forearm, initial encounter
S50.11XA	Contusion of right forearm, initial encounter
S50.12XA	Contusion of left forearm, initial encounter
S52.001B	Unspecified fracture of upper end of right ulna, initial encounter for open fracture type I or II
S52.001C	Unspecified fracture of upper end of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.002B	Unspecified fracture of upper end of left ulna, initial encounter for open fracture type I or II
S52.002C	Unspecified fracture of upper end of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.009B	Unspecified fracture of upper end of unspecified ulna, initial encounter for open fracture type I or II
S52.009C	Unspecified fracture of upper end of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.021B	Displaced fracture of olecranon process without intraarticular extension of right ulna, initial encounter for open fracture type I or II
S52.021C	Displaced fracture of olecranon process without intraarticular extension of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.022B	Displaced fracture of olecranon process without intraarticular extension of left ulna, initial encounter for open fracture type I or II
S52.022C	Displaced fracture of olecranon process without intraarticular extension of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.023B	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, initial encounter for open fracture type I or II
S52.023C	Displaced fracture of olecranon process without intraarticular extension of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.024B	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, initial encounter for open fracture type I or II
S52.024C	Nondisplaced fracture of olecranon process without intraarticular extension of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.025B	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, initial encounter for open fracture type I or II
S52.025C	Nondisplaced fracture of olecranon process without intraarticular extension of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.026B	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, initial encounter for open fracture type I or II
S52.026C	Nondisplaced fracture of olecranon process without intraarticular extension of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.031B	Displaced fracture of olecranon process with intraarticular extension of right ulna, initial encounter for open fracture type I or II
S52.031C	Displaced fracture of olecranon process with intraarticular extension of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.032B	Displaced fracture of olecranon process with intraarticular extension of left ulna, initial encounter for open fracture type I or II
S52.032C	Displaced fracture of olecranon process with intraarticular extension of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.033B	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, initial encounter for open fracture type I or II
S52.033C	Displaced fracture of olecranon process with intraarticular extension of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
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Code	Description
S52.034B	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, initial encounter for open fracture type I or II
S52.034C	Nondisplaced fracture of olecranon process with intraarticular extension of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.035B	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, initial encounter for open fracture type I or II
S52.035C	Nondisplaced fracture of olecranon process with intraarticular extension of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.036B	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, initial encounter for open fracture type I or II
S52.036C	Nondisplaced fracture of olecranon process with intraarticular extension of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.041B	Displaced fracture of coronoid process of right ulna, initial encounter for open fracture type I or II
S52.041C	Displaced fracture of coronoid process of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.042B	Displaced fracture of coronoid process of left ulna, initial encounter for open fracture type I or II
S52.042C	Displaced fracture of coronoid process of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.043B	Displaced fracture of coronoid process of unspecified ulna, initial encounter for open fracture type I or II
S52.043C	Displaced fracture of coronoid process of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.044B	Nondisplaced fracture of coronoid process of right ulna, initial encounter for open fracture type I or II
S52.044C	Nondisplaced fracture of coronoid process of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.045B	Nondisplaced fracture of coronoid process of left ulna, initial encounter for open fracture type I or II
S52.045C	Nondisplaced fracture of coronoid process of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.046B	Nondisplaced fracture of coronoid process of unspecified ulna, initial encounter for open fracture type I or II
S52.046C	Nondisplaced fracture of coronoid process of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.091B	Other fracture of upper end of right ulna, initial encounter for open fracture type I or II
S52.091C	Other fracture of upper end of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.092B	Other fracture of upper end of left ulna, initial encounter for open fracture type I or II
S52.092C	Other fracture of upper end of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.099B	Other fracture of upper end of unspecified ulna, initial encounter for open fracture type I or II
S52.099C	Other fracture of upper end of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.101B	Unspecified fracture of upper end of right radius, initial encounter for open fracture type I or II
S52.101C	Unspecified fracture of upper end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.102B	Unspecified fracture of upper end of left radius, initial encounter for open fracture type I or II
S52.102C	Unspecified fracture of upper end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.109B	Unspecified fracture of upper end of unspecified radius, initial encounter for open fracture type I or II
S52.109C	Unspecified fracture of upper end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.121B	Displaced fracture of head of right radius, initial encounter for open fracture type I or II
S52.121C	Displaced fracture of head of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.122B	Displaced fracture of head of left radius, initial encounter for open fracture type I or II
S52.122C	Displaced fracture of head of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.123B	Displaced fracture of head of unspecified radius, initial encounter for open fracture type I or II
S52.123C	Displaced fracture of head of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.124B	Nondisplaced fracture of head of right radius, initial encounter for open fracture type I or II
S52.124C	Nondisplaced fracture of head of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.125B	Nondisplaced fracture of head of left radius, initial encounter for open fracture type I or II
S52.125C	Nondisplaced fracture of head of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.126B	Nondisplaced fracture of head of unspecified radius, initial encounter for open fracture type I or II
S52.126C	Nondisplaced fracture of head of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.131B	Displaced fracture of neck of right radius, initial encounter for open fracture type I or II
S52.131C	Displaced fracture of neck of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.132B	Displaced fracture of neck of left radius, initial encounter for open fracture type I or II
S52.132C	Displaced fracture of neck of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.133B	Displaced fracture of neck of unspecified radius, initial encounter for open fracture type I or II
S52.133C	Displaced fracture of neck of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.134B	Nondisplaced fracture of neck of right radius, initial encounter for open fracture type I or II
S52.134C	Nondisplaced fracture of neck of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.135B	Nondisplaced fracture of neck of left radius, initial encounter for open fracture type I or II
S52.135C	Nondisplaced fracture of neck of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.136B	Nondisplaced fracture of neck of unspecified radius, initial encounter for open fracture type I or II
S52.136C	Nondisplaced fracture of neck of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.181B	Other fracture of upper end of right radius, initial encounter for open fracture type I or II
S52.181C	Other fracture of upper end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.182B	Other fracture of upper end of left radius, initial encounter for open fracture type I or II
S52.182C	Other fracture of upper end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.189B	Other fracture of upper end of unspecified radius, initial encounter for open fracture type I or II

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Code	Description
S52.189C	Other fracture of upper end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.201B	Unspecified fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.201C	Unspecified fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.202B	Unspecified fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.202C	Unspecified fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.209B	Unspecified fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.209C	Unspecified fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.221B	Displaced transverse fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.221C	Displaced transverse fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.222B	Displaced transverse fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.222C	Displaced transverse fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.223B	Displaced transverse fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.223C	Displaced transverse fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.224B	Nondisplaced transverse fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.224C	Nondisplaced transverse fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.225B	Nondisplaced transverse fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.225C	Nondisplaced transverse fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.226B	Nondisplaced transverse fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.226C	Nondisplaced transverse fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.231B	Displaced oblique fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.231C	Displaced oblique fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.232B	Displaced oblique fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.232C	Displaced oblique fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.233B	Displaced oblique fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.233C	Displaced oblique fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.234B	Nondisplaced oblique fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.234C	Nondisplaced oblique fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.235B	Nondisplaced oblique fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.235C	Nondisplaced oblique fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.236B	Nondisplaced oblique fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.236C	Nondisplaced oblique fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.241B	Displaced spiral fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.241C	Displaced spiral fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.242B	Displaced spiral fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.242C	Displaced spiral fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.243B	Displaced spiral fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.243C	Displaced spiral fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.244B	Nondisplaced spiral fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.244C	Nondisplaced spiral fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.245B	Nondisplaced spiral fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.245C	Nondisplaced spiral fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.246B	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.246C	Nondisplaced spiral fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.251B	Displaced comminuted fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.251C	Displaced comminuted fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.252B	Displaced comminuted fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.252C	Displaced comminuted fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.253B	Displaced comminuted fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.253C	Displaced comminuted fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.254B	Nondisplaced comminuted fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.254C	Nondisplaced comminuted fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.255B	Nondisplaced comminuted fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.255C	Nondisplaced comminuted fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.256B	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.256C	Nondisplaced comminuted fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.261B	Displaced segmental fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.261C	Displaced segmental fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.262B	Displaced segmental fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.262C	Displaced segmental fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.263B	Displaced segmental fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.263C	Displaced segmental fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.264B	Nondisplaced segmental fracture of shaft of ulna, right arm, initial encounter for open fracture type I or II
S52.264C	Nondisplaced segmental fracture of shaft of ulna, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.265B	Nondisplaced segmental fracture of shaft of ulna, left arm, initial encounter for open fracture type I or II
S52.265C	Nondisplaced segmental fracture of shaft of ulna, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.266B	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type I or II
S52.266C	Nondisplaced segmental fracture of shaft of ulna, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.271B	Monteggia's fracture of right ulna, initial encounter for open fracture type I or II
S52.271C	Monteggia's fracture of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.272B	Monteggia's fracture of left ulna, initial encounter for open fracture type I or II
S52.272C	Monteggia's fracture of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.279B	Monteggia's fracture of unspecified ulna, initial encounter for open fracture type I or II
S52.279C	Monteggia's fracture of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.281B	Bent bone of right ulna, initial encounter for open fracture type I or II
S52.281C	Bent bone of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.282B	Bent bone of left ulna, initial encounter for open fracture type I or II
S52.282C	Bent bone of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S52.283B	Bent bone of unspecified ulna, initial encounter for open fracture type I or II
S52.283C	Bent bone of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.291B	Other fracture of shaft of right ulna, initial encounter for open fracture type I or II
S52.291C	Other fracture of shaft of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.292B	Other fracture of shaft of left ulna, initial encounter for open fracture type I or II
S52.292C	Other fracture of shaft of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.299B	Other fracture of shaft of unspecified ulna, initial encounter for open fracture type I or II
S52.299C	Other fracture of shaft of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.301B	Unspecified fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.301C	Unspecified fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.302B	Unspecified fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.302C	Unspecified fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.309B	Unspecified fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.309C	Unspecified fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.321B	Displaced transverse fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.321C	Displaced transverse fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.322B	Displaced transverse fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.322C	Displaced transverse fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.323B	Displaced transverse fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.323C	Displaced transverse fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.324B	Nondisplaced transverse fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.324C	Nondisplaced transverse fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S52.325B	Nondisplaced transverse fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.325C	Nondisplaced transverse fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.326B	Nondisplaced transverse fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.326C	Nondisplaced transverse fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.331B	Displaced oblique fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.331C	Displaced oblique fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.332B	Displaced oblique fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.332C	Displaced oblique fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.333B	Displaced oblique fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.333C	Displaced oblique fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.334B	Nondisplaced oblique fracture of shaft of right radius, initial encounter for open fracture type I or II
S52.334C	Nondisplaced oblique fracture of shaft of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.335B	Nondisplaced oblique fracture of shaft of left radius, initial encounter for open fracture type I or II
S52.335C	Nondisplaced oblique fracture of shaft of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.336B	Nondisplaced oblique fracture of shaft of unspecified radius, initial encounter for open fracture type I or II
S52.336C	Nondisplaced oblique fracture of shaft of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.341B	Displaced spiral fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.341C	Displaced spiral fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.342B	Displaced spiral fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.342C	Displaced spiral fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.343B	Displaced spiral fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.343C	Displaced spiral fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.344B	Nondisplaced spiral fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.344C	Nondisplaced spiral fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.345B	Nondisplaced spiral fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.345C	Nondisplaced spiral fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.346B	Nondisplaced spiral fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.346C	Nondisplaced spiral fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.351B	Displaced comminuted fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.351C	Displaced comminuted fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.352B	Displaced comminuted fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.352C	Displaced comminuted fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.353B	Displaced comminuted fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.353C	Displaced comminuted fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.354B	Nondisplaced comminuted fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.354C	Nondisplaced comminuted fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.355B	Nondisplaced comminuted fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.355C	Nondisplaced comminuted fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.356B	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.356C	Nondisplaced comminuted fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.361B	Displaced segmental fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.361C	Displaced segmental fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.362B	Displaced segmental fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.362C	Displaced segmental fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.363B	Displaced segmental fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.363C	Displaced segmental fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.364B	Nondisplaced segmental fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.364C	Nondisplaced segmental fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.365B	Nondisplaced segmental fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.365C	Nondisplaced segmental fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.366B	Nondisplaced segmental fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.366C	Nondisplaced segmental fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.371B	Galeazzi's fracture of right radius, initial encounter for open fracture type I or II
S52.371C	Galeazzi's fracture of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.372B	Galeazzi's fracture of left radius, initial encounter for open fracture type I or II
S52.372C	Galeazzi's fracture of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S52.379B	Galeazzi's fracture of unspecified radius, initial encounter for open fracture type I or II
S52.379C	Galeazzi's fracture of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.381B	Bent bone of right radius, initial encounter for open fracture type I or II
S52.381C	Bent bone of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.382B	Bent bone of left radius, initial encounter for open fracture type I or II
S52.382C	Bent bone of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.389B	Bent bone of unspecified radius, initial encounter for open fracture type I or II
S52.389C	Bent bone of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.391B	Other fracture of shaft of radius, right arm, initial encounter for open fracture type I or II
S52.391C	Other fracture of shaft of radius, right arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.392B	Other fracture of shaft of radius, left arm, initial encounter for open fracture type I or II
S52.392C	Other fracture of shaft of radius, left arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.399B	Other fracture of shaft of radius, unspecified arm, initial encounter for open fracture type I or II
S52.399C	Other fracture of shaft of radius, unspecified arm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.501B	Unspecified fracture of the lower end of right radius, initial encounter for open fracture type I or II
S52.501C	Unspecified fracture of the lower end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.502B	Unspecified fracture of the lower end of left radius, initial encounter for open fracture type I or II
S52.502C	Unspecified fracture of the lower end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.509B	Unspecified fracture of the lower end of unspecified radius, initial encounter for open fracture type I or II
S52.509C	Unspecified fracture of the lower end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.511B	Displaced fracture of right radial styloid process, initial encounter for open fracture type I or II
S52.511C	Displaced fracture of right radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S52.512B	Displaced fracture of left radial styloid process, initial encounter for open fracture type I or II
S52.512C	Displaced fracture of left radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.513B	Displaced fracture of unspecified radial styloid process, initial encounter for open fracture type I or II
S52.513C	Displaced fracture of unspecified radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.514B	Nondisplaced fracture of right radial styloid process, initial encounter for open fracture type I or II
S52.514C	Nondisplaced fracture of right radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.515B	Nondisplaced fracture of left radial styloid process, initial encounter for open fracture type I or II
S52.515C	Nondisplaced fracture of left radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.516B	Nondisplaced fracture of unspecified radial styloid process, initial encounter for open fracture type I or II
S52.516C	Nondisplaced fracture of unspecified radial styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.531B	Colles' fracture of right radius, initial encounter for open fracture type I or II
S52.531C	Colles' fracture of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.532B	Colles' fracture of left radius, initial encounter for open fracture type I or II
S52.532C	Colles' fracture of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.539B	Colles' fracture of unspecified radius, initial encounter for open fracture type I or II
S52.539C	Colles' fracture of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.541B	Smith's fracture of right radius, initial encounter for open fracture type I or II
S52.541C	Smith's fracture of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.542B	Smith's fracture of left radius, initial encounter for open fracture type I or II
S52.542C	Smith's fracture of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.549B	Smith's fracture of unspecified radius, initial encounter for open fracture type I or II
S52.549C	Smith's fracture of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.551B	Other extraarticular fracture of lower end of right radius, initial encounter for open fracture type I or II
S52.551C	Other extraarticular fracture of lower end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.552B	Other extraarticular fracture of lower end of left radius, initial encounter for open fracture type I or II
S52.552C	Other extraarticular fracture of lower end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.559B	Other extraarticular fracture of lower end of unspecified radius, initial encounter for open fracture type I or II
S52.559C	Other extraarticular fracture of lower end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.561B	Barton's fracture of right radius, initial encounter for open fracture type I or II
S52.561C	Barton's fracture of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.562B	Barton's fracture of left radius, initial encounter for open fracture type I or II
S52.562C	Barton's fracture of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.569B	Barton's fracture of unspecified radius, initial encounter for open fracture type I or II
S52.569C	Barton's fracture of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.571B	Other intraarticular fracture of lower end of right radius, initial encounter for open fracture type I or II
S52.571C	Other intraarticular fracture of lower end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.572B	Other intraarticular fracture of lower end of left radius, initial encounter for open fracture type I or II
S52.572C	Other intraarticular fracture of lower end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.579B	Other intraarticular fracture of lower end of unspecified radius, initial encounter for open fracture type I or II
S52.579C	Other intraarticular fracture of lower end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.591B	Other fractures of lower end of right radius, initial encounter for open fracture type I or II
S52.591C	Other fractures of lower end of right radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.592B	Other fractures of lower end of left radius, initial encounter for open fracture type I or II



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Code	Description
S52.592C	Other fractures of lower end of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.599B	Other fractures of lower end of unspecified radius, initial encounter for open fracture type I or II
S52.599C	Other fractures of lower end of unspecified radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.601B	Unspecified fracture of lower end of right ulna, initial encounter for open fracture type I or II
S52.601C	Unspecified fracture of lower end of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.602B	Unspecified fracture of lower end of left ulna, initial encounter for open fracture type I or II
S52.602C	Unspecified fracture of lower end of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.609B	Unspecified fracture of lower end of unspecified ulna, initial encounter for open fracture type I or II
S52.609C	Unspecified fracture of lower end of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.611B	Displaced fracture of right ulna styloid process, initial encounter for open fracture type I or II
S52.611C	Displaced fracture of right ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.612B	Displaced fracture of left ulna styloid process, initial encounter for open fracture type I or II
S52.612C	Displaced fracture of left ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.613B	Displaced fracture of unspecified ulna styloid process, initial encounter for open fracture type I or II
S52.613C	Displaced fracture of unspecified ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.614B	Nondisplaced fracture of right ulna styloid process, initial encounter for open fracture type I or II
S52.614C	Nondisplaced fracture of right ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.615B	Nondisplaced fracture of left ulna styloid process, initial encounter for open fracture type I or II
S52.615C	Nondisplaced fracture of left ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S52.616B	Nondisplaced fracture of unspecified ulna styloid process, initial encounter for open fracture type I or II
S52.616C	Nondisplaced fracture of unspecified ulna styloid process, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.691B	Other fracture of lower end of right ulna, initial encounter for open fracture type I or II
S52.691C	Other fracture of lower end of right ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.692B	Other fracture of lower end of left ulna, initial encounter for open fracture type I or II
S52.692C	Other fracture of lower end of left ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.699B	Other fracture of lower end of unspecified ulna, initial encounter for open fracture type I or II
S52.699C	Other fracture of lower end of unspecified ulna, initial encounter for open fracture type IIIA, IIIB, or IIIC
*S52.90XA	*Unspecified fracture of unspecified forearm, initial encounter for closed fracture
S52.90XB	Unspecified fracture of unspecified forearm, initial encounter for open fracture type I or II
S52.90XC	Unspecified fracture of unspecified forearm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.91XB	Unspecified fracture of right forearm, initial encounter for open fracture type I or II
S52.91XC	Unspecified fracture of right forearm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S52.92XB	Unspecified fracture of left forearm, initial encounter for open fracture type I or II
S52.92XC	Unspecified fracture of left forearm, initial encounter for open fracture type IIIA, IIIB, or IIIC
S55.001A	Unspecified injury of ulnar artery at forearm level, right arm, initial encounter
S55.002A	Unspecified injury of ulnar artery at forearm level, left arm, initial encounter
S55.009A	Unspecified injury of ulnar artery at forearm level, unspecified arm, initial encounter
S55.011A	Laceration of ulnar artery at forearm level, right arm, initial encounter
S55.012A	Laceration of ulnar artery at forearm level, left arm, initial encounter
S55.019A	Laceration of ulnar artery at forearm level, unspecified arm, initial encounter
S55.091A	Other specified injury of ulnar artery at forearm level, right arm, initial encounter
S55.092A	Other specified injury of ulnar artery at forearm level, left arm, initial encounter
S55.099A	Other specified injury of ulnar artery at forearm level, unspecified arm, initial encounter
S55.101A	Unspecified injury of radial artery at forearm level, right arm, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S55.102A	Unspecified injury of radial artery at forearm level, left arm, initial encounter
S55.109A	Unspecified injury of radial artery at forearm level, unspecified arm, initial encounter
S55.111A	Laceration of radial artery at forearm level, right arm, initial encounter
S55.112A	Laceration of radial artery at forearm level, left arm, initial encounter
S55.119A	Laceration of radial artery at forearm level, unspecified arm, initial encounter
S55.191A	Other specified injury of radial artery at forearm level, right arm, initial encounter
S55.192A	Other specified injury of radial artery at forearm level, left arm, initial encounter
S55.199A	Other specified injury of radial artery at forearm level, unspecified arm, initial encounter
S55.201A	Unspecified injury of vein at forearm level, right arm, initial encounter
S55.202A	Unspecified injury of vein at forearm level, left arm, initial encounter
S55.209A	Unspecified injury of vein at forearm level, unspecified arm, initial encounter
S55.211A	Laceration of vein at forearm level, right arm, initial encounter
S55.212A	Laceration of vein at forearm level, left arm, initial encounter
S55.219A	Laceration of vein at forearm level, unspecified arm, initial encounter
S55.291A	Other specified injury of vein at forearm level, right arm, initial encounter
S55.292A	Other specified injury of vein at forearm level, left arm, initial encounter
S55.299A	Other specified injury of vein at forearm level, unspecified arm, initial encounter
S55.801A	Unspecified injury of other blood vessels at forearm level, right arm, initial encounter
S55.802A	Unspecified injury of other blood vessels at forearm level, left arm, initial encounter
S55.809A	Unspecified injury of other blood vessels at forearm level, unspecified arm, initial encounter
S55.811A	Laceration of other blood vessels at forearm level, right arm, initial encounter
S55.812A	Laceration of other blood vessels at forearm level, left arm, initial encounter
S55.819A	Laceration of other blood vessels at forearm level, unspecified arm, initial encounter
S55.891A	Other specified injury of other blood vessels at forearm level, right arm, initial encounter
S55.892A	Other specified injury of other blood vessels at forearm level, left arm, initial encounter
S55.899A	Other specified injury of other blood vessels at forearm level, unspecified arm, initial encounter
S55.901A	Unspecified injury of unspecified blood vessel at forearm level, right arm, initial encounter
S55.902A	Unspecified injury of unspecified blood vessel at forearm level, left arm, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S55.909A	Unspecified injury of unspecified blood vessel at forearm level, unspecified arm, initial encounter
S55.911A	Laceration of unspecified blood vessel at forearm level, right arm, initial encounter
S55.912A	Laceration of unspecified blood vessel at forearm level, left arm, initial encounter
S55.919A	Laceration of unspecified blood vessel at forearm level, unspecified arm, initial encounter
S55.991A	Other specified injury of unspecified blood vessel at forearm level, right arm, initial encounter
S55.992A	Other specified injury of unspecified blood vessel at forearm level, left arm, initial encounter
S55.999A	Other specified injury of unspecified blood vessel at forearm level, unspecified arm, initial encounter
S57.00XA	Crushing injury of unspecified elbow, initial encounter
S57.01XA	Crushing injury of right elbow, initial encounter
S57.02XA	Crushing injury of left elbow, initial encounter
S57.80XA	Crushing injury of unspecified forearm, initial encounter
S57.81XA	Crushing injury of right forearm, initial encounter
S57.82XA	Crushing injury of left forearm, initial encounter
S60.00XA	Contusion of unspecified finger without damage to nail, initial encounter
S60.011A	Contusion of right thumb without damage to nail, initial encounter
S60.012A	Contusion of left thumb without damage to nail, initial encounter
S60.019A	Contusion of unspecified thumb without damage to nail, initial encounter
S60.021A	Contusion of right index finger without damage to nail, initial encounter
S60.022A	Contusion of left index finger without damage to nail, initial encounter
S60.029A	Contusion of unspecified index finger without damage to nail, initial encounter
S60.031A	Contusion of right middle finger without damage to nail, initial encounter
S60.032A	Contusion of left middle finger without damage to nail, initial encounter
S60.039A	Contusion of unspecified middle finger without damage to nail, initial encounter
S60.041A	Contusion of right ring finger without damage to nail, initial encounter
S60.042A	Contusion of left ring finger without damage to nail, initial encounter
S60.049A	Contusion of unspecified ring finger without damage to nail, initial encounter
S60.051A	Contusion of right little finger without damage to nail, initial encounter
S60.052A	Contusion of left little finger without damage to nail, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S60.059A	Contusion of unspecified little finger without damage to nail, initial encounter
S60.10XA	Contusion of unspecified finger with damage to nail, initial encounter
S60.111A	Contusion of right thumb with damage to nail, initial encounter
S60.112A	Contusion of left thumb with damage to nail, initial encounter
S60.119A	Contusion of unspecified thumb with damage to nail, initial encounter
S60.121A	Contusion of right index finger with damage to nail, initial encounter
S60.122A	Contusion of left index finger with damage to nail, initial encounter
S60.129A	Contusion of unspecified index finger with damage to nail, initial encounter
S60.131A	Contusion of right middle finger with damage to nail, initial encounter
S60.132A	Contusion of left middle finger with damage to nail, initial encounter
S60.139A	Contusion of unspecified middle finger with damage to nail, initial encounter
S60.141A	Contusion of right ring finger with damage to nail, initial encounter
S60.142A	Contusion of left ring finger with damage to nail, initial encounter
S60.149A	Contusion of unspecified ring finger with damage to nail, initial encounter
S60.151A	Contusion of right little finger with damage to nail, initial encounter
S60.152A	Contusion of left little finger with damage to nail, initial encounter
S60.159A	Contusion of unspecified little finger with damage to nail, initial encounter
S60.211A	Contusion of right wrist, initial encounter
S60.212A	Contusion of left wrist, initial encounter
S60.219A	Contusion of unspecified wrist, initial encounter
S60.221A	Contusion of right hand, initial encounter
S60.222A	Contusion of left hand, initial encounter
S60.229A	Contusion of unspecified hand, initial encounter
S65.001A	Unspecified injury of ulnar artery at wrist and hand level of right arm, initial encounter
S65.002A	Unspecified injury of ulnar artery at wrist and hand level of left arm, initial encounter
S65.009A	Unspecified injury of ulnar artery at wrist and hand level of unspecified arm, initial encounter
S65.011A	Laceration of ulnar artery at wrist and hand level of right arm, initial encounter
S65.012A	Laceration of ulnar artery at wrist and hand level of left arm, initial encounter
S65.019A	Laceration of ulnar artery at wrist and hand level of unspecified arm, initial encounter
S65.091A	Other specified injury of ulnar artery at wrist and hand level of right arm, initial encounter

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S65.092A	Other specified injury of ulnar artery at wrist and hand level of left arm, initial encounter
S65.099A	Other specified injury of ulnar artery at wrist and hand level of unspecified arm, initial encounter
S65.101A	Unspecified injury of radial artery at wrist and hand level of right arm, initial encounter
S65.102A	Unspecified injury of radial artery at wrist and hand level of left arm, initial encounter
S65.109A	Unspecified injury of radial artery at wrist and hand level of unspecified arm, initial encounter
S65.111A	Laceration of radial artery at wrist and hand level of right arm, initial encounter
S65.112A	Laceration of radial artery at wrist and hand level of left arm, initial encounter
S65.119A	Laceration of radial artery at wrist and hand level of unspecified arm, initial encounter
S65.191A	Other specified injury of radial artery at wrist and hand level of right arm, initial encounter
S65.192A	Other specified injury of radial artery at wrist and hand level of left arm, initial encounter
S65.199A	Other specified injury of radial artery at wrist and hand level of unspecified arm, initial encounter
S65.201A	Unspecified injury of superficial palmar arch of right hand, initial encounter
S65.202A	Unspecified injury of superficial palmar arch of left hand, initial encounter
S65.209A	Unspecified injury of superficial palmar arch of unspecified hand, initial encounter
S65.211A	Laceration of superficial palmar arch of right hand, initial encounter
S65.212A	Laceration of superficial palmar arch of left hand, initial encounter
S65.219A	Laceration of superficial palmar arch of unspecified hand, initial encounter
S65.291A	Other specified injury of superficial palmar arch of right hand, initial encounter
S65.292A	Other specified injury of superficial palmar arch of left hand, initial encounter
S65.299A	Other specified injury of superficial palmar arch of unspecified hand, initial encounter
S65.301A	Unspecified injury of deep palmar arch of right hand, initial encounter
S65.302A	Unspecified injury of deep palmar arch of left hand, initial encounter
S65.309A	Unspecified injury of deep palmar arch of unspecified hand, initial encounter
S65.311A	Laceration of deep palmar arch of right hand, initial encounter
S65.312A	Laceration of deep palmar arch of left hand, initial encounter
S65.319A	Laceration of deep palmar arch of unspecified hand, initial encounter
S65.391A	Other specified injury of deep palmar arch of right hand, initial encounter
S65.392A	Other specified injury of deep palmar arch of left hand, initial encounter



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Code	Description
S65.399A	Other specified injury of deep palmar arch of unspecified hand, initial encounter
S65.401A	Unspecified injury of blood vessel of right thumb, initial encounter
S65.402A	Unspecified injury of blood vessel of left thumb, initial encounter
S65.409A	Unspecified injury of blood vessel of unspecified thumb, initial encounter
S65.411A	Laceration of blood vessel of right thumb, initial encounter
S65.412A	Laceration of blood vessel of left thumb, initial encounter
S65.419A	Laceration of blood vessel of unspecified thumb, initial encounter
S65.491A	Other specified injury of blood vessel of right thumb, initial encounter
S65.492A	Other specified injury of blood vessel of left thumb, initial encounter
S65.499A	Other specified injury of blood vessel of unspecified thumb, initial encounter
S65.500A	Unspecified injury of blood vessel of right index finger, initial encounter
S65.501A	Unspecified injury of blood vessel of left index finger, initial encounter
S65.502A	Unspecified injury of blood vessel of right middle finger, initial encounter
S65.503A	Unspecified injury of blood vessel of left middle finger, initial encounter
S65.504A	Unspecified injury of blood vessel of right ring finger, initial encounter
S65.505A	Unspecified injury of blood vessel of left ring finger, initial encounter
S65.506A	Unspecified injury of blood vessel of right little finger, initial encounter
S65.507A	Unspecified injury of blood vessel of left little finger, initial encounter
S65.508A	Unspecified injury of blood vessel of other finger, initial encounter
S65.509A	Unspecified injury of blood vessel of unspecified finger, initial encounter
S65.510A	Laceration of blood vessel of right index finger, initial encounter
S65.511A	Laceration of blood vessel of left index finger, initial encounter
S65.512A	Laceration of blood vessel of right middle finger, initial encounter
S65.513A	Laceration of blood vessel of left middle finger, initial encounter
S65.514A	Laceration of blood vessel of right ring finger, initial encounter
S65.515A	Laceration of blood vessel of left ring finger, initial encounter
S65.516A	Laceration of blood vessel of right little finger, initial encounter
S65.517A	Laceration of blood vessel of left little finger, initial encounter
S65.518A	Laceration of blood vessel of other finger, initial encounter
S65.519A	Laceration of blood vessel of unspecified finger, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S65.590A	Other specified injury of blood vessel of right index finger, initial encounter
S65.591A	Other specified injury of blood vessel of left index finger, initial encounter
S65.592A	Other specified injury of blood vessel of right middle finger, initial encounter
S65.593A	Other specified injury of blood vessel of left middle finger, initial encounter
S65.594A	Other specified injury of blood vessel of right ring finger, initial encounter
S65.595A	Other specified injury of blood vessel of left ring finger, initial encounter
S65.596A	Other specified injury of blood vessel of right little finger, initial encounter
S65.597A	Other specified injury of blood vessel of left little finger, initial encounter
S65.598A	Other specified injury of blood vessel of other finger, initial encounter
S65.599A	Other specified injury of blood vessel of unspecified finger, initial encounter
S65.801A	Unspecified injury of other blood vessels at wrist and hand level of right arm, initial encounter
S65.802A	Unspecified injury of other blood vessels at wrist and hand level of left arm, initial encounter
S65.809A	Unspecified injury of other blood vessels at wrist and hand level of unspecified arm, initial encounter
S65.811A	Laceration of other blood vessels at wrist and hand level of right arm, initial encounter
S65.812A	Laceration of other blood vessels at wrist and hand level of left arm, initial encounter
S65.819A	Laceration of other blood vessels at wrist and hand level of unspecified arm, initial encounter
S65.891A	Other specified injury of other blood vessels at wrist and hand level of right arm, initial encounter
S65.892A	Other specified injury of other blood vessels at wrist and hand level of left arm, initial encounter
S65.899A	Other specified injury of other blood vessels at wrist and hand level of unspecified arm, initial encounter
S65.901A	Unspecified injury of unspecified blood vessel at wrist and hand level of right arm, initial encounter
S65.902A	Unspecified injury of unspecified blood vessel at wrist and hand level of left arm, initial encounter
S65.909A	Unspecified injury of unspecified blood vessel at wrist and hand level of unspecified arm, initial encounter
S65.911A	Laceration of unspecified blood vessel at wrist and hand level of right arm, initial encounter
S65.912A	Laceration of unspecified blood vessel at wrist and hand level of left arm, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S65.919A	Laceration of unspecified blood vessel at wrist and hand level of unspecified arm, initial encounter
S65.991A	Other specified injury of unspecified blood vessel at wrist and hand of right arm, initial encounter
S65.992A	Other specified injury of unspecified blood vessel at wrist and hand of left arm, initial encounter
S65.999A	Other specified injury of unspecified blood vessel at wrist and hand of unspecified arm, initial encounter
S67.00XA	Crushing injury of unspecified thumb, initial encounter
S67.01XA	Crushing injury of right thumb, initial encounter
S67.02XA	Crushing injury of left thumb, initial encounter
S67.10XA	Crushing injury of unspecified finger(s), initial encounter
S67.190A	Crushing injury of right index finger, initial encounter
S67.191A	Crushing injury of left index finger, initial encounter
S67.192A	Crushing injury of right middle finger, initial encounter
S67.193A	Crushing injury of left middle finger, initial encounter
S67.194A	Crushing injury of right ring finger, initial encounter
S67.195A	Crushing injury of left ring finger, initial encounter
S67.196A	Crushing injury of right little finger, initial encounter
S67.197A	Crushing injury of left little finger, initial encounter
S67.198A	Crushing injury of other finger, initial encounter
S67.20XA	Crushing injury of unspecified hand, initial encounter
S67.21XA	Crushing injury of right hand, initial encounter
S67.22XA	Crushing injury of left hand, initial encounter
S67.30XA	Crushing injury of unspecified wrist, initial encounter
S67.31XA	Crushing injury of right wrist, initial encounter
S67.32XA	Crushing injury of left wrist, initial encounter
S67.40XA	Crushing injury of unspecified wrist and hand, initial encounter
S67.41XA	Crushing injury of right wrist and hand, initial encounter
S67.42XA	Crushing injury of left wrist and hand, initial encounter
S67.90XA	Crushing injury of unspecified part(s) of unspecified wrist, hand and fingers, initial encounter

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Code	Description
S67.91XA	Crushing injury of unspecified part(s) of right wrist, hand and fingers, initial encounter
S67.92XA	Crushing injury of unspecified part(s) of left wrist, hand and fingers, initial encounter
S70.00XA	Contusion of unspecified hip, initial encounter
S70.01XA	Contusion of right hip, initial encounter
S70.02XA	Contusion of left hip, initial encounter
S70.10XA	Contusion of unspecified thigh, initial encounter
S70.11XA	Contusion of right thigh, initial encounter
S70.12XA	Contusion of left thigh, initial encounter
S72.001A	Fracture of unspecified part of neck of right femur, initial encounter for closed fracture
S72.001B	Fracture of unspecified part of neck of right femur, initial encounter for open fracture type I or II
S72.001C	Fracture of unspecified part of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.002A	Fracture of unspecified part of neck of left femur, initial encounter for closed fracture
S72.002B	Fracture of unspecified part of neck of left femur, initial encounter for open fracture type I or II
S72.002C	Fracture of unspecified part of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.009A	Fracture of unspecified part of neck of unspecified femur, initial encounter for closed fracture
S72.009B	Fracture of unspecified part of neck of unspecified femur, initial encounter for open fracture type I or II
S72.009C	Fracture of unspecified part of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.011A	Unspecified intracapsular fracture of right femur, initial encounter for closed fracture
S72.011B	Unspecified intracapsular fracture of right femur, initial encounter for open fracture type I or II
S72.011C	Unspecified intracapsular fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.012A	Unspecified intracapsular fracture of left femur, initial encounter for closed fracture
S72.012B	Unspecified intracapsular fracture of left femur, initial encounter for open fracture type I or II
S72.012C	Unspecified intracapsular fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.019A	Unspecified intracapsular fracture of unspecified femur, initial encounter for closed fracture
S72.019B	Unspecified intracapsular fracture of unspecified femur, initial encounter for open fracture type I or II
S72.019C	Unspecified intracapsular fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.021A	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for closed fracture
S72.021B	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type I or II
S72.021C	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.022A	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for closed fracture
S72.022B	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type I or II
S72.022C	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.023A	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for closed fracture
S72.023B	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type I or II
S72.023C	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.024A	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for closed fracture
S72.024B	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type I or II
S72.024C	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.025A	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for closed fracture
S72.025B	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type I or II
S72.025C	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
S72.026A	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for closed fracture
S72.026B	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type I or II
S72.026C	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.031A	Displaced midcervical fracture of right femur, initial encounter for closed fracture
S72.031B	Displaced midcervical fracture of right femur, initial encounter for open fracture type I or II
S72.031C	Displaced midcervical fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.032A	Displaced midcervical fracture of left femur, initial encounter for closed fracture
S72.032B	Displaced midcervical fracture of left femur, initial encounter for open fracture type I or II
S72.032C	Displaced midcervical fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.033A	Displaced midcervical fracture of unspecified femur, initial encounter for closed fracture
S72.033B	Displaced midcervical fracture of unspecified femur, initial encounter for open fracture type I or II
S72.033C	Displaced midcervical fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.034A	Nondisplaced midcervical fracture of right femur, initial encounter for closed fracture
S72.034B	Nondisplaced midcervical fracture of right femur, initial encounter for open fracture type I or II
S72.034C	Nondisplaced midcervical fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.035A	Nondisplaced midcervical fracture of left femur, initial encounter for closed fracture
S72.035B	Nondisplaced midcervical fracture of left femur, initial encounter for open fracture type I or II
S72.035C	Nondisplaced midcervical fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.036A	Nondisplaced midcervical fracture of unspecified femur, initial encounter for closed fracture
S72.036B	Nondisplaced midcervical fracture of unspecified femur, initial encounter for open fracture type I or II
S72.036C	Nondisplaced midcervical fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.041A	Displaced fracture of base of neck of right femur, initial encounter for closed fracture

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**Medicare National Coverage Determinations (NCD)
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Code	Description
S72.041B	Displaced fracture of base of neck of right femur, initial encounter for open fracture type I or II
S72.041C	Displaced fracture of base of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.042A	Displaced fracture of base of neck of left femur, initial encounter for closed fracture
S72.042B	Displaced fracture of base of neck of left femur, initial encounter for open fracture type I or II
S72.042C	Displaced fracture of base of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.043A	Displaced fracture of base of neck of unspecified femur, initial encounter for closed fracture
S72.043B	Displaced fracture of base of neck of unspecified femur, initial encounter for open fracture type I or II
S72.043C	Displaced fracture of base of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.044A	Nondisplaced fracture of base of neck of right femur, initial encounter for closed fracture
S72.044B	Nondisplaced fracture of base of neck of right femur, initial encounter for open fracture type I or II
S72.044C	Nondisplaced fracture of base of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.045A	Nondisplaced fracture of base of neck of left femur, initial encounter for closed fracture
S72.045B	Nondisplaced fracture of base of neck of left femur, initial encounter for open fracture type I or II
S72.045C	Nondisplaced fracture of base of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.046A	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for closed fracture
S72.046B	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for open fracture type I or II
S72.046C	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.051A	Unspecified fracture of head of right femur, initial encounter for closed fracture
S72.051B	Unspecified fracture of head of right femur, initial encounter for open fracture type I or II
S72.051C	Unspecified fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S72.052A	Unspecified fracture of head of left femur, initial encounter for closed fracture
S72.052B	Unspecified fracture of head of left femur, initial encounter for open fracture type I or II
S72.052C	Unspecified fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.059A	Unspecified fracture of head of unspecified femur, initial encounter for closed fracture
S72.059B	Unspecified fracture of head of unspecified femur, initial encounter for open fracture type I or II
S72.059C	Unspecified fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.061A	Displaced articular fracture of head of right femur, initial encounter for closed fracture
S72.061B	Displaced articular fracture of head of right femur, initial encounter for open fracture type I or II
S72.061C	Displaced articular fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.062A	Displaced articular fracture of head of left femur, initial encounter for closed fracture
S72.062B	Displaced articular fracture of head of left femur, initial encounter for open fracture type I or II
S72.062C	Displaced articular fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.063A	Displaced articular fracture of head of unspecified femur, initial encounter for closed fracture
S72.063B	Displaced articular fracture of head of unspecified femur, initial encounter for open fracture type I or II
S72.063C	Displaced articular fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.064A	Nondisplaced articular fracture of head of right femur, initial encounter for closed fracture
S72.064B	Nondisplaced articular fracture of head of right femur, initial encounter for open fracture type I or II
S72.064C	Nondisplaced articular fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.065A	Nondisplaced articular fracture of head of left femur, initial encounter for closed fracture
S72.065B	Nondisplaced articular fracture of head of left femur, initial encounter for open fracture type I or II
S72.065C	Nondisplaced articular fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.066A	Nondisplaced articular fracture of head of unspecified femur, initial encounter for closed fracture
S72.066B	Nondisplaced articular fracture of head of unspecified femur, initial encounter for open fracture type I or II
S72.066C	Nondisplaced articular fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.091A	Other fracture of head and neck of right femur, initial encounter for closed fracture
S72.091B	Other fracture of head and neck of right femur, initial encounter for open fracture type I or II
S72.091C	Other fracture of head and neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.092A	Other fracture of head and neck of left femur, initial encounter for closed fracture
S72.092B	Other fracture of head and neck of left femur, initial encounter for open fracture type I or II
S72.092C	Other fracture of head and neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.099A	Other fracture of head and neck of unspecified femur, initial encounter for closed fracture
S72.099B	Other fracture of head and neck of unspecified femur, initial encounter for open fracture type I or II
S72.099C	Other fracture of head and neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.101A	Unspecified trochanteric fracture of right femur, initial encounter for closed fracture
S72.101B	Unspecified trochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.101C	Unspecified trochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.102A	Unspecified trochanteric fracture of left femur, initial encounter for closed fracture
S72.102B	Unspecified trochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.102C	Unspecified trochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.109A	Unspecified trochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.109B	Unspecified trochanteric fracture of unspecified femur, initial encounter for open fracture type I or II
S72.109C	Unspecified trochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.111A	Displaced fracture of greater trochanter of right femur, initial encounter for closed fracture



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Code	Description
S72.111B	Displaced fracture of greater trochanter of right femur, initial encounter for open fracture type I or II
S72.111C	Displaced fracture of greater trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.112A	Displaced fracture of greater trochanter of left femur, initial encounter for closed fracture
S72.112B	Displaced fracture of greater trochanter of left femur, initial encounter for open fracture type I or II
S72.112C	Displaced fracture of greater trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.113A	Displaced fracture of greater trochanter of unspecified femur, initial encounter for closed fracture
S72.113B	Displaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type I or II
S72.113C	Displaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.114A	Nondisplaced fracture of greater trochanter of right femur, initial encounter for closed fracture
S72.114B	Nondisplaced fracture of greater trochanter of right femur, initial encounter for open fracture type I or II
S72.114C	Nondisplaced fracture of greater trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.115A	Nondisplaced fracture of greater trochanter of left femur, initial encounter for closed fracture
S72.115B	Nondisplaced fracture of greater trochanter of left femur, initial encounter for open fracture type I or II
S72.115C	Nondisplaced fracture of greater trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.116A	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for closed fracture
S72.116B	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type I or II
S72.116C	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.121A	Displaced fracture of lesser trochanter of right femur, initial encounter for closed fracture
S72.121B	Displaced fracture of lesser trochanter of right femur, initial encounter for open fracture type I or II

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Code	Description
S72.121C	Displaced fracture of lesser trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.122A	Displaced fracture of lesser trochanter of left femur, initial encounter for closed fracture
S72.122B	Displaced fracture of lesser trochanter of left femur, initial encounter for open fracture type I or II
S72.122C	Displaced fracture of lesser trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.123A	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for closed fracture
S72.123B	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type I or II
S72.123C	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.124A	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for closed fracture
S72.124B	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for open fracture type I or II
S72.124C	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.125A	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for closed fracture
S72.125B	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for open fracture type I or II
S72.125C	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.126A	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for closed fracture
S72.126B	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type I or II
S72.126C	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.131A	Displaced apophyseal fracture of right femur, initial encounter for closed fracture
S72.131B	Displaced apophyseal fracture of right femur, initial encounter for open fracture type I or II
S72.131C	Displaced apophyseal fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.132A	Displaced apophyseal fracture of left femur, initial encounter for closed fracture

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Code	Description
S72.132B	Displaced apophyseal fracture of left femur, initial encounter for open fracture type I or II
S72.132C	Displaced apophyseal fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.133A	Displaced apophyseal fracture of unspecified femur, initial encounter for closed fracture
S72.133B	Displaced apophyseal fracture of unspecified femur, initial encounter for open fracture type I or II
S72.133C	Displaced apophyseal fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.134A	Nondisplaced apophyseal fracture of right femur, initial encounter for closed fracture
S72.134B	Nondisplaced apophyseal fracture of right femur, initial encounter for open fracture type I or II
S72.134C	Nondisplaced apophyseal fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.135A	Nondisplaced apophyseal fracture of left femur, initial encounter for closed fracture
S72.135B	Nondisplaced apophyseal fracture of left femur, initial encounter for open fracture type I or II
S72.135C	Nondisplaced apophyseal fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.136A	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for closed fracture
S72.136B	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for open fracture type I or II
S72.136C	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.141A	Displaced intertrochanteric fracture of right femur, initial encounter for closed fracture
S72.141B	Displaced intertrochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.141C	Displaced intertrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.142A	Displaced intertrochanteric fracture of left femur, initial encounter for closed fracture
S72.142B	Displaced intertrochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.142C	Displaced intertrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.143A	Displaced intertrochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.143B	Displaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II
S72.143C	Displaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.144A	Nondisplaced intertrochanteric fracture of right femur, initial encounter for closed fracture
S72.144B	Nondisplaced intertrochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.144C	Nondisplaced intertrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.145A	Nondisplaced intertrochanteric fracture of left femur, initial encounter for closed fracture
S72.145B	Nondisplaced intertrochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.145C	Nondisplaced intertrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.146A	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.146B	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II
S72.146C	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.21XA	Displaced subtrochanteric fracture of right femur, initial encounter for closed fracture
S72.21XB	Displaced subtrochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.21XC	Displaced subtrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.22XA	Displaced subtrochanteric fracture of left femur, initial encounter for closed fracture
S72.22XB	Displaced subtrochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.22XC	Displaced subtrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.23XA	Displaced subtrochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.23XB	Displaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II

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Code	Description
S72.23XC	Displaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.24XA	Nondisplaced subtrochanteric fracture of right femur, initial encounter for closed fracture
S72.24XB	Nondisplaced subtrochanteric fracture of right femur, initial encounter for open fracture type I or II
S72.24XC	Nondisplaced subtrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.25XA	Nondisplaced subtrochanteric fracture of left femur, initial encounter for closed fracture
S72.25XB	Nondisplaced subtrochanteric fracture of left femur, initial encounter for open fracture type I or II
S72.25XC	Nondisplaced subtrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.26XA	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for closed fracture
S72.26XB	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II
S72.26XC	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.301A	Unspecified fracture of shaft of right femur, initial encounter for closed fracture
S72.301B	Unspecified fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.301C	Unspecified fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.302A	Unspecified fracture of shaft of left femur, initial encounter for closed fracture
S72.302B	Unspecified fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.302C	Unspecified fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.309A	Unspecified fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.309B	Unspecified fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.309C	Unspecified fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.321A	Displaced transverse fracture of shaft of right femur, initial encounter for closed fracture
S72.321B	Displaced transverse fracture of shaft of right femur, initial encounter for open fracture type I or II



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Code	Description
S72.321C	Displaced transverse fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.322A	Displaced transverse fracture of shaft of left femur, initial encounter for closed fracture
S72.322B	Displaced transverse fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.322C	Displaced transverse fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.323A	Displaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.323B	Displaced transverse fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.323C	Displaced transverse fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.324A	Nondisplaced transverse fracture of shaft of right femur, initial encounter for closed fracture
S72.324B	Nondisplaced transverse fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.324C	Nondisplaced transverse fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.325A	Nondisplaced transverse fracture of shaft of left femur, initial encounter for closed fracture
S72.325B	Nondisplaced transverse fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.325C	Nondisplaced transverse fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.326A	Nondisplaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.326B	Nondisplaced transverse fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.326C	Nondisplaced transverse fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.331A	Displaced oblique fracture of shaft of right femur, initial encounter for closed fracture
S72.331B	Displaced oblique fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.331C	Displaced oblique fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.332A	Displaced oblique fracture of shaft of left femur, initial encounter for closed fracture

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Code	Description
S72.332B	Displaced oblique fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.332C	Displaced oblique fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.333A	Displaced oblique fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.333B	Displaced oblique fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.333C	Displaced oblique fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.334A	Nondisplaced oblique fracture of shaft of right femur, initial encounter for closed fracture
S72.334B	Nondisplaced oblique fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.334C	Nondisplaced oblique fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.335A	Nondisplaced oblique fracture of shaft of left femur, initial encounter for closed fracture
S72.335B	Nondisplaced oblique fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.335C	Nondisplaced oblique fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.336A	Nondisplaced oblique fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.336B	Nondisplaced oblique fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.336C	Nondisplaced oblique fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.341A	Displaced spiral fracture of shaft of right femur, initial encounter for closed fracture
S72.341B	Displaced spiral fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.341C	Displaced spiral fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.342A	Displaced spiral fracture of shaft of left femur, initial encounter for closed fracture
S72.342B	Displaced spiral fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.342C	Displaced spiral fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.343A	Displaced spiral fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.343B	Displaced spiral fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.343C	Displaced spiral fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.344A	Nondisplaced spiral fracture of shaft of right femur, initial encounter for closed fracture
S72.344B	Nondisplaced spiral fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.344C	Nondisplaced spiral fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.345A	Nondisplaced spiral fracture of shaft of left femur, initial encounter for closed fracture
S72.345B	Nondisplaced spiral fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.345C	Nondisplaced spiral fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.346A	Nondisplaced spiral fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.346B	Nondisplaced spiral fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.346C	Nondisplaced spiral fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.351A	Displaced comminuted fracture of shaft of right femur, initial encounter for closed fracture
S72.351B	Displaced comminuted fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.351C	Displaced comminuted fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.352A	Displaced comminuted fracture of shaft of left femur, initial encounter for closed fracture
S72.352B	Displaced comminuted fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.352C	Displaced comminuted fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.353A	Displaced comminuted fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.353B	Displaced comminuted fracture of shaft of unspecified femur, initial encounter for open fracture type I or II



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Code	Description
S72.353C	Displaced comminuted fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.354A	Nondisplaced comminuted fracture of shaft of right femur, initial encounter for closed fracture
S72.354B	Nondisplaced comminuted fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.354C	Nondisplaced comminuted fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.355A	Nondisplaced comminuted fracture of shaft of left femur, initial encounter for closed fracture
S72.355B	Nondisplaced comminuted fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.355C	Nondisplaced comminuted fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.356A	Nondisplaced comminuted fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.356B	Nondisplaced comminuted fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.356C	Nondisplaced comminuted fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.361A	Displaced segmental fracture of shaft of right femur, initial encounter for closed fracture
S72.361B	Displaced segmental fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.361C	Displaced segmental fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.362A	Displaced segmental fracture of shaft of left femur, initial encounter for closed fracture
S72.362B	Displaced segmental fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.362C	Displaced segmental fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.363A	Displaced segmental fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.363B	Displaced segmental fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.363C	Displaced segmental fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.364A	Nondisplaced segmental fracture of shaft of right femur, initial encounter for closed fracture
S72.364B	Nondisplaced segmental fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.364C	Nondisplaced segmental fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.365A	Nondisplaced segmental fracture of shaft of left femur, initial encounter for closed fracture
S72.365B	Nondisplaced segmental fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.365C	Nondisplaced segmental fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.366A	Nondisplaced segmental fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.366B	Nondisplaced segmental fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.366C	Nondisplaced segmental fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.391A	Other fracture of shaft of right femur, initial encounter for closed fracture
S72.391B	Other fracture of shaft of right femur, initial encounter for open fracture type I or II
S72.391C	Other fracture of shaft of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.392A	Other fracture of shaft of left femur, initial encounter for closed fracture
S72.392B	Other fracture of shaft of left femur, initial encounter for open fracture type I or II
S72.392C	Other fracture of shaft of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.399A	Other fracture of shaft of unspecified femur, initial encounter for closed fracture
S72.399B	Other fracture of shaft of unspecified femur, initial encounter for open fracture type I or II
S72.399C	Other fracture of shaft of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.401A	Unspecified fracture of lower end of right femur, initial encounter for closed fracture
S72.401B	Unspecified fracture of lower end of right femur, initial encounter for open fracture type I or II
S72.401C	Unspecified fracture of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.402A	Unspecified fracture of lower end of left femur, initial encounter for closed fracture
S72.402B	Unspecified fracture of lower end of left femur, initial encounter for open fracture type I or II

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Code	Description
S72.402C	Unspecified fracture of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.409A	Unspecified fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.409B	Unspecified fracture of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.409C	Unspecified fracture of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.411A	Displaced unspecified condyle fracture of lower end of right femur, initial encounter for closed fracture
S72.411B	Displaced unspecified condyle fracture of lower end of right femur, initial encounter for open fracture type I or II
S72.411C	Displaced unspecified condyle fracture of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.412A	Displaced unspecified condyle fracture of lower end of left femur, initial encounter for closed fracture
S72.412B	Displaced unspecified condyle fracture of lower end of left femur, initial encounter for open fracture type I or II
S72.412C	Displaced unspecified condyle fracture of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.413A	Displaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.413B	Displaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.413C	Displaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.414A	Nondisplaced unspecified condyle fracture of lower end of right femur, initial encounter for closed fracture
S72.414B	Nondisplaced unspecified condyle fracture of lower end of right femur, initial encounter for open fracture type I or II
S72.414C	Nondisplaced unspecified condyle fracture of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.415A	Nondisplaced unspecified condyle fracture of lower end of left femur, initial encounter for closed fracture
S72.415B	Nondisplaced unspecified condyle fracture of lower end of left femur, initial encounter for open fracture type I or II



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Code	Description
S72.415C	Nondisplaced unspecified condyle fracture of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.416A	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.416B	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.416C	Nondisplaced unspecified condyle fracture of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.421A	Displaced fracture of lateral condyle of right femur, initial encounter for closed fracture
S72.421B	Displaced fracture of lateral condyle of right femur, initial encounter for open fracture type I or II
S72.421C	Displaced fracture of lateral condyle of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.422A	Displaced fracture of lateral condyle of left femur, initial encounter for closed fracture
S72.422B	Displaced fracture of lateral condyle of left femur, initial encounter for open fracture type I or II
S72.422C	Displaced fracture of lateral condyle of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.423A	Displaced fracture of lateral condyle of unspecified femur, initial encounter for closed fracture
S72.423B	Displaced fracture of lateral condyle of unspecified femur, initial encounter for open fracture type I or II
S72.423C	Displaced fracture of lateral condyle of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.424A	Nondisplaced fracture of lateral condyle of right femur, initial encounter for closed fracture
S72.424B	Nondisplaced fracture of lateral condyle of right femur, initial encounter for open fracture type I or II
S72.424C	Nondisplaced fracture of lateral condyle of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.425A	Nondisplaced fracture of lateral condyle of left femur, initial encounter for closed fracture
S72.425B	Nondisplaced fracture of lateral condyle of left femur, initial encounter for open fracture type I or II
S72.425C	Nondisplaced fracture of lateral condyle of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.426A	Nondisplaced fracture of lateral condyle of unspecified femur, initial encounter for closed fracture

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Code	Description
S72.426B	Nondisplaced fracture of lateral condyle of unspecified femur, initial encounter for open fracture type I or II
S72.426C	Nondisplaced fracture of lateral condyle of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.431A	Displaced fracture of medial condyle of right femur, initial encounter for closed fracture
S72.431B	Displaced fracture of medial condyle of right femur, initial encounter for open fracture type I or II
S72.431C	Displaced fracture of medial condyle of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.432A	Displaced fracture of medial condyle of left femur, initial encounter for closed fracture
S72.432B	Displaced fracture of medial condyle of left femur, initial encounter for open fracture type I or II
S72.432C	Displaced fracture of medial condyle of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.433A	Displaced fracture of medial condyle of unspecified femur, initial encounter for closed fracture
S72.433B	Displaced fracture of medial condyle of unspecified femur, initial encounter for open fracture type I or II
S72.433C	Displaced fracture of medial condyle of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.434A	Nondisplaced fracture of medial condyle of right femur, initial encounter for closed fracture
S72.434B	Nondisplaced fracture of medial condyle of right femur, initial encounter for open fracture type I or II
S72.434C	Nondisplaced fracture of medial condyle of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.435A	Nondisplaced fracture of medial condyle of left femur, initial encounter for closed fracture
S72.435B	Nondisplaced fracture of medial condyle of left femur, initial encounter for open fracture type I or II
S72.435C	Nondisplaced fracture of medial condyle of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.436A	Nondisplaced fracture of medial condyle of unspecified femur, initial encounter for closed fracture
S72.436B	Nondisplaced fracture of medial condyle of unspecified femur, initial encounter for open fracture type I or II
S72.436C	Nondisplaced fracture of medial condyle of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S72.441A	Displaced fracture of lower epiphysis (separation) of right femur, initial encounter for closed fracture
S72.441B	Displaced fracture of lower epiphysis (separation) of right femur, initial encounter for open fracture type I or II
S72.441C	Displaced fracture of lower epiphysis (separation) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.442A	Displaced fracture of lower epiphysis (separation) of left femur, initial encounter for closed fracture
S72.442B	Displaced fracture of lower epiphysis (separation) of left femur, initial encounter for open fracture type I or II
S72.442C	Displaced fracture of lower epiphysis (separation) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.443A	Displaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for closed fracture
S72.443B	Displaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for open fracture type I or II
S72.443C	Displaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.444A	Nondisplaced fracture of lower epiphysis (separation) of right femur, initial encounter for closed fracture
S72.444B	Nondisplaced fracture of lower epiphysis (separation) of right femur, initial encounter for open fracture type I or II
S72.444C	Nondisplaced fracture of lower epiphysis (separation) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.445A	Nondisplaced fracture of lower epiphysis (separation) of left femur, initial encounter for closed fracture
S72.445B	Nondisplaced fracture of lower epiphysis (separation) of left femur, initial encounter for open fracture type I or II
S72.445C	Nondisplaced fracture of lower epiphysis (separation) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.446A	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for closed fracture
S72.446B	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for open fracture type I or II
S72.446C	Nondisplaced fracture of lower epiphysis (separation) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.451A	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for closed fracture
S72.451B	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for open fracture type I or II
S72.451C	Displaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.452A	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for closed fracture
S72.452B	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for open fracture type I or II
S72.452C	Displaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.453A	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for closed fracture
S72.453B	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.453C	Displaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.454A	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for closed fracture
S72.454B	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for open fracture type I or II
S72.454C	Nondisplaced supracondylar fracture without intracondylar extension of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.455A	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for closed fracture
S72.455B	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for open fracture type I or II
S72.455C	Nondisplaced supracondylar fracture without intracondylar extension of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.456A	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for closed fracture
S72.456B	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.456C	Nondisplaced supracondylar fracture without intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S72.461A	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for closed fracture
S72.461B	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for open fracture type I or II
S72.461C	Displaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.462A	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for closed fracture
S72.462B	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for open fracture type I or II
S72.462C	Displaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.463A	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for closed fracture
S72.463B	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.463C	Displaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.464A	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for closed fracture
S72.464B	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for open fracture type I or II
S72.464C	Nondisplaced supracondylar fracture with intracondylar extension of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.465A	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for closed fracture
S72.465B	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for open fracture type I or II
S72.465C	Nondisplaced supracondylar fracture with intracondylar extension of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.466A	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for closed fracture
S72.466B	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.466C	Nondisplaced supracondylar fracture with intracondylar extension of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S72.471A	Torus fracture of lower end of right femur, initial encounter for closed fracture
S72.472A	Torus fracture of lower end of left femur, initial encounter for closed fracture
S72.479A	Torus fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.491A	Other fracture of lower end of right femur, initial encounter for closed fracture
S72.491B	Other fracture of lower end of right femur, initial encounter for open fracture type I or II
S72.491C	Other fracture of lower end of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.492A	Other fracture of lower end of left femur, initial encounter for closed fracture
S72.492B	Other fracture of lower end of left femur, initial encounter for open fracture type I or II
S72.492C	Other fracture of lower end of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.499A	Other fracture of lower end of unspecified femur, initial encounter for closed fracture
S72.499B	Other fracture of lower end of unspecified femur, initial encounter for open fracture type I or II
S72.499C	Other fracture of lower end of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.8X1A	Other fracture of right femur, initial encounter for closed fracture
S72.8X1B	Other fracture of right femur, initial encounter for open fracture type I or II
S72.8X1C	Other fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.8X2A	Other fracture of left femur, initial encounter for closed fracture
S72.8X2B	Other fracture of left femur, initial encounter for open fracture type I or II
S72.8X2C	Other fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.8X9A	Other fracture of unspecified femur, initial encounter for closed fracture
S72.8X9B	Other fracture of unspecified femur, initial encounter for open fracture type I or II
S72.8X9C	Other fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
S72.90XA	Unspecified fracture of unspecified femur, initial encounter for closed fracture
S72.90XB	Unspecified fracture of unspecified femur, initial encounter for open fracture type I or II
S72.90XC	Unspecified fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
*S72.90XE	*Unspecified fracture of unspecified femur, subsequent encounter for open fracture type I or II with routine healing
S72.91XA	Unspecified fracture of right femur, initial encounter for closed fracture



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Code	Description
S72.91XB	Unspecified fracture of right femur, initial encounter for open fracture type I or II
S72.91XC	Unspecified fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
*S72.91XE	*Unspecified fracture of right femur, subsequent encounter for open fracture type I or II with routine healing
S72.92XA	Unspecified fracture of left femur, initial encounter for closed fracture
S72.92XB	Unspecified fracture of left femur, initial encounter for open fracture type I or II
S72.92XC	Unspecified fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC
*S72.92XE	*Unspecified fracture of left femur, subsequent encounter for open fracture type I or II with routine healing
S75.001A	Unspecified injury of femoral artery, right leg, initial encounter
S75.002A	Unspecified injury of femoral artery, left leg, initial encounter
S75.009A	Unspecified injury of femoral artery, unspecified leg, initial encounter
S75.011A	Minor laceration of femoral artery, right leg, initial encounter
S75.012A	Minor laceration of femoral artery, left leg, initial encounter
S75.019A	Minor laceration of femoral artery, unspecified leg, initial encounter
S75.021A	Major laceration of femoral artery, right leg, initial encounter
S75.022A	Major laceration of femoral artery, left leg, initial encounter
S75.029A	Major laceration of femoral artery, unspecified leg, initial encounter
S75.091A	Other specified injury of femoral artery, right leg, initial encounter
S75.092A	Other specified injury of femoral artery, left leg, initial encounter
S75.099A	Other specified injury of femoral artery, unspecified leg, initial encounter
S75.101A	Unspecified injury of femoral vein at hip and thigh level, right leg, initial encounter
S75.102A	Unspecified injury of femoral vein at hip and thigh level, left leg, initial encounter
S75.109A	Unspecified injury of femoral vein at hip and thigh level, unspecified leg, initial encounter
S75.111A	Minor laceration of femoral vein at hip and thigh level, right leg, initial encounter
S75.112A	Minor laceration of femoral vein at hip and thigh level, left leg, initial encounter
S75.119A	Minor laceration of femoral vein at hip and thigh level, unspecified leg, initial encounter
S75.121A	Major laceration of femoral vein at hip and thigh level, right leg, initial encounter
S75.122A	Major laceration of femoral vein at hip and thigh level, left leg, initial encounter
S75.129A	Major laceration of femoral vein at hip and thigh level, unspecified leg, initial encounter
S75.191A	Other specified injury of femoral vein at hip and thigh level, right leg, initial encounter

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Code	Description
S75.192A	Other specified injury of femoral vein at hip and thigh level, left leg, initial encounter
S75.199A	Other specified injury of femoral vein at hip and thigh level, unspecified leg, initial encounter
S75.201A	Unspecified injury of greater saphenous vein at hip and thigh level, right leg, initial encounter
S75.202A	Unspecified injury of greater saphenous vein at hip and thigh level, left leg, initial encounter
S75.209A	Unspecified injury of greater saphenous vein at hip and thigh level, unspecified leg, initial encounter
S75.211A	Minor laceration of greater saphenous vein at hip and thigh level, right leg, initial encounter
S75.212A	Minor laceration of greater saphenous vein at hip and thigh level, left leg, initial encounter
S75.219A	Minor laceration of greater saphenous vein at hip and thigh level, unspecified leg, initial encounter
S75.221A	Major laceration of greater saphenous vein at hip and thigh level, right leg, initial encounter
S75.222A	Major laceration of greater saphenous vein at hip and thigh level, left leg, initial encounter
S75.229A	Major laceration of greater saphenous vein at hip and thigh level, unspecified leg, initial encounter
S75.291A	Other specified injury of greater saphenous vein at hip and thigh level, right leg, initial encounter
S75.292A	Other specified injury of greater saphenous vein at hip and thigh level, left leg, initial encounter
S75.299A	Other specified injury of greater saphenous vein at hip and thigh level, unspecified leg, initial encounter
S75.801A	Unspecified injury of other blood vessels at hip and thigh level, right leg, initial encounter
S75.802A	Unspecified injury of other blood vessels at hip and thigh level, left leg, initial encounter
S75.809A	Unspecified injury of other blood vessels at hip and thigh level, unspecified leg, initial encounter
S75.811A	Laceration of other blood vessels at hip and thigh level, right leg, initial encounter
S75.812A	Laceration of other blood vessels at hip and thigh level, left leg, initial encounter
S75.819A	Laceration of other blood vessels at hip and thigh level, unspecified leg, initial encounter
S75.891A	Other specified injury of other blood vessels at hip and thigh level, right leg, initial encounter
S75.892A	Other specified injury of other blood vessels at hip and thigh level, left leg, initial encounter



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Code	Description
S75.899A	Other specified injury of other blood vessels at hip and thigh level, unspecified leg, initial encounter
S75.901A	Unspecified injury of unspecified blood vessel at hip and thigh level, right leg, initial encounter
S75.902A	Unspecified injury of unspecified blood vessel at hip and thigh level, left leg, initial encounter
S75.909A	Unspecified injury of unspecified blood vessel at hip and thigh level, unspecified leg, initial encounter
S75.911A	Laceration of unspecified blood vessel at hip and thigh level, right leg, initial encounter
S75.912A	Laceration of unspecified blood vessel at hip and thigh level, left leg, initial encounter
S75.919A	Laceration of unspecified blood vessel at hip and thigh level, unspecified leg, initial encounter
S75.991A	Other specified injury of unspecified blood vessel at hip and thigh level, right leg, initial encounter
S75.992A	Other specified injury of unspecified blood vessel at hip and thigh level, left leg, initial encounter
S75.999A	Other specified injury of unspecified blood vessel at hip and thigh level, unspecified leg, initial encounter
S77.00XA	Crushing injury of unspecified hip, initial encounter
S77.01XA	Crushing injury of right hip, initial encounter
S77.02XA	Crushing injury of left hip, initial encounter
S77.10XA	Crushing injury of unspecified thigh, initial encounter
S77.11XA	Crushing injury of right thigh, initial encounter
S77.12XA	Crushing injury of left thigh, initial encounter
S77.20XA	Crushing injury of unspecified hip with thigh, initial encounter
S77.21XA	Crushing injury of right hip with thigh, initial encounter
S77.22XA	Crushing injury of left hip with thigh, initial encounter
S79.001A	Unspecified physeal fracture of upper end of right femur, initial encounter for closed fracture
S79.002A	Unspecified physeal fracture of upper end of left femur, initial encounter for closed fracture
S79.009A	Unspecified physeal fracture of upper end of unspecified femur, initial encounter for closed fracture
S79.011A	Salter-Harris Type I physeal fracture of upper end of right femur, initial encounter for closed fracture



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Code	Description
S79.012A	Salter-Harris Type I physeal fracture of upper end of left femur, initial encounter for closed fracture
S79.019A	Salter-Harris Type I physeal fracture of upper end of unspecified femur, initial encounter for closed fracture
S79.091A	Other physeal fracture of upper end of right femur, initial encounter for closed fracture
S79.092A	Other physeal fracture of upper end of left femur, initial encounter for closed fracture
S79.099A	Other physeal fracture of upper end of unspecified femur, initial encounter for closed fracture
S79.101A	Unspecified physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.102A	Unspecified physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.109A	Unspecified physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.111A	Salter-Harris Type I physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.112A	Salter-Harris Type I physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.119A	Salter-Harris Type I physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.121A	Salter-Harris Type II physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.122A	Salter-Harris Type II physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.129A	Salter-Harris Type II physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.131A	Salter-Harris Type III physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.132A	Salter-Harris Type III physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.139A	Salter-Harris Type III physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.141A	Salter-Harris Type IV physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.142A	Salter-Harris Type IV physeal fracture of lower end of left femur, initial encounter for closed fracture



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Code	Description
S79.149A	Salter-Harris Type IV physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S79.191A	Other physeal fracture of lower end of right femur, initial encounter for closed fracture
S79.192A	Other physeal fracture of lower end of left femur, initial encounter for closed fracture
S79.199A	Other physeal fracture of lower end of unspecified femur, initial encounter for closed fracture
S80.00XA	Contusion of unspecified knee, initial encounter
S80.01XA	Contusion of right knee, initial encounter
S80.02XA	Contusion of left knee, initial encounter
S80.10XA	Contusion of unspecified lower leg, initial encounter
S80.11XA	Contusion of right lower leg, initial encounter
S80.12XA	Contusion of left lower leg, initial encounter
S82.101A	Unspecified fracture of upper end of right tibia, initial encounter for closed fracture
S82.101B	Unspecified fracture of upper end of right tibia, initial encounter for open fracture type I or II
S82.101C	Unspecified fracture of upper end of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.102A	Unspecified fracture of upper end of left tibia, initial encounter for closed fracture
S82.102B	Unspecified fracture of upper end of left tibia, initial encounter for open fracture type I or II
S82.102C	Unspecified fracture of upper end of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.109A	Unspecified fracture of upper end of unspecified tibia, initial encounter for closed fracture
S82.109B	Unspecified fracture of upper end of unspecified tibia, initial encounter for open fracture type I or II
S82.109C	Unspecified fracture of upper end of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.111A	Displaced fracture of right tibial spine, initial encounter for closed fracture
S82.111B	Displaced fracture of right tibial spine, initial encounter for open fracture type I or II
S82.111C	Displaced fracture of right tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.112A	Displaced fracture of left tibial spine, initial encounter for closed fracture
S82.112B	Displaced fracture of left tibial spine, initial encounter for open fracture type I or II
S82.112C	Displaced fracture of left tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S82.113A	Displaced fracture of unspecified tibial spine, initial encounter for closed fracture
S82.113B	Displaced fracture of unspecified tibial spine, initial encounter for open fracture type I or II
S82.113C	Displaced fracture of unspecified tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.114A	Nondisplaced fracture of right tibial spine, initial encounter for closed fracture
S82.114B	Nondisplaced fracture of right tibial spine, initial encounter for open fracture type I or II
S82.114C	Nondisplaced fracture of right tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.115A	Nondisplaced fracture of left tibial spine, initial encounter for closed fracture
S82.115B	Nondisplaced fracture of left tibial spine, initial encounter for open fracture type I or II
S82.115C	Nondisplaced fracture of left tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.116A	Nondisplaced fracture of unspecified tibial spine, initial encounter for closed fracture
S82.116B	Nondisplaced fracture of unspecified tibial spine, initial encounter for open fracture type I or II
S82.116C	Nondisplaced fracture of unspecified tibial spine, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.121A	Displaced fracture of lateral condyle of right tibia, initial encounter for closed fracture
S82.121B	Displaced fracture of lateral condyle of right tibia, initial encounter for open fracture type I or II
S82.121C	Displaced fracture of lateral condyle of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.122A	Displaced fracture of lateral condyle of left tibia, initial encounter for closed fracture
S82.122B	Displaced fracture of lateral condyle of left tibia, initial encounter for open fracture type I or II
S82.122C	Displaced fracture of lateral condyle of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.123A	Displaced fracture of lateral condyle of unspecified tibia, initial encounter for closed fracture
S82.123B	Displaced fracture of lateral condyle of unspecified tibia, initial encounter for open fracture type I or II
S82.123C	Displaced fracture of lateral condyle of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.124A	Nondisplaced fracture of lateral condyle of right tibia, initial encounter for closed fracture



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Code	Description
S82.124B	Nondisplaced fracture of lateral condyle of right tibia, initial encounter for open fracture type I or II
S82.124C	Nondisplaced fracture of lateral condyle of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.125A	Nondisplaced fracture of lateral condyle of left tibia, initial encounter for closed fracture
S82.125B	Nondisplaced fracture of lateral condyle of left tibia, initial encounter for open fracture type I or II
S82.125C	Nondisplaced fracture of lateral condyle of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.126A	Nondisplaced fracture of lateral condyle of unspecified tibia, initial encounter for closed fracture
S82.126B	Nondisplaced fracture of lateral condyle of unspecified tibia, initial encounter for open fracture type I or II
S82.126C	Nondisplaced fracture of lateral condyle of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.131A	Displaced fracture of medial condyle of right tibia, initial encounter for closed fracture
S82.131B	Displaced fracture of medial condyle of right tibia, initial encounter for open fracture type I or II
S82.131C	Displaced fracture of medial condyle of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.132A	Displaced fracture of medial condyle of left tibia, initial encounter for closed fracture
S82.132B	Displaced fracture of medial condyle of left tibia, initial encounter for open fracture type I or II
S82.132C	Displaced fracture of medial condyle of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.133A	Displaced fracture of medial condyle of unspecified tibia, initial encounter for closed fracture
S82.133B	Displaced fracture of medial condyle of unspecified tibia, initial encounter for open fracture type I or II
S82.133C	Displaced fracture of medial condyle of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.134A	Nondisplaced fracture of medial condyle of right tibia, initial encounter for closed fracture
S82.134B	Nondisplaced fracture of medial condyle of right tibia, initial encounter for open fracture type I or II
S82.134C	Nondisplaced fracture of medial condyle of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S82.135A	Nondisplaced fracture of medial condyle of left tibia, initial encounter for closed fracture
S82.135B	Nondisplaced fracture of medial condyle of left tibia, initial encounter for open fracture type I or II
S82.135C	Nondisplaced fracture of medial condyle of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.136A	Nondisplaced fracture of medial condyle of unspecified tibia, initial encounter for closed fracture
S82.136B	Nondisplaced fracture of medial condyle of unspecified tibia, initial encounter for open fracture type I or II
S82.136C	Nondisplaced fracture of medial condyle of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.141A	Displaced bicondylar fracture of right tibia, initial encounter for closed fracture
S82.141B	Displaced bicondylar fracture of right tibia, initial encounter for open fracture type I or II
S82.141C	Displaced bicondylar fracture of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.142A	Displaced bicondylar fracture of left tibia, initial encounter for closed fracture
S82.142B	Displaced bicondylar fracture of left tibia, initial encounter for open fracture type I or II
S82.142C	Displaced bicondylar fracture of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.143A	Displaced bicondylar fracture of unspecified tibia, initial encounter for closed fracture
S82.143B	Displaced bicondylar fracture of unspecified tibia, initial encounter for open fracture type I or II
S82.143C	Displaced bicondylar fracture of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.144A	Nondisplaced bicondylar fracture of right tibia, initial encounter for closed fracture
S82.144B	Nondisplaced bicondylar fracture of right tibia, initial encounter for open fracture type I or II
S82.144C	Nondisplaced bicondylar fracture of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.145A	Nondisplaced bicondylar fracture of left tibia, initial encounter for closed fracture
S82.145B	Nondisplaced bicondylar fracture of left tibia, initial encounter for open fracture type I or II
S82.145C	Nondisplaced bicondylar fracture of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.146A	Nondisplaced bicondylar fracture of unspecified tibia, initial encounter for closed fracture



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Code	Description
S82.146B	Nondisplaced bicondylar fracture of unspecified tibia, initial encounter for open fracture type I or II
S82.146C	Nondisplaced bicondylar fracture of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.151A	Displaced fracture of right tibial tuberosity, initial encounter for closed fracture
S82.151B	Displaced fracture of right tibial tuberosity, initial encounter for open fracture type I or II
S82.151C	Displaced fracture of right tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.152A	Displaced fracture of left tibial tuberosity, initial encounter for closed fracture
S82.152B	Displaced fracture of left tibial tuberosity, initial encounter for open fracture type I or II
S82.152C	Displaced fracture of left tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.153A	Displaced fracture of unspecified tibial tuberosity, initial encounter for closed fracture
S82.153B	Displaced fracture of unspecified tibial tuberosity, initial encounter for open fracture type I or II
S82.153C	Displaced fracture of unspecified tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.154A	Nondisplaced fracture of right tibial tuberosity, initial encounter for closed fracture
S82.154B	Nondisplaced fracture of right tibial tuberosity, initial encounter for open fracture type I or II
S82.154C	Nondisplaced fracture of right tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.155A	Nondisplaced fracture of left tibial tuberosity, initial encounter for closed fracture
S82.155B	Nondisplaced fracture of left tibial tuberosity, initial encounter for open fracture type I or II
S82.155C	Nondisplaced fracture of left tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.156A	Nondisplaced fracture of unspecified tibial tuberosity, initial encounter for closed fracture
S82.156B	Nondisplaced fracture of unspecified tibial tuberosity, initial encounter for open fracture type I or II
S82.156C	Nondisplaced fracture of unspecified tibial tuberosity, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.161A	Torus fracture of upper end of right tibia, initial encounter for closed fracture
S82.162A	Torus fracture of upper end of left tibia, initial encounter for closed fracture
S82.169A	Torus fracture of upper end of unspecified tibia, initial encounter for closed fracture
S82.191A	Other fracture of upper end of right tibia, initial encounter for closed fracture

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Code	Description
S82.191B	Other fracture of upper end of right tibia, initial encounter for open fracture type I or II
S82.191C	Other fracture of upper end of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.192A	Other fracture of upper end of left tibia, initial encounter for closed fracture
S82.192B	Other fracture of upper end of left tibia, initial encounter for open fracture type I or II
S82.192C	Other fracture of upper end of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.199A	Other fracture of upper end of unspecified tibia, initial encounter for closed fracture
S82.199B	Other fracture of upper end of unspecified tibia, initial encounter for open fracture type I or II
S82.199C	Other fracture of upper end of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.201A	Unspecified fracture of shaft of right tibia, initial encounter for closed fracture
S82.201B	Unspecified fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.201C	Unspecified fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.202A	Unspecified fracture of shaft of left tibia, initial encounter for closed fracture
S82.202B	Unspecified fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.202C	Unspecified fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.209A	Unspecified fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.209B	Unspecified fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.209C	Unspecified fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.221A	Displaced transverse fracture of shaft of right tibia, initial encounter for closed fracture
S82.221B	Displaced transverse fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.221C	Displaced transverse fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.222A	Displaced transverse fracture of shaft of left tibia, initial encounter for closed fracture
S82.222B	Displaced transverse fracture of shaft of left tibia, initial encounter for open fracture type I or II



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Code	Description
S82.222C	Displaced transverse fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.223A	Displaced transverse fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.223B	Displaced transverse fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.223C	Displaced transverse fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.224A	Nondisplaced transverse fracture of shaft of right tibia, initial encounter for closed fracture
S82.224B	Nondisplaced transverse fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.224C	Nondisplaced transverse fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.225A	Nondisplaced transverse fracture of shaft of left tibia, initial encounter for closed fracture
S82.225B	Nondisplaced transverse fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.225C	Nondisplaced transverse fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.226A	Nondisplaced transverse fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.226B	Nondisplaced transverse fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.226C	Nondisplaced transverse fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.231A	Displaced oblique fracture of shaft of right tibia, initial encounter for closed fracture
S82.231B	Displaced oblique fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.231C	Displaced oblique fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.232A	Displaced oblique fracture of shaft of left tibia, initial encounter for closed fracture
S82.232B	Displaced oblique fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.232C	Displaced oblique fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.233A	Displaced oblique fracture of shaft of unspecified tibia, initial encounter for closed fracture



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Code	Description
S82.233B	Displaced oblique fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.233C	Displaced oblique fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.234A	Nondisplaced oblique fracture of shaft of right tibia, initial encounter for closed fracture
S82.234B	Nondisplaced oblique fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.234C	Nondisplaced oblique fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.235A	Nondisplaced oblique fracture of shaft of left tibia, initial encounter for closed fracture
S82.235B	Nondisplaced oblique fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.235C	Nondisplaced oblique fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.236A	Nondisplaced oblique fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.236B	Nondisplaced oblique fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.236C	Nondisplaced oblique fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.241A	Displaced spiral fracture of shaft of right tibia, initial encounter for closed fracture
S82.241B	Displaced spiral fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.241C	Displaced spiral fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.242A	Displaced spiral fracture of shaft of left tibia, initial encounter for closed fracture
S82.242B	Displaced spiral fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.242C	Displaced spiral fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.243A	Displaced spiral fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.243B	Displaced spiral fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.243C	Displaced spiral fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.244A	Nondisplaced spiral fracture of shaft of right tibia, initial encounter for closed fracture



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Code	Description
S82.244B	Nondisplaced spiral fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.244C	Nondisplaced spiral fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.245A	Nondisplaced spiral fracture of shaft of left tibia, initial encounter for closed fracture
S82.245B	Nondisplaced spiral fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.245C	Nondisplaced spiral fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.246A	Nondisplaced spiral fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.246B	Nondisplaced spiral fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.246C	Nondisplaced spiral fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.251A	Displaced comminuted fracture of shaft of right tibia, initial encounter for closed fracture
S82.251B	Displaced comminuted fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.251C	Displaced comminuted fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.252A	Displaced comminuted fracture of shaft of left tibia, initial encounter for closed fracture
S82.252B	Displaced comminuted fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.252C	Displaced comminuted fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.253A	Displaced comminuted fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.253B	Displaced comminuted fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.253C	Displaced comminuted fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.254A	Nondisplaced comminuted fracture of shaft of right tibia, initial encounter for closed fracture
S82.254B	Nondisplaced comminuted fracture of shaft of right tibia, initial encounter for open fracture type I or II



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Code	Description
S82.254C	Nondisplaced comminuted fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.255A	Nondisplaced comminuted fracture of shaft of left tibia, initial encounter for closed fracture
S82.255B	Nondisplaced comminuted fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.255C	Nondisplaced comminuted fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.256A	Nondisplaced comminuted fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.256B	Nondisplaced comminuted fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.256C	Nondisplaced comminuted fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.261A	Displaced segmental fracture of shaft of right tibia, initial encounter for closed fracture
S82.261B	Displaced segmental fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.261C	Displaced segmental fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.262A	Displaced segmental fracture of shaft of left tibia, initial encounter for closed fracture
S82.262B	Displaced segmental fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.262C	Displaced segmental fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.263A	Displaced segmental fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.263B	Displaced segmental fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.263C	Displaced segmental fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.264A	Nondisplaced segmental fracture of shaft of right tibia, initial encounter for closed fracture
S82.264B	Nondisplaced segmental fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.264C	Nondisplaced segmental fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.265A	Nondisplaced segmental fracture of shaft of left tibia, initial encounter for closed fracture



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Code	Description
S82.265B	Nondisplaced segmental fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.265C	Nondisplaced segmental fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.266A	Nondisplaced segmental fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.266B	Nondisplaced segmental fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.266C	Nondisplaced segmental fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.291A	Other fracture of shaft of right tibia, initial encounter for closed fracture
S82.291B	Other fracture of shaft of right tibia, initial encounter for open fracture type I or II
S82.291C	Other fracture of shaft of right tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.292A	Other fracture of shaft of left tibia, initial encounter for closed fracture
S82.292B	Other fracture of shaft of left tibia, initial encounter for open fracture type I or II
S82.292C	Other fracture of shaft of left tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.299A	Other fracture of shaft of unspecified tibia, initial encounter for closed fracture
S82.299B	Other fracture of shaft of unspecified tibia, initial encounter for open fracture type I or II
S82.299C	Other fracture of shaft of unspecified tibia, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.311A	Torus fracture of lower end of right tibia, initial encounter for closed fracture
S82.312A	Torus fracture of lower end of left tibia, initial encounter for closed fracture
S82.319A	Torus fracture of lower end of unspecified tibia, initial encounter for closed fracture
S82.401A	Unspecified fracture of shaft of right fibula, initial encounter for closed fracture
S82.401B	Unspecified fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.401C	Unspecified fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.402A	Unspecified fracture of shaft of left fibula, initial encounter for closed fracture
S82.402B	Unspecified fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.402C	Unspecified fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.409A	Unspecified fracture of shaft of unspecified fibula, initial encounter for closed fracture



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Code	Description
S82.409B	Unspecified fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.409C	Unspecified fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.421A	Displaced transverse fracture of shaft of right fibula, initial encounter for closed fracture
S82.421B	Displaced transverse fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.421C	Displaced transverse fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.422A	Displaced transverse fracture of shaft of left fibula, initial encounter for closed fracture
S82.422B	Displaced transverse fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.422C	Displaced transverse fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.423A	Displaced transverse fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.423B	Displaced transverse fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.423C	Displaced transverse fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.424A	Nondisplaced transverse fracture of shaft of right fibula, initial encounter for closed fracture
S82.424B	Nondisplaced transverse fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.424C	Nondisplaced transverse fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.425A	Nondisplaced transverse fracture of shaft of left fibula, initial encounter for closed fracture
S82.425B	Nondisplaced transverse fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.425C	Nondisplaced transverse fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.426A	Nondisplaced transverse fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.426B	Nondisplaced transverse fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.426C	Nondisplaced transverse fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S82.431A	Displaced oblique fracture of shaft of right fibula, initial encounter for closed fracture
S82.431B	Displaced oblique fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.431C	Displaced oblique fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.432A	Displaced oblique fracture of shaft of left fibula, initial encounter for closed fracture
S82.432B	Displaced oblique fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.432C	Displaced oblique fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.433A	Displaced oblique fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.433B	Displaced oblique fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.433C	Displaced oblique fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.434A	Nondisplaced oblique fracture of shaft of right fibula, initial encounter for closed fracture
S82.434B	Nondisplaced oblique fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.434C	Nondisplaced oblique fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.435A	Nondisplaced oblique fracture of shaft of left fibula, initial encounter for closed fracture
S82.435B	Nondisplaced oblique fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.435C	Nondisplaced oblique fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.436A	Nondisplaced oblique fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.436B	Nondisplaced oblique fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.436C	Nondisplaced oblique fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.441A	Displaced spiral fracture of shaft of right fibula, initial encounter for closed fracture
S82.441B	Displaced spiral fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.441C	Displaced spiral fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC



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Code	Description
S82.442A	Displaced spiral fracture of shaft of left fibula, initial encounter for closed fracture
S82.442B	Displaced spiral fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.442C	Displaced spiral fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.443A	Displaced spiral fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.443B	Displaced spiral fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.443C	Displaced spiral fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.444A	Nondisplaced spiral fracture of shaft of right fibula, initial encounter for closed fracture
S82.444B	Nondisplaced spiral fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.444C	Nondisplaced spiral fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.445A	Nondisplaced spiral fracture of shaft of left fibula, initial encounter for closed fracture
S82.445B	Nondisplaced spiral fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.445C	Nondisplaced spiral fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.446A	Nondisplaced spiral fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.446B	Nondisplaced spiral fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.446C	Nondisplaced spiral fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.451A	Displaced comminuted fracture of shaft of right fibula, initial encounter for closed fracture
S82.451B	Displaced comminuted fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.451C	Displaced comminuted fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.452A	Displaced comminuted fracture of shaft of left fibula, initial encounter for closed fracture
S82.452B	Displaced comminuted fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.452C	Displaced comminuted fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC

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Code	Description
S82.453A	Displaced comminuted fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.453B	Displaced comminuted fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.453C	Displaced comminuted fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.454A	Nondisplaced comminuted fracture of shaft of right fibula, initial encounter for closed fracture
S82.454B	Nondisplaced comminuted fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.454C	Nondisplaced comminuted fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.455A	Nondisplaced comminuted fracture of shaft of left fibula, initial encounter for closed fracture
S82.455B	Nondisplaced comminuted fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.455C	Nondisplaced comminuted fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.456A	Nondisplaced comminuted fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.456B	Nondisplaced comminuted fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.456C	Nondisplaced comminuted fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.461A	Displaced segmental fracture of shaft of right fibula, initial encounter for closed fracture
S82.461B	Displaced segmental fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.461C	Displaced segmental fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.462A	Displaced segmental fracture of shaft of left fibula, initial encounter for closed fracture
S82.462B	Displaced segmental fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.462C	Displaced segmental fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.463A	Displaced segmental fracture of shaft of unspecified fibula, initial encounter for closed fracture



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Code	Description
S82.463B	Displaced segmental fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.463C	Displaced segmental fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.464A	Nondisplaced segmental fracture of shaft of right fibula, initial encounter for closed fracture
S82.464B	Nondisplaced segmental fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.464C	Nondisplaced segmental fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.465A	Nondisplaced segmental fracture of shaft of left fibula, initial encounter for closed fracture
S82.465B	Nondisplaced segmental fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.465C	Nondisplaced segmental fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.466A	Nondisplaced segmental fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.466B	Nondisplaced segmental fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.466C	Nondisplaced segmental fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.491A	Other fracture of shaft of right fibula, initial encounter for closed fracture
S82.491B	Other fracture of shaft of right fibula, initial encounter for open fracture type I or II
S82.491C	Other fracture of shaft of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.492A	Other fracture of shaft of left fibula, initial encounter for closed fracture
S82.492B	Other fracture of shaft of left fibula, initial encounter for open fracture type I or II
S82.492C	Other fracture of shaft of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.499A	Other fracture of shaft of unspecified fibula, initial encounter for closed fracture
S82.499B	Other fracture of shaft of unspecified fibula, initial encounter for open fracture type I or II
S82.499C	Other fracture of shaft of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.811A	Torus fracture of upper end of right fibula, initial encounter for closed fracture
S82.812A	Torus fracture of upper end of left fibula, initial encounter for closed fracture
S82.819A	Torus fracture of upper end of unspecified fibula, initial encounter for closed fracture
S82.821A	Torus fracture of lower end of right fibula, initial encounter for closed fracture

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Code	Description
S82.822A	Torus fracture of lower end of left fibula, initial encounter for closed fracture
S82.829A	Torus fracture of lower end of unspecified fibula, initial encounter for closed fracture
S82.831A	Other fracture of upper and lower end of right fibula, initial encounter for closed fracture
S82.831B	Other fracture of upper and lower end of right fibula, initial encounter for open fracture type I or II
S82.831C	Other fracture of upper and lower end of right fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.832A	Other fracture of upper and lower end of left fibula, initial encounter for closed fracture
S82.832B	Other fracture of upper and lower end of left fibula, initial encounter for open fracture type I or II
S82.832C	Other fracture of upper and lower end of left fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.839A	Other fracture of upper and lower end of unspecified fibula, initial encounter for closed fracture
S82.839B	Other fracture of upper and lower end of unspecified fibula, initial encounter for open fracture type I or II
S82.839C	Other fracture of upper and lower end of unspecified fibula, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.861A	Displaced Maisonneuve's fracture of right leg, initial encounter for closed fracture
S82.861B	Displaced Maisonneuve's fracture of right leg, initial encounter for open fracture type I or II
S82.861C	Displaced Maisonneuve's fracture of right leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.862A	Displaced Maisonneuve's fracture of left leg, initial encounter for closed fracture
S82.862B	Displaced Maisonneuve's fracture of left leg, initial encounter for open fracture type I or II
S82.862C	Displaced Maisonneuve's fracture of left leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.863A	Displaced Maisonneuve's fracture of unspecified leg, initial encounter for closed fracture
S82.863B	Displaced Maisonneuve's fracture of unspecified leg, initial encounter for open fracture type I or II
S82.863C	Displaced Maisonneuve's fracture of unspecified leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.864A	Nondisplaced Maisonneuve's fracture of right leg, initial encounter for closed fracture
S82.864B	Nondisplaced Maisonneuve's fracture of right leg, initial encounter for open fracture type I or II

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Code	Description
S82.864C	Nondisplaced Maisonneuve's fracture of right leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.865A	Nondisplaced Maisonneuve's fracture of left leg, initial encounter for closed fracture
S82.865B	Nondisplaced Maisonneuve's fracture of left leg, initial encounter for open fracture type I or II
S82.865C	Nondisplaced Maisonneuve's fracture of left leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.866A	Nondisplaced Maisonneuve's fracture of unspecified leg, initial encounter for closed fracture
S82.866B	Nondisplaced Maisonneuve's fracture of unspecified leg, initial encounter for open fracture type I or II
S82.866C	Nondisplaced Maisonneuve's fracture of unspecified leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.90XA	Unspecified fracture of unspecified lower leg, initial encounter for closed fracture
S82.90XB	Unspecified fracture of unspecified lower leg, initial encounter for open fracture type I or II
S82.90XC	Unspecified fracture of unspecified lower leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.91XA	Unspecified fracture of right lower leg, initial encounter for closed fracture
S82.91XB	Unspecified fracture of right lower leg, initial encounter for open fracture type I or II
S82.91XC	Unspecified fracture of right lower leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S82.92XA	Unspecified fracture of left lower leg, initial encounter for closed fracture
S82.92XB	Unspecified fracture of left lower leg, initial encounter for open fracture type I or II
S82.92XC	Unspecified fracture of left lower leg, initial encounter for open fracture type IIIA, IIIB, or IIIC
S85.001A	Unspecified injury of popliteal artery, right leg, initial encounter
S85.002A	Unspecified injury of popliteal artery, left leg, initial encounter
S85.009A	Unspecified injury of popliteal artery, unspecified leg, initial encounter
S85.011A	Laceration of popliteal artery, right leg, initial encounter
S85.012A	Laceration of popliteal artery, left leg, initial encounter
S85.019A	Laceration of popliteal artery, unspecified leg, initial encounter
S85.091A	Other specified injury of popliteal artery, right leg, initial encounter
S85.092A	Other specified injury of popliteal artery, left leg, initial encounter

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Code	Description
S85.099A	Other specified injury of popliteal artery, unspecified leg, initial encounter
S85.101A	Unspecified injury of unspecified tibial artery, right leg, initial encounter
S85.102A	Unspecified injury of unspecified tibial artery, left leg, initial encounter
S85.109A	Unspecified injury of unspecified tibial artery, unspecified leg, initial encounter
S85.111A	Laceration of unspecified tibial artery, right leg, initial encounter
S85.112A	Laceration of unspecified tibial artery, left leg, initial encounter
S85.119A	Laceration of unspecified tibial artery, unspecified leg, initial encounter
S85.121A	Other specified injury of unspecified tibial artery, right leg, initial encounter
S85.122A	Other specified injury of unspecified tibial artery, left leg, initial encounter
S85.129A	Other specified injury of unspecified tibial artery, unspecified leg, initial encounter
S85.131A	Unspecified injury of anterior tibial artery, right leg, initial encounter
S85.132A	Unspecified injury of anterior tibial artery, left leg, initial encounter
S85.139A	Unspecified injury of anterior tibial artery, unspecified leg, initial encounter
S85.141A	Laceration of anterior tibial artery, right leg, initial encounter
S85.142A	Laceration of anterior tibial artery, left leg, initial encounter
S85.149A	Laceration of anterior tibial artery, unspecified leg, initial encounter
S85.151A	Other specified injury of anterior tibial artery, right leg, initial encounter
S85.152A	Other specified injury of anterior tibial artery, left leg, initial encounter
S85.159A	Other specified injury of anterior tibial artery, unspecified leg, initial encounter
S85.161A	Unspecified injury of posterior tibial artery, right leg, initial encounter
S85.162A	Unspecified injury of posterior tibial artery, left leg, initial encounter
S85.169A	Unspecified injury of posterior tibial artery, unspecified leg, initial encounter
S85.171A	Laceration of posterior tibial artery, right leg, initial encounter
S85.172A	Laceration of posterior tibial artery, left leg, initial encounter
S85.179A	Laceration of posterior tibial artery, unspecified leg, initial encounter
S85.181A	Other specified injury of posterior tibial artery, right leg, initial encounter
S85.182A	Other specified injury of posterior tibial artery, left leg, initial encounter
S85.189A	Other specified injury of posterior tibial artery, unspecified leg, initial encounter
S85.201A	Unspecified injury of peroneal artery, right leg, initial encounter
S85.202A	Unspecified injury of peroneal artery, left leg, initial encounter



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Code	Description
S85.209A	Unspecified injury of peroneal artery, unspecified leg, initial encounter
S85.211A	Laceration of peroneal artery, right leg, initial encounter
S85.212A	Laceration of peroneal artery, left leg, initial encounter
S85.219A	Laceration of peroneal artery, unspecified leg, initial encounter
S85.291A	Other specified injury of peroneal artery, right leg, initial encounter
S85.292A	Other specified injury of peroneal artery, left leg, initial encounter
S85.299A	Other specified injury of peroneal artery, unspecified leg, initial encounter
S85.301A	Unspecified injury of greater saphenous vein at lower leg level, right leg, initial encounter
S85.302A	Unspecified injury of greater saphenous vein at lower leg level, left leg, initial encounter
S85.309A	Unspecified injury of greater saphenous vein at lower leg level, unspecified leg, initial encounter
S85.311A	Laceration of greater saphenous vein at lower leg level, right leg, initial encounter
S85.312A	Laceration of greater saphenous vein at lower leg level, left leg, initial encounter
S85.319A	Laceration of greater saphenous vein at lower leg level, unspecified leg, initial encounter
S85.391A	Other specified injury of greater saphenous vein at lower leg level, right leg, initial encounter
S85.392A	Other specified injury of greater saphenous vein at lower leg level, left leg, initial encounter
S85.399A	Other specified injury of greater saphenous vein at lower leg level, unspecified leg, initial encounter
S85.401A	Unspecified injury of lesser saphenous vein at lower leg level, right leg, initial encounter
S85.402A	Unspecified injury of lesser saphenous vein at lower leg level, left leg, initial encounter
S85.409A	Unspecified injury of lesser saphenous vein at lower leg level, unspecified leg, initial encounter
S85.411A	Laceration of lesser saphenous vein at lower leg level, right leg, initial encounter
S85.412A	Laceration of lesser saphenous vein at lower leg level, left leg, initial encounter
S85.419A	Laceration of lesser saphenous vein at lower leg level, unspecified leg, initial encounter
S85.491A	Other specified injury of lesser saphenous vein at lower leg level, right leg, initial encounter
S85.492A	Other specified injury of lesser saphenous vein at lower leg level, left leg, initial encounter
S85.499A	Other specified injury of lesser saphenous vein at lower leg level, unspecified leg, initial encounter
S85.501A	Unspecified injury of popliteal vein, right leg, initial encounter
S85.502A	Unspecified injury of popliteal vein, left leg, initial encounter

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Code	Description
S85.509A	Unspecified injury of popliteal vein, unspecified leg, initial encounter
S85.511A	Laceration of popliteal vein, right leg, initial encounter
S85.512A	Laceration of popliteal vein, left leg, initial encounter
S85.519A	Laceration of popliteal vein, unspecified leg, initial encounter
S85.591A	Other specified injury of popliteal vein, right leg, initial encounter
S85.592A	Other specified injury of popliteal vein, left leg, initial encounter
S85.599A	Other specified injury of popliteal vein, unspecified leg, initial encounter
S85.801A	Unspecified injury of other blood vessels at lower leg level, right leg, initial encounter
S85.802A	Unspecified injury of other blood vessels at lower leg level, left leg, initial encounter
S85.809A	Unspecified injury of other blood vessels at lower leg level, unspecified leg, initial encounter
S85.811A	Laceration of other blood vessels at lower leg level, right leg, initial encounter
S85.812A	Laceration of other blood vessels at lower leg level, left leg, initial encounter
S85.819A	Laceration of other blood vessels at lower leg level, unspecified leg, initial encounter
S85.891A	Other specified injury of other blood vessels at lower leg level, right leg, initial encounter
S85.892A	Other specified injury of other blood vessels at lower leg level, left leg, initial encounter
S85.899A	Other specified injury of other blood vessels at lower leg level, unspecified leg, initial encounter
S85.901A	Unspecified injury of unspecified blood vessel at lower leg level, right leg, initial encounter
S85.902A	Unspecified injury of unspecified blood vessel at lower leg level, left leg, initial encounter
S85.909A	Unspecified injury of unspecified blood vessel at lower leg level, unspecified leg, initial encounter
S85.911A	Laceration of unspecified blood vessel at lower leg level, right leg, initial encounter
S85.912A	Laceration of unspecified blood vessel at lower leg level, left leg, initial encounter
S85.919A	Laceration of unspecified blood vessel at lower leg level, unspecified leg, initial encounter
S85.991A	Other specified injury of unspecified blood vessel at lower leg level, right leg, initial encounter
S85.992A	Other specified injury of unspecified blood vessel at lower leg level, left leg, initial encounter
S85.999A	Other specified injury of unspecified blood vessel at lower leg level, unspecified leg, initial encounter
S87.00XA	Crushing injury of unspecified knee, initial encounter



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Code	Description
S87.01XA	Crushing injury of right knee, initial encounter
S87.02XA	Crushing injury of left knee, initial encounter
S87.80XA	Crushing injury of unspecified lower leg, initial encounter
S87.81XA	Crushing injury of right lower leg, initial encounter
S87.82XA	Crushing injury of left lower leg, initial encounter
S89.001A	Unspecified physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.002A	Unspecified physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.009A	Unspecified physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.011A	Salter-Harris Type I physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.012A	Salter-Harris Type I physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.019A	Salter-Harris Type I physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.021A	Salter-Harris Type II physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.022A	Salter-Harris Type II physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.029A	Salter-Harris Type II physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.031A	Salter-Harris Type III physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.032A	Salter-Harris Type III physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.039A	Salter-Harris Type III physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.041A	Salter-Harris Type IV physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.042A	Salter-Harris Type IV physeal fracture of upper end of left tibia, initial encounter for closed fracture
S89.049A	Salter-Harris Type IV physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.091A	Other physeal fracture of upper end of right tibia, initial encounter for closed fracture
S89.092A	Other physeal fracture of upper end of left tibia, initial encounter for closed fracture

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Code	Description
S89.099A	Other physeal fracture of upper end of unspecified tibia, initial encounter for closed fracture
S89.201A	Unspecified physeal fracture of upper end of right fibula, initial encounter for closed fracture
S89.202A	Unspecified physeal fracture of upper end of left fibula, initial encounter for closed fracture
S89.209A	Unspecified physeal fracture of upper end of unspecified fibula, initial encounter for closed fracture
S89.211A	Salter-Harris Type I physeal fracture of upper end of right fibula, initial encounter for closed fracture
S89.212A	Salter-Harris Type I physeal fracture of upper end of left fibula, initial encounter for closed fracture
S89.219A	Salter-Harris Type I physeal fracture of upper end of unspecified fibula, initial encounter for closed fracture
S89.221A	Salter-Harris Type II physeal fracture of upper end of right fibula, initial encounter for closed fracture
S89.222A	Salter-Harris Type II physeal fracture of upper end of left fibula, initial encounter for closed fracture
S89.229A	Salter-Harris Type II physeal fracture of upper end of unspecified fibula, initial encounter for closed fracture
S89.291A	Other physeal fracture of upper end of right fibula, initial encounter for closed fracture
S89.292A	Other physeal fracture of upper end of left fibula, initial encounter for closed fracture
S89.299A	Other physeal fracture of upper end of unspecified fibula, initial encounter for closed fracture
S90.00XA	Contusion of unspecified ankle, initial encounter
S90.01XA	Contusion of right ankle, initial encounter
S90.02XA	Contusion of left ankle, initial encounter
S90.111A	Contusion of right great toe without damage to nail, initial encounter
S90.112A	Contusion of left great toe without damage to nail, initial encounter
S90.119A	Contusion of unspecified great toe without damage to nail, initial encounter
S90.121A	Contusion of right lesser toe(s) without damage to nail, initial encounter
S90.122A	Contusion of left lesser toe(s) without damage to nail, initial encounter
S90.129A	Contusion of unspecified lesser toe(s) without damage to nail, initial encounter
S90.211A	Contusion of right great toe with damage to nail, initial encounter
S90.212A	Contusion of left great toe with damage to nail, initial encounter

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Code	Description
S90.219A	Contusion of unspecified great toe with damage to nail, initial encounter
S90.221A	Contusion of right lesser toe(s) with damage to nail, initial encounter
S90.222A	Contusion of left lesser toe(s) with damage to nail, initial encounter
S90.229A	Contusion of unspecified lesser toe(s) with damage to nail, initial encounter
S90.30XA	Contusion of unspecified foot, initial encounter
S90.31XA	Contusion of right foot, initial encounter
S90.32XA	Contusion of left foot, initial encounter
*S92.812A	*Other fracture of left foot, initial encounter for closed fracture
*S92.812B	*Other fracture of left foot, initial encounter for open fracture
*S92.819A	*Other fracture of unspecified foot, initial encounter for closed fracture
*S92.819B	*Other fracture of unspecified foot, initial encounter for open fracture
S95.001A	Unspecified injury of dorsal artery of right foot, initial encounter
S95.002A	Unspecified injury of dorsal artery of left foot, initial encounter
S95.009A	Unspecified injury of dorsal artery of unspecified foot, initial encounter
S95.011A	Laceration of dorsal artery of right foot, initial encounter
S95.012A	Laceration of dorsal artery of left foot, initial encounter
S95.019A	Laceration of dorsal artery of unspecified foot, initial encounter
S95.091A	Other specified injury of dorsal artery of right foot, initial encounter
S95.092A	Other specified injury of dorsal artery of left foot, initial encounter
S95.099A	Other specified injury of dorsal artery of unspecified foot, initial encounter
S95.101A	Unspecified injury of plantar artery of right foot, initial encounter
S95.102A	Unspecified injury of plantar artery of left foot, initial encounter
S95.109A	Unspecified injury of plantar artery of unspecified foot, initial encounter
S95.111A	Laceration of plantar artery of right foot, initial encounter
S95.112A	Laceration of plantar artery of left foot, initial encounter
S95.119A	Laceration of plantar artery of unspecified foot, initial encounter
S95.191A	Other specified injury of plantar artery of right foot, initial encounter
S95.192A	Other specified injury of plantar artery of left foot, initial encounter
S95.199A	Other specified injury of plantar artery of unspecified foot, initial encounter
S95.201A	Unspecified injury of dorsal vein of right foot, initial encounter



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Code	Description
S95.202A	Unspecified injury of dorsal vein of left foot, initial encounter
S95.209A	Unspecified injury of dorsal vein of unspecified foot, initial encounter
S95.211A	Laceration of dorsal vein of right foot, initial encounter
S95.212A	Laceration of dorsal vein of left foot, initial encounter
S95.219A	Laceration of dorsal vein of unspecified foot, initial encounter
S95.291A	Other specified injury of dorsal vein of right foot, initial encounter
S95.292A	Other specified injury of dorsal vein of left foot, initial encounter
S95.299A	Other specified injury of dorsal vein of unspecified foot, initial encounter
S95.801A	Unspecified injury of other blood vessels at ankle and foot level, right leg, initial encounter
S95.802A	Unspecified injury of other blood vessels at ankle and foot level, left leg, initial encounter
S95.809A	Unspecified injury of other blood vessels at ankle and foot level, unspecified leg, initial encounter
S95.811A	Laceration of other blood vessels at ankle and foot level, right leg, initial encounter
S95.812A	Laceration of other blood vessels at ankle and foot level, left leg, initial encounter
S95.819A	Laceration of other blood vessels at ankle and foot level, unspecified leg, initial encounter
S95.891A	Other specified injury of other blood vessels at ankle and foot level, right leg, initial encounter
S95.892A	Other specified injury of other blood vessels at ankle and foot level, left leg, initial encounter
S95.899A	Other specified injury of other blood vessels at ankle and foot level, unspecified leg, initial encounter
S95.901A	Unspecified injury of unspecified blood vessel at ankle and foot level, right leg, initial encounter
S95.902A	Unspecified injury of unspecified blood vessel at ankle and foot level, left leg, initial encounter
S95.909A	Unspecified injury of unspecified blood vessel at ankle and foot level, unspecified leg, initial encounter
S95.911A	Laceration of unspecified blood vessel at ankle and foot level, right leg, initial encounter
S95.912A	Laceration of unspecified blood vessel at ankle and foot level, left leg, initial encounter
S95.919A	Laceration of unspecified blood vessel at ankle and foot level, unspecified leg, initial encounter
S95.991A	Other specified injury of unspecified blood vessel at ankle and foot level, right leg, initial encounter



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Code	Description
S95.992A	Other specified injury of unspecified blood vessel at ankle and foot level, left leg, initial encounter
S95.999A	Other specified injury of unspecified blood vessel at ankle and foot level, unspecified leg, initial encounter
S97.00XA	Crushing injury of unspecified ankle, initial encounter
S97.01XA	Crushing injury of right ankle, initial encounter
S97.02XA	Crushing injury of left ankle, initial encounter
S97.101A	Crushing injury of unspecified right toe(s), initial encounter
S97.102A	Crushing injury of unspecified left toe(s), initial encounter
S97.109A	Crushing injury of unspecified toe(s), initial encounter
S97.111A	Crushing injury of right great toe, initial encounter
S97.112A	Crushing injury of left great toe, initial encounter
S97.119A	Crushing injury of unspecified great toe, initial encounter
S97.121A	Crushing injury of right lesser toe(s), initial encounter
S97.122A	Crushing injury of left lesser toe(s), initial encounter
S97.129A	Crushing injury of unspecified lesser toe(s), initial encounter
S97.80XA	Crushing injury of unspecified foot, initial encounter
S97.81XA	Crushing injury of right foot, initial encounter
S97.82XA	Crushing injury of left foot, initial encounter
*S99.001A	*Unspecified physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.002A	*Unspecified physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.002B	*Unspecified physeal fracture of left calcaneus, initial encounter for open fracture
*S99.009A	*Unspecified physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.009B	*Unspecified physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.011B	*Salter-Harris Type I physeal fracture of right calcaneus, initial encounter for open fracture
*S99.011D	*Salter-Harris Type I physeal fracture of right calcaneus, subsequent encounter for fracture with routine healing
*S99.012A	*Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
*S99.012B	*Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for open fracture
*S99.019A	*Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.019B	*Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.021A	*Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.021B	*Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for open fracture
*S99.022A	*Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.022B	*Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for open fracture
*S99.029A	*Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.029B	*Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.031B	*Salter-Harris Type III physeal fracture of right calcaneus, initial encounter for open fracture
*S99.031D	*Salter-Harris Type III physeal fracture of right calcaneus, subsequent encounter for fracture with routine healing
*S99.032A	*Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.032B	*Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for open fracture
*S99.039A	*Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.039B	*Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.041A	*Salter-Harris Type IV physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.041B	*Salter-Harris Type IV physeal fracture of right calcaneus, initial encounter for open fracture
*S99.042A	*Salter-Harris Type IV physeal fracture of left calcaneus, initial encounter for closed fracture



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Code	Description
*S99.042B	*Salter-Harris Type IV physeal fracture of left calcaneus, initial encounter for open fracture
*S99.049A	*Salter-Harris Type IV physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.049B	*Salter-Harris Type IV physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.091A	*Other physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.091B	*Other physeal fracture of right calcaneus, initial encounter for open fracture
*S99.092A	*Other physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.092B	*Other physeal fracture of left calcaneus, initial encounter for open fracture
*S99.099A	*Other physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.101A	*Unspecified physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.102A	*Unspecified physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.102B	*Unspecified physeal fracture of left metatarsal, initial encounter for open fracture
*S99.109A	*Unspecified physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.109B	*Unspecified physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.111A	*Salter-Harris Type I physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.111B	*Salter-Harris Type I physeal fracture of right metatarsal, initial encounter for open fracture
*S99.112A	*Salter-Harris Type I physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.112B	*Salter-Harris Type I physeal fracture of left metatarsal, initial encounter for open fracture
*S99.119A	*Salter-Harris Type I physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.119B	*Salter-Harris Type I physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.121A	*Salter-Harris Type II physeal fracture of right metatarsal, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.121B	*Salter-Harris Type II physeal fracture of right metatarsal, initial encounter for open fracture
*S99.122A	*Salter-Harris Type II physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.122B	*Salter-Harris Type II physeal fracture of left metatarsal, initial encounter for open fracture
*S99.129A	*Salter-Harris Type II physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.129B	*Salter-Harris Type II physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.131A	*Salter-Harris Type III physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.131B	*Salter-Harris Type III physeal fracture of right metatarsal, initial encounter for open fracture
*S99.132A	*Salter-Harris Type III physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.132B	*Salter-Harris Type III physeal fracture of left metatarsal, initial encounter for open fracture
*S99.139A	*Salter-Harris Type III physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.139B	*Salter-Harris Type III physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.141A	*Salter-Harris Type IV physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.141B	*Salter-Harris Type IV physeal fracture of right metatarsal, initial encounter for open fracture
*S99.142A	*Salter-Harris Type IV physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.142B	*Salter-Harris Type IV physeal fracture of left metatarsal, initial encounter for open fracture
*S99.149A	*Salter-Harris Type IV physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.149B	*Salter-Harris Type IV physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.192A	*Other physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.192B	*Other physeal fracture of left metatarsal, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
*S99.199A	*Other physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.199B	*Other physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.201A	*Unspecified physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.201B	*Unspecified physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.202A	*Unspecified physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.202B	*Unspecified physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.209A	*Unspecified physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.209B	*Unspecified physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.211A	*Salter-Harris Type I physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.211B	*Salter-Harris Type I physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.212A	*Salter-Harris Type I physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.212B	*Salter-Harris Type I physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.219A	*Salter-Harris Type I physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.219B	*Salter-Harris Type I physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.221A	*Salter-Harris Type II physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.221B	*Salter-Harris Type II physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.222A	*Salter-Harris Type II physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.222B	*Salter-Harris Type II physeal fracture of phalanx of left toe, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.229A	*Salter-Harris Type II physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.229B	*Salter-Harris Type II physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.231A	*Salter-Harris Type III physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.231B	*Salter-Harris Type III physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.232A	*Salter-Harris Type III physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.232B	*Salter-Harris Type III physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.239A	*Salter-Harris Type III physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.239B	*Salter-Harris Type III physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.241A	*Salter-Harris Type IV physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.241B	*Salter-Harris Type IV physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.242A	*Salter-Harris Type IV physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.242B	*Salter-Harris Type IV physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.249A	*Salter-Harris Type IV physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.249B	*Salter-Harris Type IV physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.291A	*Other physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.291B	*Other physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.292A	*Other physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.292B	*Other physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.299A	*Other physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.299B	*Other physeal fracture of phalanx of unspecified toe, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
T14.8	Other injury of unspecified body region
T14.90	Injury, unspecified
T36.0X5A	Adverse effect of penicillins, initial encounter
T36.1X5A	Adverse effect of cephalosporins and other beta-lactam antibiotics, initial encounter
T36.2X5A	Adverse effect of chloramphenicol group, initial encounter
T36.3X5A	Adverse effect of macrolides, initial encounter
T36.4X5A	Adverse effect of tetracyclines, initial encounter
T36.6X5A	Adverse effect of rifampicins, initial encounter
T36.7X5A	Adverse effect of antifungal antibiotics, systemically used, initial encounter
T36.8X5A	Adverse effect of other systemic antibiotics, initial encounter
T36.95XA	Adverse effect of unspecified systemic antibiotic, initial encounter
T37.0X5A	Adverse effect of sulfonamides, initial encounter
T37.1X5A	Adverse effect of antimycobacterial drugs, initial encounter
T37.2X5A	Adverse effect of antimalarials and drugs acting on other blood protozoa, initial encounter
T37.3X5A	Adverse effect of other antiprotozoal drugs, initial encounter
T37.4X5A	Adverse effect of anthelmintics, initial encounter
T37.5X5A	Adverse effect of antiviral drugs, initial encounter
T37.8X5A	Adverse effect of other specified systemic anti-infectives and antiparasitics, initial encounter
T37.95XA	Adverse effect of unspecified systemic anti-infective and antiparasitic, initial encounter
T38.0X5A	Adverse effect of glucocorticoids and synthetic analogues, initial encounter
T38.1X5A	Adverse effect of thyroid hormones and substitutes, initial encounter
T38.2X5A	Adverse effect of antithyroid drugs, initial encounter
T38.4X5A	Adverse effect of oral contraceptives, initial encounter
T38.5X5A	Adverse effect of other estrogens and progestogens, initial encounter
T38.6X5A	Adverse effect of antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, initial encounter
T38.7X5A	Adverse effect of androgens and anabolic congeners, initial encounter
T38.805A	Adverse effect of unspecified hormones and synthetic substitutes, initial encounter
T38.815A	Adverse effect of anterior pituitary [adenohypophyseal] hormones, initial encounter
T38.895A	Adverse effect of other hormones and synthetic substitutes, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T38.905A	Adverse effect of unspecified hormone antagonists, initial encounter
T38.995A	Adverse effect of other hormone antagonists, initial encounter
T39.015A	Adverse effect of aspirin, initial encounter
T39.095A	Adverse effect of salicylates, initial encounter
T39.2X5A	Adverse effect of pyrazolone derivatives, initial encounter
T39.315A	Adverse effect of propionic acid derivatives, initial encounter
T39.395A	Adverse effect of other nonsteroidal anti-inflammatory drugs [NSAID], initial encounter
T39.4X5A	Adverse effect of antirheumatics, not elsewhere classified, initial encounter
T39.8X5A	Adverse effect of other nonopioid analgesics and antipyretics, not elsewhere classified, initial encounter
T39.95XA	Adverse effect of unspecified nonopioid analgesic, antipyretic and antirheumatic, initial encounter
T40.0X5A	Adverse effect of opium, initial encounter
T40.2X5A	Adverse effect of other opioids, initial encounter
T40.3X5A	Adverse effect of methadone, initial encounter
T40.4X5A	Adverse effect of other synthetic narcotics, initial encounter
T40.5X5A	Adverse effect of cocaine, initial encounter
T40.605A	Adverse effect of unspecified narcotics, initial encounter
T40.695A	Adverse effect of other narcotics, initial encounter
T40.7X5A	Adverse effect of cannabis (derivatives), initial encounter
T40.905A	Adverse effect of unspecified psychodysleptics [hallucinogens], initial encounter
T40.995A	Adverse effect of other psychodysleptics [hallucinogens], initial encounter
T42.0X5A	Adverse effect of hydantoin derivatives, initial encounter
T42.1X5A	Adverse effect of iminostilbenes, initial encounter
T42.2X5A	Adverse effect of succinimides and oxazolidinediones, initial encounter
T42.3X5A	Adverse effect of barbiturates, initial encounter
T42.4X5A	Adverse effect of benzodiazepines, initial encounter
T42.5X5A	Adverse effect of mixed antiepileptics, initial encounter
T42.6X5A	Adverse effect of other antiepileptic and sedative-hypnotic drugs, initial encounter
T42.75XA	Adverse effect of unspecified antiepileptic and sedative-hypnotic drugs, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
T42.8X5A	Adverse effect of antiparkinsonism drugs and other central muscle-tone depressants, initial encounter
T43.015A	Adverse effect of tricyclic antidepressants, initial encounter
T43.025A	Adverse effect of tetracyclic antidepressants, initial encounter
T43.205A	Adverse effect of unspecified antidepressants, initial encounter
T43.295A	Adverse effect of other antidepressants, initial encounter
T43.3X5A	Adverse effect of phenothiazine antipsychotics and neuroleptics, initial encounter
T43.4X5A	Adverse effect of butyrophenone and thiothixene neuroleptics, initial encounter
T43.505A	Adverse effect of unspecified antipsychotics and neuroleptics, initial encounter
T43.595A	Adverse effect of other antipsychotics and neuroleptics, initial encounter
T43.605A	Adverse effect of unspecified psychostimulants, initial encounter
T43.625A	Adverse effect of amphetamines, initial encounter
T43.635A	Adverse effect of methylphenidate, initial encounter
T43.695A	Adverse effect of other psychostimulants, initial encounter
T43.8X5A	Adverse effect of other psychotropic drugs, initial encounter
T43.95XA	Adverse effect of unspecified psychotropic drug, initial encounter
T44.7X5A	Adverse effect of beta-adrenoreceptor antagonists, initial encounter
T45.1X5A	Adverse effect of antineoplastic and immunosuppressive drugs, initial encounter
T45.2X5A	Adverse effect of vitamins, initial encounter
T45.4X1A	Poisoning by iron and its compounds, accidental (unintentional), initial encounter
T45.4X2A	Poisoning by iron and its compounds, intentional self-harm, initial encounter
T45.4X3A	Poisoning by iron and its compounds, assault, initial encounter
T45.4X4A	Poisoning by iron and its compounds, undetermined, initial encounter
T45.4X5A	Adverse effect of iron and its compounds, initial encounter
T45.511A	Poisoning by anticoagulants, accidental (unintentional), initial encounter
T45.512A	Poisoning by anticoagulants, intentional self-harm, initial encounter
T45.513A	Poisoning by anticoagulants, assault, initial encounter
T45.514A	Poisoning by anticoagulants, undetermined, initial encounter
T45.515A	Adverse effect of anticoagulants, initial encounter
T45.521A	Poisoning by antithrombotic drugs, accidental (unintentional), initial encounter
T45.522A	Poisoning by antithrombotic drugs, intentional self-harm, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T45.523A	Poisoning by antithrombotic drugs, assault, initial encounter
T45.524A	Poisoning by antithrombotic drugs, undetermined, initial encounter
T45.525A	Adverse effect of antithrombotic drugs, initial encounter
T45.601A	Poisoning by unspecified fibrinolysis-affecting drugs, accidental (unintentional), initial encounter
T45.602A	Poisoning by unspecified fibrinolysis-affecting drugs, intentional self-harm, initial encounter
T45.603A	Poisoning by unspecified fibrinolysis-affecting drugs, assault, initial encounter
T45.604A	Poisoning by unspecified fibrinolysis-affecting drugs, undetermined, initial encounter
T45.605A	Adverse effect of unspecified fibrinolysis-affecting drugs, initial encounter
T45.611A	Poisoning by thrombolytic drug, accidental (unintentional), initial encounter
T45.612A	Poisoning by thrombolytic drug, intentional self-harm, initial encounter
T45.613A	Poisoning by thrombolytic drug, assault, initial encounter
T45.614A	Poisoning by thrombolytic drug, undetermined, initial encounter
T45.615A	Adverse effect of thrombolytic drugs, initial encounter
T45.621A	Poisoning by hemostatic drug, accidental (unintentional), initial encounter
T45.622A	Poisoning by hemostatic drug, intentional self-harm, initial encounter
T45.623A	Poisoning by hemostatic drug, assault, initial encounter
T45.624A	Poisoning by hemostatic drug, undetermined, initial encounter
T45.625A	Adverse effect of hemostatic drug, initial encounter
T45.691A	Poisoning by other fibrinolysis-affecting drugs, accidental (unintentional), initial encounter
T45.692A	Poisoning by other fibrinolysis-affecting drugs, intentional self-harm, initial encounter
T45.693A	Poisoning by other fibrinolysis-affecting drugs, assault, initial encounter
T45.694A	Poisoning by other fibrinolysis-affecting drugs, undetermined, initial encounter
T45.695A	Adverse effect of other fibrinolysis-affecting drugs, initial encounter
T45.7X1A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, accidental (unintentional), initial encounter
T45.7X2A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, intentional self-harm, initial encounter
T45.7X3A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, assault, initial encounter
T45.7X4A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, undetermined, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T45.7X5A	Adverse effect of anticoagulant antagonists, vitamin K and other coagulants, initial encounter
T45.8X1A	Poisoning by other primarily systemic and hematological agents, accidental (unintentional), initial encounter
T45.8X2A	Poisoning by other primarily systemic and hematological agents, intentional self-harm, initial encounter
T45.8X3A	Poisoning by other primarily systemic and hematological agents, assault, initial encounter
T45.8X4A	Poisoning by other primarily systemic and hematological agents, undetermined, initial encounter
T45.8X5A	Adverse effect of other primarily systemic and hematological agents, initial encounter
T45.91XA	Poisoning by unspecified primarily systemic and hematological agent, accidental (unintentional), initial encounter
T45.92XA	Poisoning by unspecified primarily systemic and hematological agent, intentional self-harm, initial encounter
T45.93XA	Poisoning by unspecified primarily systemic and hematological agent, assault, initial encounter
T45.94XA	Poisoning by unspecified primarily systemic and hematological agent, undetermined, initial encounter
T45.95XA	Adverse effect of unspecified primarily systemic and hematological agent, initial encounter
T46.1X5A	Adverse effect of calcium-channel blockers, initial encounter
T46.2X5A	Adverse effect of other antidysrhythmic drugs, initial encounter
T46.3X5A	Adverse effect of coronary vasodilators, initial encounter
T46.4X5A	Adverse effect of angiotensin-converting-enzyme inhibitors, initial encounter
T46.5X5A	Adverse effect of other antihypertensive drugs, initial encounter
T46.6X5A	Adverse effect of antihyperlipidemic and antiarteriosclerotic drugs, initial encounter
T46.7X5A	Adverse effect of peripheral vasodilators, initial encounter
T46.8X5A	Adverse effect of antivaricose drugs, including sclerosing agents, initial encounter
T46.905A	Adverse effect of unspecified agents primarily affecting the cardiovascular system, initial encounter
T46.995A	Adverse effect of other agents primarily affecting the cardiovascular system, initial encounter
T48.0X5A	Adverse effect of oxytocic drugs, initial encounter
T48.1X5A	Adverse effect of skeletal muscle relaxants [neuromuscular blocking agents], initial encounter



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Code	Description
T49.1X5A	Adverse effect of antipruritics, initial encounter
T50.4X5A	Adverse effect of drugs affecting uric acid metabolism, initial encounter
T50.6X5A	Adverse effect of antidotes and chelating agents, initial encounter
T50.7X5A	Adverse effect of analeptics and opioid receptor antagonists, initial encounter
T50.905A	Adverse effect of unspecified drugs, medicaments and biological substances, initial encounter
T50.995A	Adverse effect of other drugs, medicaments and biological substances, initial encounter
T50.A15A	Adverse effect of pertussis vaccine, including combinations with a pertussis component, initial encounter
T50.B95A	Adverse effect of other viral vaccines, initial encounter
T50.Z11A	Poisoning by immunoglobulin, accidental (unintentional), initial encounter
T50.Z12A	Poisoning by immunoglobulin, intentional self-harm, initial encounter
T50.Z13A	Poisoning by immunoglobulin, assault, initial encounter
T50.Z14A	Poisoning by immunoglobulin, undetermined, initial encounter
T50.Z15A	Adverse effect of immunoglobulin, initial encounter
T50.Z95A	Adverse effect of other vaccines and biological substances, initial encounter
T51.0X1A	Toxic effect of ethanol, accidental (unintentional), initial encounter
T51.0X2A	Toxic effect of ethanol, intentional self-harm, initial encounter
T51.0X3A	Toxic effect of ethanol, assault, initial encounter
T51.0X4A	Toxic effect of ethanol, undetermined, initial encounter
T51.1X1A	Toxic effect of methanol, accidental (unintentional), initial encounter
T51.1X2A	Toxic effect of methanol, intentional self-harm, initial encounter
T51.1X3A	Toxic effect of methanol, assault, initial encounter
T51.1X4A	Toxic effect of methanol, undetermined, initial encounter
T51.2X1A	Toxic effect of 2-Propanol, accidental (unintentional), initial encounter
T51.2X2A	Toxic effect of 2-Propanol, intentional self-harm, initial encounter
T51.2X3A	Toxic effect of 2-Propanol, assault, initial encounter
T51.2X4A	Toxic effect of 2-Propanol, undetermined, initial encounter
T51.3X1A	Toxic effect of fusel oil, accidental (unintentional), initial encounter
T51.3X2A	Toxic effect of fusel oil, intentional self-harm, initial encounter
T51.3X3A	Toxic effect of fusel oil, assault, initial encounter

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Code	Description
T51.3X4A	Toxic effect of fusel oil, undetermined, initial encounter
T51.8X1A	Toxic effect of other alcohols, accidental (unintentional), initial encounter
T51.8X2A	Toxic effect of other alcohols, intentional self-harm, initial encounter
T51.8X3A	Toxic effect of other alcohols, assault, initial encounter
T51.8X4A	Toxic effect of other alcohols, undetermined, initial encounter
T51.91XA	Toxic effect of unspecified alcohol, accidental (unintentional), initial encounter
T51.92XA	Toxic effect of unspecified alcohol, intentional self-harm, initial encounter
T51.93XA	Toxic effect of unspecified alcohol, assault, initial encounter
T51.94XA	Toxic effect of unspecified alcohol, undetermined, initial encounter
T52.0X1A	Toxic effect of petroleum products, accidental (unintentional), initial encounter
T52.0X2A	Toxic effect of petroleum products, intentional self-harm, initial encounter
T52.0X3A	Toxic effect of petroleum products, assault, initial encounter
T52.0X4A	Toxic effect of petroleum products, undetermined, initial encounter
T52.1X1A	Toxic effect of benzene, accidental (unintentional), initial encounter
T52.1X2A	Toxic effect of benzene, intentional self-harm, initial encounter
T52.1X3A	Toxic effect of benzene, assault, initial encounter
T52.1X4A	Toxic effect of benzene, undetermined, initial encounter
T52.2X1A	Toxic effect of homologues of benzene, accidental (unintentional), initial encounter
T52.2X2A	Toxic effect of homologues of benzene, intentional self-harm, initial encounter
T52.2X3A	Toxic effect of homologues of benzene, assault, initial encounter
T52.2X4A	Toxic effect of homologues of benzene, undetermined, initial encounter
T52.3X1A	Toxic effect of glycols, accidental (unintentional), initial encounter
T52.3X2A	Toxic effect of glycols, intentional self-harm, initial encounter
T52.3X3A	Toxic effect of glycols, assault, initial encounter
T52.3X4A	Toxic effect of glycols, undetermined, initial encounter
T52.4X1A	Toxic effect of ketones, accidental (unintentional), initial encounter
T52.4X2A	Toxic effect of ketones, intentional self-harm, initial encounter
T52.4X3A	Toxic effect of ketones, assault, initial encounter
T52.4X4A	Toxic effect of ketones, undetermined, initial encounter
T52.8X1A	Toxic effect of other organic solvents, accidental (unintentional), initial encounter

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Code	Description
T52.8X2A	Toxic effect of other organic solvents, intentional self-harm, initial encounter
T52.8X3A	Toxic effect of other organic solvents, assault, initial encounter
T52.8X4A	Toxic effect of other organic solvents, undetermined, initial encounter
T52.91XA	Toxic effect of unspecified organic solvent, accidental (unintentional), initial encounter
T52.92XA	Toxic effect of unspecified organic solvent, intentional self-harm, initial encounter
T52.93XA	Toxic effect of unspecified organic solvent, assault, initial encounter
T52.94XA	Toxic effect of unspecified organic solvent, undetermined, initial encounter
T53.0X1A	Toxic effect of carbon tetrachloride, accidental (unintentional), initial encounter
T53.0X2A	Toxic effect of carbon tetrachloride, intentional self-harm, initial encounter
T53.0X3A	Toxic effect of carbon tetrachloride, assault, initial encounter
T53.0X4A	Toxic effect of carbon tetrachloride, undetermined, initial encounter
T53.1X1A	Toxic effect of chloroform, accidental (unintentional), initial encounter
T53.1X2A	Toxic effect of chloroform, intentional self-harm, initial encounter
T53.1X3A	Toxic effect of chloroform, assault, initial encounter
T53.1X4A	Toxic effect of chloroform, undetermined, initial encounter
T53.2X1A	Toxic effect of trichloroethylene, accidental (unintentional), initial encounter
T53.2X2A	Toxic effect of trichloroethylene, intentional self-harm, initial encounter
T53.2X3A	Toxic effect of trichloroethylene, assault, initial encounter
T53.2X4A	Toxic effect of trichloroethylene, undetermined, initial encounter
T53.3X1A	Toxic effect of tetrachloroethylene, accidental (unintentional), initial encounter
T53.3X2A	Toxic effect of tetrachloroethylene, intentional self-harm, initial encounter
T53.3X3A	Toxic effect of tetrachloroethylene, assault, initial encounter
T53.3X4A	Toxic effect of tetrachloroethylene, undetermined, initial encounter
T53.4X1A	Toxic effect of dichloromethane, accidental (unintentional), initial encounter
T53.4X2A	Toxic effect of dichloromethane, intentional self-harm, initial encounter
T53.4X3A	Toxic effect of dichloromethane, assault, initial encounter
T53.4X4A	Toxic effect of dichloromethane, undetermined, initial encounter
T53.5X1A	Toxic effect of chlorofluorocarbons, accidental (unintentional), initial encounter
T53.5X2A	Toxic effect of chlorofluorocarbons, intentional self-harm, initial encounter
T53.5X3A	Toxic effect of chlorofluorocarbons, assault, initial encounter

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Code	Description
T53.5X4A	Toxic effect of chlorofluorocarbons, undetermined, initial encounter
T53.6X1A	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, accidental (unintentional), initial encounter
T53.6X2A	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, intentional self-harm, initial encounter
T53.6X3A	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, assault, initial encounter
T53.6X4A	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, undetermined, initial encounter
T53.7X1A	Toxic effect of other halogen derivatives of aromatic hydrocarbons, accidental (unintentional), initial encounter
T53.7X2A	Toxic effect of other halogen derivatives of aromatic hydrocarbons, intentional self-harm, initial encounter
T53.7X3A	Toxic effect of other halogen derivatives of aromatic hydrocarbons, assault, initial encounter
T53.7X4A	Toxic effect of other halogen derivatives of aromatic hydrocarbons, undetermined, initial encounter
T53.91XA	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, accidental (unintentional), initial encounter
T53.92XA	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, intentional self-harm, initial encounter
T53.93XA	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, assault, initial encounter
T53.94XA	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, undetermined, initial encounter
T55.0X1A	Toxic effect of soaps, accidental (unintentional), initial encounter
T55.0X2A	Toxic effect of soaps, intentional self-harm, initial encounter
T55.0X3A	Toxic effect of soaps, assault, initial encounter
T55.0X4A	Toxic effect of soaps, undetermined, initial encounter
T55.1X1A	Toxic effect of detergents, accidental (unintentional), initial encounter
T55.1X2A	Toxic effect of detergents, intentional self-harm, initial encounter
T55.1X3A	Toxic effect of detergents, assault, initial encounter
T55.1X4A	Toxic effect of detergents, undetermined, initial encounter
T57.3X1A	Toxic effect of hydrogen cyanide, accidental (unintentional), initial encounter



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T57.3X2A	Toxic effect of hydrogen cyanide, intentional self-harm, initial encounter
T57.3X3A	Toxic effect of hydrogen cyanide, assault, initial encounter
T57.3X4A	Toxic effect of hydrogen cyanide, undetermined, initial encounter
T57.8X1A	Toxic effect of other specified inorganic substances, accidental (unintentional), initial encounter
T57.8X2A	Toxic effect of other specified inorganic substances, intentional self-harm, initial encounter
T57.8X3A	Toxic effect of other specified inorganic substances, assault, initial encounter
T57.8X4A	Toxic effect of other specified inorganic substances, undetermined, initial encounter
T57.91XA	Toxic effect of unspecified inorganic substance, accidental (unintentional), initial encounter
T57.92XA	Toxic effect of unspecified inorganic substance, intentional self-harm, initial encounter
T57.93XA	Toxic effect of unspecified inorganic substance, assault, initial encounter
T57.94XA	Toxic effect of unspecified inorganic substance, undetermined, initial encounter
T59.0X1A	Toxic effect of nitrogen oxides, accidental (unintentional), initial encounter
T59.0X2A	Toxic effect of nitrogen oxides, intentional self-harm, initial encounter
T59.0X3A	Toxic effect of nitrogen oxides, assault, initial encounter
T59.0X4A	Toxic effect of nitrogen oxides, undetermined, initial encounter
T59.1X1A	Toxic effect of sulfur dioxide, accidental (unintentional), initial encounter
T59.1X2A	Toxic effect of sulfur dioxide, intentional self-harm, initial encounter
T59.1X3A	Toxic effect of sulfur dioxide, assault, initial encounter
T59.1X4A	Toxic effect of sulfur dioxide, undetermined, initial encounter
T59.2X1A	Toxic effect of formaldehyde, accidental (unintentional), initial encounter
T59.2X2A	Toxic effect of formaldehyde, intentional self-harm, initial encounter
T59.2X3A	Toxic effect of formaldehyde, assault, initial encounter
T59.2X4A	Toxic effect of formaldehyde, undetermined, initial encounter
T59.3X1A	Toxic effect of lacrimogenic gas, accidental (unintentional), initial encounter
T59.3X2A	Toxic effect of lacrimogenic gas, intentional self-harm, initial encounter
T59.3X3A	Toxic effect of lacrimogenic gas, assault, initial encounter
T59.3X4A	Toxic effect of lacrimogenic gas, undetermined, initial encounter
T59.4X1A	Toxic effect of chlorine gas, accidental (unintentional), initial encounter
T59.4X2A	Toxic effect of chlorine gas, intentional self-harm, initial encounter
T59.4X3A	Toxic effect of chlorine gas, assault, initial encounter

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Code	Description
T59.4X4A	Toxic effect of chlorine gas, undetermined, initial encounter
T59.5X1A	Toxic effect of fluorine gas and hydrogen fluoride, accidental (unintentional), initial encounter
T59.5X2A	Toxic effect of fluorine gas and hydrogen fluoride, intentional self-harm, initial encounter
T59.5X3A	Toxic effect of fluorine gas and hydrogen fluoride, assault, initial encounter
T59.5X4A	Toxic effect of fluorine gas and hydrogen fluoride, undetermined, initial encounter
T59.6X1A	Toxic effect of hydrogen sulfide, accidental (unintentional), initial encounter
T59.6X2A	Toxic effect of hydrogen sulfide, intentional self-harm, initial encounter
T59.6X3A	Toxic effect of hydrogen sulfide, assault, initial encounter
T59.6X4A	Toxic effect of hydrogen sulfide, undetermined, initial encounter
T59.7X1A	Toxic effect of carbon dioxide, accidental (unintentional), initial encounter
T59.7X2A	Toxic effect of carbon dioxide, intentional self-harm, initial encounter
T59.7X3A	Toxic effect of carbon dioxide, assault, initial encounter
T59.7X4A	Toxic effect of carbon dioxide, undetermined, initial encounter
T59.811A	Toxic effect of smoke, accidental (unintentional), initial encounter
T59.812A	Toxic effect of smoke, intentional self-harm, initial encounter
T59.813A	Toxic effect of smoke, assault, initial encounter
T59.814A	Toxic effect of smoke, undetermined, initial encounter
T59.891A	Toxic effect of other specified gases, fumes and vapors, accidental (unintentional), initial encounter
T59.892A	Toxic effect of other specified gases, fumes and vapors, intentional self-harm, initial encounter
T59.893A	Toxic effect of other specified gases, fumes and vapors, assault, initial encounter
T59.894A	Toxic effect of other specified gases, fumes and vapors, undetermined, initial encounter
T59.91XA	Toxic effect of unspecified gases, fumes and vapors, accidental (unintentional), initial encounter
T59.92XA	Toxic effect of unspecified gases, fumes and vapors, intentional self-harm, initial encounter
T59.93XA	Toxic effect of unspecified gases, fumes and vapors, assault, initial encounter
T59.94XA	Toxic effect of unspecified gases, fumes and vapors, undetermined, initial encounter
T60.0X1A	Toxic effect of organophosphate and carbamate insecticides, accidental (unintentional), initial encounter



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T60.0X2A	Toxic effect of organophosphate and carbamate insecticides, intentional self-harm, initial encounter
T60.0X3A	Toxic effect of organophosphate and carbamate insecticides, assault, initial encounter
T60.0X4A	Toxic effect of organophosphate and carbamate insecticides, undetermined, initial encounter
T60.1X1A	Toxic effect of halogenated insecticides, accidental (unintentional), initial encounter
T60.1X2A	Toxic effect of halogenated insecticides, intentional self-harm, initial encounter
T60.1X3A	Toxic effect of halogenated insecticides, assault, initial encounter
T60.1X4A	Toxic effect of halogenated insecticides, undetermined, initial encounter
T60.2X1A	Toxic effect of other insecticides, accidental (unintentional), initial encounter
T60.2X2A	Toxic effect of other insecticides, intentional self-harm, initial encounter
T60.2X3A	Toxic effect of other insecticides, assault, initial encounter
T60.2X4A	Toxic effect of other insecticides, undetermined, initial encounter
T60.3X1A	Toxic effect of herbicides and fungicides, accidental (unintentional), initial encounter
T60.3X2A	Toxic effect of herbicides and fungicides, intentional self-harm, initial encounter
T60.3X3A	Toxic effect of herbicides and fungicides, assault, initial encounter
T60.3X4A	Toxic effect of herbicides and fungicides, undetermined, initial encounter
T60.4X1A	Toxic effect of rodenticides, accidental (unintentional), initial encounter
T60.4X2A	Toxic effect of rodenticides, intentional self-harm, initial encounter
T60.4X3A	Toxic effect of rodenticides, assault, initial encounter
T60.4X4A	Toxic effect of rodenticides, undetermined, initial encounter
T60.8X1A	Toxic effect of other pesticides, accidental (unintentional), initial encounter
T60.8X2A	Toxic effect of other pesticides, intentional self-harm, initial encounter
T60.8X3A	Toxic effect of other pesticides, assault, initial encounter
T60.8X4A	Toxic effect of other pesticides, undetermined, initial encounter
T60.91XA	Toxic effect of unspecified pesticide, accidental (unintentional), initial encounter
T60.92XA	Toxic effect of unspecified pesticide, intentional self-harm, initial encounter
T60.93XA	Toxic effect of unspecified pesticide, assault, initial encounter
T60.94XA	Toxic effect of unspecified pesticide, undetermined, initial encounter
T63.001A	Toxic effect of unspecified snake venom, accidental (unintentional), initial encounter
T63.002A	Toxic effect of unspecified snake venom, intentional self-harm, initial encounter

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Code	Description
T63.003A	Toxic effect of unspecified snake venom, assault, initial encounter
T63.004A	Toxic effect of unspecified snake venom, undetermined, initial encounter
T63.011A	Toxic effect of rattlesnake venom, accidental (unintentional), initial encounter
T63.012A	Toxic effect of rattlesnake venom, intentional self-harm, initial encounter
T63.013A	Toxic effect of rattlesnake venom, assault, initial encounter
T63.014A	Toxic effect of rattlesnake venom, undetermined, initial encounter
T63.021A	Toxic effect of coral snake venom, accidental (unintentional), initial encounter
T63.022A	Toxic effect of coral snake venom, intentional self-harm, initial encounter
T63.023A	Toxic effect of coral snake venom, assault, initial encounter
T63.024A	Toxic effect of coral snake venom, undetermined, initial encounter
T63.031A	Toxic effect of taipan venom, accidental (unintentional), initial encounter
T63.032A	Toxic effect of taipan venom, intentional self-harm, initial encounter
T63.033A	Toxic effect of taipan venom, assault, initial encounter
T63.034A	Toxic effect of taipan venom, undetermined, initial encounter
T63.041A	Toxic effect of cobra venom, accidental (unintentional), initial encounter
T63.042A	Toxic effect of cobra venom, intentional self-harm, initial encounter
T63.043A	Toxic effect of cobra venom, assault, initial encounter
T63.044A	Toxic effect of cobra venom, undetermined, initial encounter
T63.061A	Toxic effect of venom of other North and South American snake, accidental (unintentional), initial encounter
T63.062A	Toxic effect of venom of other North and South American snake, intentional self-harm, initial encounter
T63.063A	Toxic effect of venom of other North and South American snake, assault, initial encounter
T63.064A	Toxic effect of venom of other North and South American snake, undetermined, initial encounter
T63.071A	Toxic effect of venom of other Australian snake, accidental (unintentional), initial encounter
T63.072A	Toxic effect of venom of other Australian snake, intentional self-harm, initial encounter
T63.073A	Toxic effect of venom of other Australian snake, assault, initial encounter
T63.074A	Toxic effect of venom of other Australian snake, undetermined, initial encounter
T63.081A	Toxic effect of venom of other African and Asian snake, accidental (unintentional), initial encounter



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T63.082A	Toxic effect of venom of other African and Asian snake, intentional self-harm, initial encounter
T63.083A	Toxic effect of venom of other African and Asian snake, assault, initial encounter
T63.084A	Toxic effect of venom of other African and Asian snake, undetermined, initial encounter
T63.091A	Toxic effect of venom of other snake, accidental (unintentional), initial encounter
T63.092A	Toxic effect of venom of other snake, intentional self-harm, initial encounter
T63.093A	Toxic effect of venom of other snake, assault, initial encounter
T63.094A	Toxic effect of venom of other snake, undetermined, initial encounter
T63.111A	Toxic effect of venom of gila monster, accidental (unintentional), initial encounter
T63.112A	Toxic effect of venom of gila monster, intentional self-harm, initial encounter
T63.113A	Toxic effect of venom of gila monster, assault, initial encounter
T63.114A	Toxic effect of venom of gila monster, undetermined, initial encounter
T63.121A	Toxic effect of venom of other venomous lizard, accidental (unintentional), initial encounter
T63.122A	Toxic effect of venom of other venomous lizard, intentional self-harm, initial encounter
T63.123A	Toxic effect of venom of other venomous lizard, assault, initial encounter
T63.124A	Toxic effect of venom of other venomous lizard, undetermined, initial encounter
T63.191A	Toxic effect of venom of other reptiles, accidental (unintentional), initial encounter
T63.192A	Toxic effect of venom of other reptiles, intentional self-harm, initial encounter
T63.193A	Toxic effect of venom of other reptiles, assault, initial encounter
T63.194A	Toxic effect of venom of other reptiles, undetermined, initial encounter
T63.2X1A	Toxic effect of venom of scorpion, accidental (unintentional), initial encounter
T63.2X2A	Toxic effect of venom of scorpion, intentional self-harm, initial encounter
T63.2X3A	Toxic effect of venom of scorpion, assault, initial encounter
T63.2X4A	Toxic effect of venom of scorpion, undetermined, initial encounter
T63.301A	Toxic effect of unspecified spider venom, accidental (unintentional), initial encounter
T63.302A	Toxic effect of unspecified spider venom, intentional self-harm, initial encounter
T63.303A	Toxic effect of unspecified spider venom, assault, initial encounter
T63.304A	Toxic effect of unspecified spider venom, undetermined, initial encounter
T63.311A	Toxic effect of venom of black widow spider, accidental (unintentional), initial encounter
T63.312A	Toxic effect of venom of black widow spider, intentional self-harm, initial encounter
T63.313A	Toxic effect of venom of black widow spider, assault, initial encounter

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Code	Description
T63.314A	Toxic effect of venom of black widow spider, undetermined, initial encounter
T63.321A	Toxic effect of venom of tarantula, accidental (unintentional), initial encounter
T63.322A	Toxic effect of venom of tarantula, intentional self-harm, initial encounter
T63.323A	Toxic effect of venom of tarantula, assault, initial encounter
T63.324A	Toxic effect of venom of tarantula, undetermined, initial encounter
T63.331A	Toxic effect of venom of brown recluse spider, accidental (unintentional), initial encounter
T63.332A	Toxic effect of venom of brown recluse spider, intentional self-harm, initial encounter
T63.333A	Toxic effect of venom of brown recluse spider, assault, initial encounter
T63.334A	Toxic effect of venom of brown recluse spider, undetermined, initial encounter
T63.391A	Toxic effect of venom of other spider, accidental (unintentional), initial encounter
T63.392A	Toxic effect of venom of other spider, intentional self-harm, initial encounter
T63.393A	Toxic effect of venom of other spider, assault, initial encounter
T63.394A	Toxic effect of venom of other spider, undetermined, initial encounter
T63.411A	Toxic effect of venom of centipedes and venomous millipedes, accidental (unintentional), initial encounter
T63.412A	Toxic effect of venom of centipedes and venomous millipedes, intentional self-harm, initial encounter
T63.413A	Toxic effect of venom of centipedes and venomous millipedes, assault, initial encounter
T63.414A	Toxic effect of venom of centipedes and venomous millipedes, undetermined, initial encounter
T63.421A	Toxic effect of venom of ants, accidental (unintentional), initial encounter
T63.422A	Toxic effect of venom of ants, intentional self-harm, initial encounter
T63.423A	Toxic effect of venom of ants, assault, initial encounter
T63.424A	Toxic effect of venom of ants, undetermined, initial encounter
T63.431A	Toxic effect of venom of caterpillars, accidental (unintentional), initial encounter
T63.432A	Toxic effect of venom of caterpillars, intentional self-harm, initial encounter
T63.433A	Toxic effect of venom of caterpillars, assault, initial encounter
T63.434A	Toxic effect of venom of caterpillars, undetermined, initial encounter
T63.441A	Toxic effect of venom of bees, accidental (unintentional), initial encounter
T63.442A	Toxic effect of venom of bees, intentional self-harm, initial encounter
T63.443A	Toxic effect of venom of bees, assault, initial encounter



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T63.444A	Toxic effect of venom of bees, undetermined, initial encounter
T63.451A	Toxic effect of venom of hornets, accidental (unintentional), initial encounter
T63.452A	Toxic effect of venom of hornets, intentional self-harm, initial encounter
T63.453A	Toxic effect of venom of hornets, assault, initial encounter
T63.454A	Toxic effect of venom of hornets, undetermined, initial encounter
T63.461A	Toxic effect of venom of wasps, accidental (unintentional), initial encounter
T63.462A	Toxic effect of venom of wasps, intentional self-harm, initial encounter
T63.463A	Toxic effect of venom of wasps, assault, initial encounter
T63.464A	Toxic effect of venom of wasps, undetermined, initial encounter
T63.481A	Toxic effect of venom of other arthropod, accidental (unintentional), initial encounter
T63.482A	Toxic effect of venom of other arthropod, intentional self-harm, initial encounter
T63.483A	Toxic effect of venom of other arthropod, assault, initial encounter
T63.484A	Toxic effect of venom of other arthropod, undetermined, initial encounter
T63.511A	Toxic effect of contact with stingray, accidental (unintentional), initial encounter
T63.512A	Toxic effect of contact with stingray, intentional self-harm, initial encounter
T63.513A	Toxic effect of contact with stingray, assault, initial encounter
T63.514A	Toxic effect of contact with stingray, undetermined, initial encounter
T63.591A	Toxic effect of contact with other venomous fish, accidental (unintentional), initial encounter
T63.592A	Toxic effect of contact with other venomous fish, intentional self-harm, initial encounter
T63.593A	Toxic effect of contact with other venomous fish, assault, initial encounter
T63.594A	Toxic effect of contact with other venomous fish, undetermined, initial encounter
T63.611A	Toxic effect of contact with Portugese Man-o-war, accidental (unintentional), initial encounter
T63.612A	Toxic effect of contact with Portugese Man-o-war, intentional self-harm, initial encounter
T63.613A	Toxic effect of contact with Portugese Man-o-war, assault, initial encounter
T63.614A	Toxic effect of contact with Portugese Man-o-war, undetermined, initial encounter
T63.621A	Toxic effect of contact with other jellyfish, accidental (unintentional), initial encounter
T63.622A	Toxic effect of contact with other jellyfish, intentional self-harm, initial encounter
T63.623A	Toxic effect of contact with other jellyfish, assault, initial encounter
T63.624A	Toxic effect of contact with other jellyfish, undetermined, initial encounter

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Code	Description
T63.631A	Toxic effect of contact with sea anemone, accidental (unintentional), initial encounter
T63.632A	Toxic effect of contact with sea anemone, intentional self-harm, initial encounter
T63.633A	Toxic effect of contact with sea anemone, assault, initial encounter
T63.634A	Toxic effect of contact with sea anemone, undetermined, initial encounter
T63.691A	Toxic effect of contact with other venomous marine animals, accidental (unintentional), initial encounter
T63.692A	Toxic effect of contact with other venomous marine animals, intentional self-harm, initial encounter
T63.693A	Toxic effect of contact with other venomous marine animals, assault, initial encounter
T63.694A	Toxic effect of contact with other venomous marine animals, undetermined, initial encounter
T63.711A	Toxic effect of contact with venomous marine plant, accidental (unintentional), initial encounter
T63.712A	Toxic effect of contact with venomous marine plant, intentional self-harm, initial encounter
T63.713A	Toxic effect of contact with venomous marine plant, assault, initial encounter
T63.714A	Toxic effect of contact with venomous marine plant, undetermined, initial encounter
T63.791A	Toxic effect of contact with other venomous plant, accidental (unintentional), initial encounter
T63.792A	Toxic effect of contact with other venomous plant, intentional self-harm, initial encounter
T63.793A	Toxic effect of contact with other venomous plant, assault, initial encounter
T63.794A	Toxic effect of contact with other venomous plant, undetermined, initial encounter
T63.811A	Toxic effect of contact with venomous frog, accidental (unintentional), initial encounter
T63.812A	Toxic effect of contact with venomous frog, intentional self-harm, initial encounter
T63.813A	Toxic effect of contact with venomous frog, assault, initial encounter
T63.814A	Toxic effect of contact with venomous frog, undetermined, initial encounter
T63.821A	Toxic effect of contact with venomous toad, accidental (unintentional), initial encounter
T63.822A	Toxic effect of contact with venomous toad, intentional self-harm, initial encounter
T63.823A	Toxic effect of contact with venomous toad, assault, initial encounter
T63.824A	Toxic effect of contact with venomous toad, undetermined, initial encounter
T63.831A	Toxic effect of contact with other venomous amphibian, accidental (unintentional), initial encounter
T63.832A	Toxic effect of contact with other venomous amphibian, intentional self-harm, initial encounter

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Code	Description
T63.833A	Toxic effect of contact with other venomous amphibian, assault, initial encounter
T63.834A	Toxic effect of contact with other venomous amphibian, undetermined, initial encounter
T63.891A	Toxic effect of contact with other venomous animals, accidental (unintentional), initial encounter
T63.892A	Toxic effect of contact with other venomous animals, intentional self-harm, initial encounter
T63.893A	Toxic effect of contact with other venomous animals, assault, initial encounter
T63.894A	Toxic effect of contact with other venomous animals, undetermined, initial encounter
T63.91XA	Toxic effect of contact with unspecified venomous animal, accidental (unintentional), initial encounter
T63.92XA	Toxic effect of contact with unspecified venomous animal, intentional self-harm, initial encounter
T63.93XA	Toxic effect of contact with unspecified venomous animal, assault, initial encounter
T63.94XA	Toxic effect of contact with unspecified venomous animal, undetermined, initial encounter
T64.01XA	Toxic effect of aflatoxin, accidental (unintentional), initial encounter
T64.02XA	Toxic effect of aflatoxin, intentional self-harm, initial encounter
T64.03XA	Toxic effect of aflatoxin, assault, initial encounter
T64.04XA	Toxic effect of aflatoxin, undetermined, initial encounter
T64.81XA	Toxic effect of other mycotoxin food contaminants, accidental (unintentional), initial encounter
T64.82XA	Toxic effect of other mycotoxin food contaminants, intentional self-harm, initial encounter
T64.83XA	Toxic effect of other mycotoxin food contaminants, assault, initial encounter
T64.84XA	Toxic effect of other mycotoxin food contaminants, undetermined, initial encounter
T65.0X1A	Toxic effect of cyanides, accidental (unintentional), initial encounter
T65.0X2A	Toxic effect of cyanides, intentional self-harm, initial encounter
T65.0X3A	Toxic effect of cyanides, assault, initial encounter
T65.0X4A	Toxic effect of cyanides, undetermined, initial encounter
T65.1X1A	Toxic effect of strychnine and its salts, accidental (unintentional), initial encounter
T65.1X2A	Toxic effect of strychnine and its salts, intentional self-harm, initial encounter
T65.1X3A	Toxic effect of strychnine and its salts, assault, initial encounter
T65.1X4A	Toxic effect of strychnine and its salts, undetermined, initial encounter
T65.211A	Toxic effect of chewing tobacco, accidental (unintentional), initial encounter
T65.212A	Toxic effect of chewing tobacco, intentional self-harm, initial encounter

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Code	Description
T65.213A	Toxic effect of chewing tobacco, assault, initial encounter
T65.214A	Toxic effect of chewing tobacco, undetermined, initial encounter
T65.221A	Toxic effect of tobacco cigarettes, accidental (unintentional), initial encounter
T65.222A	Toxic effect of tobacco cigarettes, intentional self-harm, initial encounter
T65.223A	Toxic effect of tobacco cigarettes, assault, initial encounter
T65.224A	Toxic effect of tobacco cigarettes, undetermined, initial encounter
T65.291A	Toxic effect of other tobacco and nicotine, accidental (unintentional), initial encounter
T65.292A	Toxic effect of other tobacco and nicotine, intentional self-harm, initial encounter
T65.293A	Toxic effect of other tobacco and nicotine, assault, initial encounter
T65.294A	Toxic effect of other tobacco and nicotine, undetermined, initial encounter
T65.3X1A	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, accidental (unintentional), initial encounter
T65.3X2A	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, intentional self-harm, initial encounter
T65.3X3A	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, assault, initial encounter
T65.3X4A	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, undetermined, initial encounter
T65.4X1A	Toxic effect of carbon disulfide, accidental (unintentional), initial encounter
T65.4X2A	Toxic effect of carbon disulfide, intentional self-harm, initial encounter
T65.4X3A	Toxic effect of carbon disulfide, assault, initial encounter
T65.4X4A	Toxic effect of carbon disulfide, undetermined, initial encounter
T65.5X1A	Toxic effect of nitroglycerin and other nitric acids and esters, accidental (unintentional), initial encounter
T65.5X2A	Toxic effect of nitroglycerin and other nitric acids and esters, intentional self-harm, initial encounter
T65.5X3A	Toxic effect of nitroglycerin and other nitric acids and esters, assault, initial encounter
T65.5X4A	Toxic effect of nitroglycerin and other nitric acids and esters, undetermined, initial encounter
T65.6X1A	Toxic effect of paints and dyes, not elsewhere classified, accidental (unintentional), initial encounter
T65.6X2A	Toxic effect of paints and dyes, not elsewhere classified, intentional self-harm, initial encounter



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Code	Description
T65.6X3A	Toxic effect of paints and dyes, not elsewhere classified, assault, initial encounter
T65.6X4A	Toxic effect of paints and dyes, not elsewhere classified, undetermined, initial encounter
T65.811A	Toxic effect of latex, accidental (unintentional), initial encounter
T65.812A	Toxic effect of latex, intentional self-harm, initial encounter
T65.813A	Toxic effect of latex, assault, initial encounter
T65.814A	Toxic effect of latex, undetermined, initial encounter
T65.821A	Toxic effect of harmful algae and algae toxins, accidental (unintentional), initial encounter
T65.822A	Toxic effect of harmful algae and algae toxins, intentional self-harm, initial encounter
T65.823A	Toxic effect of harmful algae and algae toxins, assault, initial encounter
T65.824A	Toxic effect of harmful algae and algae toxins, undetermined, initial encounter
T65.831A	Toxic effect of fiberglass, accidental (unintentional), initial encounter
T65.832A	Toxic effect of fiberglass, intentional self-harm, initial encounter
T65.833A	Toxic effect of fiberglass, assault, initial encounter
T65.834A	Toxic effect of fiberglass, undetermined, initial encounter
T65.891A	Toxic effect of other specified substances, accidental (unintentional), initial encounter
T65.892A	Toxic effect of other specified substances, intentional self-harm, initial encounter
T65.893A	Toxic effect of other specified substances, assault, initial encounter
T65.894A	Toxic effect of other specified substances, undetermined, initial encounter
T65.91XA	Toxic effect of unspecified substance, accidental (unintentional), initial encounter
T65.92XA	Toxic effect of unspecified substance, intentional self-harm, initial encounter
T65.93XA	Toxic effect of unspecified substance, assault, initial encounter
T65.94XA	Toxic effect of unspecified substance, undetermined, initial encounter
T78.41XA	Arthus phenomenon, initial encounter
T79.2XXA	Traumatic secondary and recurrent hemorrhage and seroma, initial encounter
T80.1XXA	Vascular complications following infusion, transfusion and therapeutic injection, initial encounter
T80.89XA	Other complications following infusion, transfusion and therapeutic injection, initial encounter
T80.910A	Acute hemolytic transfusion reaction, unspecified incompatibility, initial encounter
T80.911A	Delayed hemolytic transfusion reaction, unspecified incompatibility, initial encounter



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Code	Description
T80.919A	Hemolytic transfusion reaction, unspecified incompatibility, unspecified as acute or delayed, initial encounter
T80.92XA	Unspecified transfusion reaction, initial encounter
*T82.855A	*Stenosis of coronary artery stent, initial encounter
*T82.855D	*Stenosis of coronary artery stent, subsequent encounter
*T82.855S	*Stenosis of coronary artery stent, sequela
*T82.856A	*Stenosis of peripheral vascular stent, initial encounter
*T82.856D	*Stenosis of peripheral vascular stent, subsequent encounter
*T82.856S	*Stenosis of peripheral vascular stent, sequela
*T85.810A	*Embolism due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.810D	*Embolism due to nervous system prosthetic devices, implants and grafts, subsequent encounter
*T85.810S	*Embolism due to nervous system prosthetic devices, implants and grafts, sequela
*T85.818A	*Embolism due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.818D	*Embolism due to other internal prosthetic devices, implants and grafts, subsequent encounter
*T85.818S	*Embolism due to other internal prosthetic devices, implants and grafts, sequela
*T85.830A	*Hemorrhage due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.838A	*Hemorrhage due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.840A	*Pain due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.848A	*Pain due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.850A	*Stenosis due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.858A	*Stenosis due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.860A	*Thrombosis due to nervous system prosthetic devices, implants and grafts, initial encounter
*T85.860D	*Thrombosis due to nervous system prosthetic devices, implants and grafts, subsequent encounter



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Code	Description
*T85.860S	*Thrombosis due to nervous system prosthetic devices, implants and grafts, sequela
*T85.868A	*Thrombosis due to other internal prosthetic devices, implants and grafts, initial encounter
*T85.868D	*Thrombosis due to other internal prosthetic devices, implants and grafts, subsequent encounter
*T85.868S	*Thrombosis due to other internal prosthetic devices, implants and grafts, sequela
T86.40	Unspecified complication of liver transplant
T86.41	Liver transplant rejection
T86.42	Liver transplant failure
T86.43	Liver transplant infection
T86.49	Other complications of liver transplant
T88.52XA	Failed moderate sedation during procedure, initial encounter
*V47.0XXA	*Car driver injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.1XXA	*Car passenger injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.3XXA	*Unspecified car occupant injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.5XXA	*Car driver injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.6XXA	*Car passenger injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.9XXA	*Unspecified car occupant injured in collision with fixed or stationary object in traffic accident, initial encounter
*Z05.0	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1	*Observation and evaluation of newborn for suspected infectious condition ruled out
*Z05.2	*Observation and evaluation of newborn for suspected neurological condition ruled out
*Z05.3	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41	*Observation and evaluation of newborn for suspected genetic condition ruled out
*Z05.42	*Observation and evaluation of newborn for suspected metabolic condition ruled out



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Code	Description
*Z05.43	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
*Z05.6	*Observation and evaluation of newborn for suspected genitourinary condition ruled out
*Z05.71	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
*Z05.73	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9	*Observation and evaluation of newborn for unspecified suspected condition ruled out
*Z19.1	*Hormone sensitive malignancy status
*Z19.2	*Hormone resistant malignancy status
Z21	Asymptomatic human immunodeficiency virus [HIV] infection status
Z48.21	Encounter for aftercare following heart transplant
Z48.22	Encounter for aftercare following kidney transplant
Z48.23	Encounter for aftercare following liver transplant
Z48.24	Encounter for aftercare following lung transplant
Z48.280	Encounter for aftercare following heart-lung transplant
Z48.290	Encounter for aftercare following bone marrow transplant
Z48.298	Encounter for aftercare following other organ transplant
Z51.81	Encounter for therapeutic drug level monitoring
Z51.89	Encounter for other specified aftercare
*Z53.31	*Laparoscopic surgical procedure converted to open procedure
*Z53.32	*Thoracoscopic surgical procedure converted to open procedure
*Z53.33	*Arthroscopic surgical procedure converted to open procedure
*Z53.39	*Other specified procedure converted to open procedure
Z79.01	Long term (current) use of anticoagulants



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Code	Description
*Z84.82	*Family history of sudden infant death syndrome
Z86.2	Personal history of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
Z86.39	Personal history of other endocrine, nutritional and metabolic disease
Z86.711	Personal history of pulmonary embolism
Z86.718	Personal history of other venous thrombosis and embolism
Z86.72	Personal history of thrombophlebitis
Z86.73	Personal history of transient ischemic attack (TIA), and cerebral infarction without residual deficits
Z86.74	Personal history of sudden cardiac arrest
Z86.79	Personal history of other diseases of the circulatory system
Z94.0	Kidney transplant status
Z94.1	Heart transplant status
Z94.2	Lung transplant status
Z94.3	Heart and lungs transplant status
Z94.4	Liver transplant status
Z94.81	Bone marrow transplant status
Z94.82	Intestine transplant status
Z94.83	Pancreas transplant status
Z94.84	Stem cells transplant status
Z94.89	Other transplanted organ and tissue status
Z95.2	Presence of prosthetic heart valve
Z95.3	Presence of xenogenic heart valve
Z95.4	Presence of other heart-valve replacement
Z95.811	Presence of heart assist device
Z95.812	Presence of fully implantable artificial heart
Z95.820	Peripheral vascular angioplasty status with implants and grafts
Z95.828	Presence of other vascular implants and grafts
Z98.870	Personal history of in utero procedure during pregnancy
Z98.871	Personal history of in utero procedure while a fetus



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Code	Description
Z98.890	Other specified postprocedural states
Z98.891	History of uterine scar from previous surgery

Indications

1. A PT may be used to assess patients taking warfarin. The PT is generally not useful in monitoring patients receiving heparin who are not taking warfarin.
2. A PT may be used to assess patients with signs or symptoms of abnormal bleeding or thrombosis. For example:
 - Swollen extremity with or without prior trauma
 - Unexplained bruising
 - Abnormal bleeding, hemorrhage or hematoma
 - Petechiae or other signs of thrombocytopenia that could be due to Disseminated Intravascular Coagulation
3. A PT may be useful in evaluating patients who have a history of a condition known to be associated with the risk of bleeding or thrombosis that is related to the extrinsic coagulation pathway. Such abnormalities may be genetic or acquired. For example:
 - Dysfibrinogenemia
 - Afibrinogenemia (complete)
 - Acute or chronic liver dysfunction or failure, including Wilson's disease and Hemochromatosis
 - Disseminated intravascular coagulation (DIC)
 - Congenital and acquired deficiencies of factors II, V, VII, X
 - Vitamin K deficiency
 - Lupus erythematosus
 - Hypercoagulable state
 - Paraproteinemia
 - Lymphoma
 - Amyloidosis
 - Acute and chronic leukemias
 - Plasma cell dyscrasia
 - HIV infection
 - Malignant neoplasms
 - Hemorrhagic fever
 - Salicylate poisoning
 - Obstructive jaundice
 - Intestinal fistula
 - Malabsorption syndrome



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- Colitis
 - Chronic diarrhea
 - Presence of peripheral venous or arterial thrombosis or pulmonary emboli or myocardial infarction
 - Patients with bleeding or clotting tendencies
 - Organ transplantation
 - Presence of circulating coagulation inhibitors
4. A PT may be used to assess the risk of hemorrhage or thrombosis in patients who are going to have a medical intervention known to be associated with increased risk of bleeding or thrombosis. For example:
- Evaluation prior to invasive procedures or operations of patients with personal history of bleeding or a condition associated with coagulopathy.
 - Prior to the use of thrombolytic medication

Limitations

1. When an ESRD patient is tested for PT, testing more frequently than weekly requires documentation of medical necessity, e.g., other than chronic renal failure or renal failure unspecified.
2. The need to repeat this test is determined by changes in the underlying medical condition and/or the dosing of warfarin. In a patient on stable warfarin therapy, it is ordinarily not necessary to repeat testing more than every two to three weeks. When testing is performed to evaluate a patient with signs or symptoms of abnormal bleeding or thrombosis and the initial test result is normal, it is ordinarily not necessary to repeat testing unless there is a change in the patient's medical status.
3. Since the INR is a calculation, it will not be paid in addition to the PT when expressed in seconds, and is considered part of the conventional PT test.
4. Testing prior to any medical intervention associated with a risk of bleeding and thrombosis (other than thrombolytic therapy) will generally be considered medically necessary only where there are signs or symptoms of a bleeding or thrombotic abnormality or a personal history of bleeding, thrombosis or a condition associated with a coagulopathy. Hospital/clinic-specific policies, protocols, etc., in and of themselves, cannot alone justify coverage.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

CMD Clinical Laboratory Workgroup

1999 CPT Physicians' Current Procedural Terminology, American Medical Association

Wintrobe's Clinical Hematology 9th Ed. Lea and Febinger

Harrison's Principles of Internal Medicine, McGraw Hill, 14th Ed., 1997.

Diagnostic Tests Handbook, Springhouse Corporation, 1987.

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Hemostasis and Thrombosis: Basic Principles and Clinical Practice. Colman, et al editors, J.B. Lippincott, 3rd Edition, 1994, pp 896-898 and 1045-1046.

Disorders of Hemostasis, Ratnoff, Oscar D. and Forbes, Charles D., W.B. Saunders Co. 1996.

Merck Manual of Diagnosis and Therapy, 16th Edition (should be replaced w/17th Edition 1999.)

“Performance of the Coumatrak System at a Large Anticoagulation Clinic”. *Coagulation and Transfusion Medicine*. January 1995. p. 98-102.

“Monitoring Oral Anticoagulation Therapy with Point-of-Care Devices. Correlation and Caveats”. *Clinical Chemistry*: No. 9, 1997, p1785-1786.

“College of American Pathologists Conference XXXI on Laboratory Monitoring of Anticoagulant Therapy”. *Arch.Pathol.Lab.Med*. Vol.122. September 1998. p. 768-780.

“A Structured Teaching and Self-management Program for Patients Receiving Oral Anti-coagulation”. *JAMA*; 1999; 281: 145-150.



190.18 - Serum Iron Studies

Description

Serum iron studies are useful in the evaluation of disorders of iron metabolism, particularly iron deficiency and iron excess. Iron studies are best performed when the patient is fasting in the morning and has abstained from medications that may influence iron balance.

Iron deficiency is the most common cause of anemia. In young children on a milk diet, iron deficiency is often secondary to dietary deficiency. In adults, iron deficiency is usually the result of blood loss and is only occasionally secondary to dietary deficiency or malabsorption. Following major surgery the patient may have iron deficient erythropoietin for months or years if adequate iron replacement has not been given. High doses of supplemental iron may cause the serum iron to be elevated. Serum iron may also be altered in acute and chronic inflammatory and neoplastic conditions.

Total Iron Binding Capacity (TIBC) is an indirect measure of transferrin, a protein that binds and transports iron. TIBC quantifies transferrin by the amount of iron that it can bind. TIBC and transferrin are elevated in iron deficiency, and with oral contraceptive use, and during pregnancy. TIBC and transferrin may be decreased in malabsorption syndromes or in those affected with chronic diseases. The percent saturation represents the ratio of iron to the TIBC.

Assays for ferritin are also useful in assessing iron balance. Low concentrations are associated with iron deficiency and are highly specific. High concentrations are found in hemosiderosis (iron overload without associated tissue injury) and hemochromatosis (iron overload with associated tissue injury). In these conditions the iron is elevated, the TIBC and transferrin are within the reference range or low, and the percent saturation is elevated. Serum ferritin can be useful for both initiating and monitoring treatment for iron overload.

Transferrin and ferritin belong to a group of serum proteins known as acute phase reactants, and are increased in response to stressful or inflammatory conditions and also can occur with infection and tissue injury due to surgery, trauma or necrosis. Ferritin and iron/TIBC (or transferrin) are affected by acute and chronic inflammatory conditions, and in patients with these disorders, tests of iron status may be difficult to interpret.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
82728	Ferritin
83540	Iron
83550	Iron Binding capacity
84466	Transferrin



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ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A01.00	Typhoid fever, unspecified
A01.01	Typhoid meningitis
A01.02	Typhoid fever with heart involvement
A01.03	Typhoid pneumonia
A01.04	Typhoid arthritis
A01.05	Typhoid osteomyelitis
A01.09	Typhoid fever with other complications
A01.1	Paratyphoid fever A
A01.2	Paratyphoid fever B
A01.3	Paratyphoid fever C
A01.4	Paratyphoid fever, unspecified
A02.0	Salmonella enteritis
A02.1	Salmonella sepsis
A02.20	Localized salmonella infection, unspecified
A02.21	Salmonella meningitis
A02.22	Salmonella pneumonia
A02.23	Salmonella arthritis
A02.24	Salmonella osteomyelitis
A02.25	Salmonella pyelonephritis
A02.29	Salmonella with other localized infection
A02.8	Other specified salmonella infections
A02.9	Salmonella infection, unspecified
A04.0	Enteropathogenic Escherichia coli infection
A04.1	Enterotoxigenic Escherichia coli infection
A04.2	Enteroinvasive Escherichia coli infection



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Code	Description
A04.3	Enterohemorrhagic Escherichia coli infection
A04.4	Other intestinal Escherichia coli infections
A04.5	Campylobacter enteritis
A04.6	Enteritis due to Yersinia enterocolitica
A04.7	Enterocolitis due to Clostridium difficile
A04.8	Other specified bacterial intestinal infections
A04.9	Bacterial intestinal infection, unspecified
A06.0	Acute amebic dysentery
A06.1	Chronic intestinal amebiasis
A06.2	Amebic nondysenteric colitis
A06.3	Ameboma of intestine
A06.4	Amebic liver abscess
A06.5	Amebic lung abscess
A06.6	Amebic brain abscess
A06.7	Cutaneous amebiasis
A06.81	Amebic cystitis
A06.82	Other amebic genitourinary infections
A06.89	Other amebic infections
A06.9	Amebiasis, unspecified
A07.0	Balantidiasis
A07.1	Giardiasis [lamblia]s
A07.2	Cryptosporidiosis
A07.3	Isosporiasis
A07.4	Cyclosporiasis
A07.8	Other specified protozoal intestinal diseases
A07.9	Protozoal intestinal disease, unspecified
A08.0	Rotaviral enteritis
A08.11	Acute gastroenteropathy due to Norwalk agent
A08.19	Acute gastroenteropathy due to other small round viruses
A08.2	Adenoviral enteritis



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Code	Description
A08.31	Calicivirus enteritis
A08.32	Astrovirus enteritis
A08.39	Other viral enteritis
A08.4	Viral intestinal infection, unspecified
A08.8	Other specified intestinal infections
A09	Infectious gastroenteritis and colitis, unspecified
A15.0	Tuberculosis of lung
A18.01	Tuberculosis of spine
A18.02	Tuberculous arthritis of other joints
A18.03	Tuberculosis of other bones
A18.09	Other musculoskeletal tuberculosis
A18.11	Tuberculosis of kidney and ureter
A18.12	Tuberculosis of bladder
A18.13	Tuberculosis of other urinary organs
A18.31	Tuberculous peritonitis
A18.32	Tuberculous enteritis
A18.39	Retroperitoneal tuberculosis
A18.83	Tuberculosis of digestive tract organs, not elsewhere classified
A18.84	Tuberculosis of heart
B15.0	Hepatitis A with hepatic coma
B15.9	Hepatitis A without hepatic coma
B16.0	Acute hepatitis B with delta-agent with hepatic coma
B16.1	Acute hepatitis B with delta-agent without hepatic coma
B16.2	Acute hepatitis B without delta-agent with hepatic coma
B16.9	Acute hepatitis B without delta-agent and without hepatic coma
B17.0	Acute delta-(super) infection of hepatitis B carrier
B17.10	Acute hepatitis C without hepatic coma
B17.11	Acute hepatitis C with hepatic coma
B17.2	Acute hepatitis E
B17.8	Other specified acute viral hepatitis

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Code	Description
B17.9	Acute viral hepatitis, unspecified
B18.0	Chronic viral hepatitis B with delta-agent
B18.1	Chronic viral hepatitis B without delta-agent
B18.2	Chronic viral hepatitis C
B18.8	Other chronic viral hepatitis
B18.9	Chronic viral hepatitis, unspecified
B19.0	Unspecified viral hepatitis with hepatic coma
B19.10	Unspecified viral hepatitis B without hepatic coma
B19.11	Unspecified viral hepatitis B with hepatic coma
B19.20	Unspecified viral hepatitis C without hepatic coma
B19.21	Unspecified viral hepatitis C with hepatic coma
B19.9	Unspecified viral hepatitis without hepatic coma
B20	Human immunodeficiency virus [HIV] disease
B25.1	Cytomegaloviral hepatitis
B52.0	Plasmodium malariae malaria with nephropathy
C00.0	Malignant neoplasm of external upper lip
C00.1	Malignant neoplasm of external lower lip
C00.2	Malignant neoplasm of external lip, unspecified
C00.3	Malignant neoplasm of upper lip, inner aspect
C00.4	Malignant neoplasm of lower lip, inner aspect
C00.5	Malignant neoplasm of lip, unspecified, inner aspect
C00.6	Malignant neoplasm of commissure of lip, unspecified
C00.8	Malignant neoplasm of overlapping sites of lip
C00.9	Malignant neoplasm of lip, unspecified
C01	Malignant neoplasm of base of tongue
C02.0	Malignant neoplasm of dorsal surface of tongue
C02.1	Malignant neoplasm of border of tongue
C02.2	Malignant neoplasm of ventral surface of tongue
C02.3	Malignant neoplasm of anterior two-thirds of tongue, part unspecified
C02.4	Malignant neoplasm of lingual tonsil

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Code	Description
C02.8	Malignant neoplasm of overlapping sites of tongue
C02.9	Malignant neoplasm of tongue, unspecified
C03.0	Malignant neoplasm of upper gum
C03.1	Malignant neoplasm of lower gum
C03.9	Malignant neoplasm of gum, unspecified
C04.0	Malignant neoplasm of anterior floor of mouth
C04.1	Malignant neoplasm of lateral floor of mouth
C04.8	Malignant neoplasm of overlapping sites of floor of mouth
C04.9	Malignant neoplasm of floor of mouth, unspecified
C05.0	Malignant neoplasm of hard palate
C05.1	Malignant neoplasm of soft palate
C05.2	Malignant neoplasm of uvula
C05.8	Malignant neoplasm of overlapping sites of palate
C05.9	Malignant neoplasm of palate, unspecified
C06.0	Malignant neoplasm of cheek mucosa
C06.1	Malignant neoplasm of vestibule of mouth
C06.2	Malignant neoplasm of retromolar area
C06.80	Malignant neoplasm of overlapping sites of unspecified parts of mouth
C06.89	Malignant neoplasm of overlapping sites of other parts of mouth
C06.9	Malignant neoplasm of mouth, unspecified
C07	Malignant neoplasm of parotid gland
C08.0	Malignant neoplasm of submandibular gland
C08.1	Malignant neoplasm of sublingual gland
C08.9	Malignant neoplasm of major salivary gland, unspecified
C09.0	Malignant neoplasm of tonsillar fossa
C09.1	Malignant neoplasm of tonsillar pillar (anterior) (posterior)
C09.8	Malignant neoplasm of overlapping sites of tonsil
C09.9	Malignant neoplasm of tonsil, unspecified
C10.0	Malignant neoplasm of vallecula
C10.1	Malignant neoplasm of anterior surface of epiglottis



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Code	Description
C10.2	Malignant neoplasm of lateral wall of oropharynx
C10.3	Malignant neoplasm of posterior wall of oropharynx
C10.4	Malignant neoplasm of branchial cleft
C10.8	Malignant neoplasm of overlapping sites of oropharynx
C10.9	Malignant neoplasm of oropharynx, unspecified
C11.0	Malignant neoplasm of superior wall of nasopharynx
C11.1	Malignant neoplasm of posterior wall of nasopharynx
C11.2	Malignant neoplasm of lateral wall of nasopharynx
C11.3	Malignant neoplasm of anterior wall of nasopharynx
C11.8	Malignant neoplasm of overlapping sites of nasopharynx
C11.9	Malignant neoplasm of nasopharynx, unspecified
C12	Malignant neoplasm of pyriform sinus
C13.0	Malignant neoplasm of postcricoid region
C13.1	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect
C13.2	Malignant neoplasm of posterior wall of hypopharynx
C13.8	Malignant neoplasm of overlapping sites of hypopharynx
C13.9	Malignant neoplasm of hypopharynx, unspecified
C14.0	Malignant neoplasm of pharynx, unspecified
C14.2	Malignant neoplasm of Waldeyer's ring
C14.8	Malignant neoplasm of overlapping sites of lip, oral cavity and pharynx
C15.3	Malignant neoplasm of upper third of esophagus
C15.4	Malignant neoplasm of middle third of esophagus
C15.5	Malignant neoplasm of lower third of esophagus
C15.8	Malignant neoplasm of overlapping sites of esophagus
C15.9	Malignant neoplasm of esophagus, unspecified
C16.0	Malignant neoplasm of cardia
C16.1	Malignant neoplasm of fundus of stomach
C16.2	Malignant neoplasm of body of stomach
C16.3	Malignant neoplasm of pyloric antrum
C16.4	Malignant neoplasm of pylorus

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Code	Description
C16.5	Malignant neoplasm of lesser curvature of stomach, unspecified
C16.6	Malignant neoplasm of greater curvature of stomach, unspecified
C16.8	Malignant neoplasm of overlapping sites of stomach
C16.9	Malignant neoplasm of stomach, unspecified
C17.0	Malignant neoplasm of duodenum
C17.1	Malignant neoplasm of jejunum
C17.2	Malignant neoplasm of ileum
C17.3	Meckel's diverticulum, malignant
C17.8	Malignant neoplasm of overlapping sites of small intestine
C17.9	Malignant neoplasm of small intestine, unspecified
C18.0	Malignant neoplasm of cecum
C18.1	Malignant neoplasm of appendix
C18.2	Malignant neoplasm of ascending colon
C18.3	Malignant neoplasm of hepatic flexure
C18.4	Malignant neoplasm of transverse colon
C18.5	Malignant neoplasm of splenic flexure
C18.6	Malignant neoplasm of descending colon
C18.7	Malignant neoplasm of sigmoid colon
C18.8	Malignant neoplasm of overlapping sites of colon
C18.9	Malignant neoplasm of colon, unspecified
C19	Malignant neoplasm of rectosigmoid junction
C20	Malignant neoplasm of rectum
C21.0	Malignant neoplasm of anus, unspecified
C21.1	Malignant neoplasm of anal canal
C21.2	Malignant neoplasm of cloacogenic zone
C21.8	Malignant neoplasm of overlapping sites of rectum, anus and anal canal
C22.0	Liver cell carcinoma
C22.1	Intrahepatic bile duct carcinoma
C22.2	Hepatoblastoma
C22.3	Angiosarcoma of liver

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Code	Description
C22.4	Other sarcomas of liver
C22.7	Other specified carcinomas of liver
C22.8	Malignant neoplasm of liver, primary, unspecified as to type
C22.9	Malignant neoplasm of liver, not specified as primary or secondary
C23	Malignant neoplasm of gallbladder
C24.0	Malignant neoplasm of extrahepatic bile duct
C24.1	Malignant neoplasm of ampulla of Vater
C24.8	Malignant neoplasm of overlapping sites of biliary tract
C24.9	Malignant neoplasm of biliary tract, unspecified
C25.0	Malignant neoplasm of head of pancreas
C25.1	Malignant neoplasm of body of pancreas
C25.2	Malignant neoplasm of tail of pancreas
C25.3	Malignant neoplasm of pancreatic duct
C25.4	Malignant neoplasm of endocrine pancreas
C25.7	Malignant neoplasm of other parts of pancreas
C25.8	Malignant neoplasm of overlapping sites of pancreas
C25.9	Malignant neoplasm of pancreas, unspecified
C26.0	Malignant neoplasm of intestinal tract, part unspecified
C26.1	Malignant neoplasm of spleen
C26.9	Malignant neoplasm of ill-defined sites within the digestive system
C30.0	Malignant neoplasm of nasal cavity
C30.1	Malignant neoplasm of middle ear
C31.0	Malignant neoplasm of maxillary sinus
C31.1	Malignant neoplasm of ethmoidal sinus
C31.2	Malignant neoplasm of frontal sinus
C31.3	Malignant neoplasm of sphenoid sinus
C31.8	Malignant neoplasm of overlapping sites of accessory sinuses
C31.9	Malignant neoplasm of accessory sinus, unspecified
C32.0	Malignant neoplasm of glottis
C32.1	Malignant neoplasm of supraglottis



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Code	Description
C32.2	Malignant neoplasm of subglottis
C32.3	Malignant neoplasm of laryngeal cartilage
C32.8	Malignant neoplasm of overlapping sites of larynx
C32.9	Malignant neoplasm of larynx, unspecified
C33	Malignant neoplasm of trachea
C34.00	Malignant neoplasm of unspecified main bronchus
C34.01	Malignant neoplasm of right main bronchus
C34.02	Malignant neoplasm of left main bronchus
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung
C34.2	Malignant neoplasm of middle lobe, bronchus or lung
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung
C37	Malignant neoplasm of thymus
C38.0	Malignant neoplasm of heart
C38.1	Malignant neoplasm of anterior mediastinum
C38.2	Malignant neoplasm of posterior mediastinum
C38.3	Malignant neoplasm of mediastinum, part unspecified
C38.4	Malignant neoplasm of pleura
C38.8	Malignant neoplasm of overlapping sites of heart, mediastinum and pleura
C39.0	Malignant neoplasm of upper respiratory tract, part unspecified
C39.9	Malignant neoplasm of lower respiratory tract, part unspecified



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Code	Description
C40.00	Malignant neoplasm of scapula and long bones of unspecified upper limb
C40.01	Malignant neoplasm of scapula and long bones of right upper limb
C40.02	Malignant neoplasm of scapula and long bones of left upper limb
C40.10	Malignant neoplasm of short bones of unspecified upper limb
C40.11	Malignant neoplasm of short bones of right upper limb
C40.12	Malignant neoplasm of short bones of left upper limb
C40.20	Malignant neoplasm of long bones of unspecified lower limb
C40.21	Malignant neoplasm of long bones of right lower limb
C40.22	Malignant neoplasm of long bones of left lower limb
C40.30	Malignant neoplasm of short bones of unspecified lower limb
C40.31	Malignant neoplasm of short bones of right lower limb
C40.32	Malignant neoplasm of short bones of left lower limb
C40.80	Malignant neoplasm of overlapping sites of bone and articular cartilage of unspecified limb
C40.81	Malignant neoplasm of overlapping sites of bone and articular cartilage of right limb
C40.82	Malignant neoplasm of overlapping sites of bone and articular cartilage of left limb
C40.90	Malignant neoplasm of unspecified bones and articular cartilage of unspecified limb
C40.91	Malignant neoplasm of unspecified bones and articular cartilage of right limb
C40.92	Malignant neoplasm of unspecified bones and articular cartilage of left limb
C41.0	Malignant neoplasm of bones of skull and face
C41.1	Malignant neoplasm of mandible
C41.2	Malignant neoplasm of vertebral column
C41.3	Malignant neoplasm of ribs, sternum and clavicle
C41.4	Malignant neoplasm of pelvic bones, sacrum and coccyx
C41.9	Malignant neoplasm of bone and articular cartilage, unspecified
C43.0	Malignant melanoma of lip
C43.10	Malignant melanoma of unspecified eyelid, including canthus
C43.11	Malignant melanoma of right eyelid, including canthus
C43.12	Malignant melanoma of left eyelid, including canthus
C43.20	Malignant melanoma of unspecified ear and external auricular canal
C43.21	Malignant melanoma of right ear and external auricular canal

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Code	Description
C43.22	Malignant melanoma of left ear and external auricular canal
C43.30	Malignant melanoma of unspecified part of face
C43.31	Malignant melanoma of nose
C43.39	Malignant melanoma of other parts of face
C43.4	Malignant melanoma of scalp and neck
C43.51	Malignant melanoma of anal skin
C43.52	Malignant melanoma of skin of breast
C43.59	Malignant melanoma of other part of trunk
C43.60	Malignant melanoma of unspecified upper limb, including shoulder
C43.61	Malignant melanoma of right upper limb, including shoulder
C43.62	Malignant melanoma of left upper limb, including shoulder
C43.70	Malignant melanoma of unspecified lower limb, including hip
C43.71	Malignant melanoma of right lower limb, including hip
C43.72	Malignant melanoma of left lower limb, including hip
C43.8	Malignant melanoma of overlapping sites of skin
C43.9	Malignant melanoma of skin, unspecified
C44.00	Unspecified malignant neoplasm of skin of lip
C44.01	Basal cell carcinoma of skin of lip
C44.02	Squamous cell carcinoma of skin of lip
C44.09	Other specified malignant neoplasm of skin of lip
C44.101	Unspecified malignant neoplasm of skin of unspecified eyelid, including canthus
C44.102	Unspecified malignant neoplasm of skin of right eyelid, including canthus
C44.109	Unspecified malignant neoplasm of skin of left eyelid, including canthus
C44.111	Basal cell carcinoma of skin of unspecified eyelid, including canthus
C44.112	Basal cell carcinoma of skin of right eyelid, including canthus
C44.119	Basal cell carcinoma of skin of left eyelid, including canthus
C44.121	Squamous cell carcinoma of skin of unspecified eyelid, including canthus
C44.122	Squamous cell carcinoma of skin of right eyelid, including canthus
C44.129	Squamous cell carcinoma of skin of left eyelid, including canthus
C44.191	Other specified malignant neoplasm of skin of unspecified eyelid, including canthus

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Code	Description
C44.192	Other specified malignant neoplasm of skin of right eyelid, including canthus
C44.199	Other specified malignant neoplasm of skin of left eyelid, including canthus
C44.201	Unspecified malignant neoplasm of skin of unspecified ear and external auricular canal
C44.202	Unspecified malignant neoplasm of skin of right ear and external auricular canal
C44.209	Unspecified malignant neoplasm of skin of left ear and external auricular canal
C44.211	Basal cell carcinoma of skin of unspecified ear and external auricular canal
C44.212	Basal cell carcinoma of skin of right ear and external auricular canal
C44.219	Basal cell carcinoma of skin of left ear and external auricular canal
C44.221	Squamous cell carcinoma of skin of unspecified ear and external auricular canal
C44.222	Squamous cell carcinoma of skin of right ear and external auricular canal
C44.229	Squamous cell carcinoma of skin of left ear and external auricular canal
C44.291	Other specified malignant neoplasm of skin of unspecified ear and external auricular canal
C44.292	Other specified malignant neoplasm of skin of right ear and external auricular canal
C44.299	Other specified malignant neoplasm of skin of left ear and external auricular canal
C44.300	Unspecified malignant neoplasm of skin of unspecified part of face
C44.301	Unspecified malignant neoplasm of skin of nose
C44.309	Unspecified malignant neoplasm of skin of other parts of face
C44.310	Basal cell carcinoma of skin of unspecified parts of face
C44.311	Basal cell carcinoma of skin of nose
C44.319	Basal cell carcinoma of skin of other parts of face
C44.320	Squamous cell carcinoma of skin of unspecified parts of face
C44.321	Squamous cell carcinoma of skin of nose
C44.329	Squamous cell carcinoma of skin of other parts of face
C44.390	Other specified malignant neoplasm of skin of unspecified parts of face
C44.391	Other specified malignant neoplasm of skin of nose
C44.399	Other specified malignant neoplasm of skin of other parts of face
C44.40	Unspecified malignant neoplasm of skin of scalp and neck
C44.41	Basal cell carcinoma of skin of scalp and neck
C44.42	Squamous cell carcinoma of skin of scalp and neck
C44.49	Other specified malignant neoplasm of skin of scalp and neck

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Code	Description
C44.500	Unspecified malignant neoplasm of anal skin
C44.501	Unspecified malignant neoplasm of skin of breast
C44.509	Unspecified malignant neoplasm of skin of other part of trunk
C44.510	Basal cell carcinoma of anal skin
C44.511	Basal cell carcinoma of skin of breast
C44.519	Basal cell carcinoma of skin of other part of trunk
C44.520	Squamous cell carcinoma of anal skin
C44.521	Squamous cell carcinoma of skin of breast
C44.529	Squamous cell carcinoma of skin of other part of trunk
C44.590	Other specified malignant neoplasm of anal skin
C44.591	Other specified malignant neoplasm of skin of breast
C44.599	Other specified malignant neoplasm of skin of other part of trunk
C44.601	Unspecified malignant neoplasm of skin of unspecified upper limb, including shoulder
C44.602	Unspecified malignant neoplasm of skin of right upper limb, including shoulder
C44.609	Unspecified malignant neoplasm of skin of left upper limb, including shoulder
C44.611	Basal cell carcinoma of skin of unspecified upper limb, including shoulder
C44.612	Basal cell carcinoma of skin of right upper limb, including shoulder
C44.619	Basal cell carcinoma of skin of left upper limb, including shoulder
C44.621	Squamous cell carcinoma of skin of unspecified upper limb, including shoulder
C44.622	Squamous cell carcinoma of skin of right upper limb, including shoulder
C44.629	Squamous cell carcinoma of skin of left upper limb, including shoulder
C44.691	Other specified malignant neoplasm of skin of unspecified upper limb, including shoulder
C44.692	Other specified malignant neoplasm of skin of right upper limb, including shoulder
C44.699	Other specified malignant neoplasm of skin of left upper limb, including shoulder
C44.701	Unspecified malignant neoplasm of skin of unspecified lower limb, including hip
C44.702	Unspecified malignant neoplasm of skin of right lower limb, including hip
C44.709	Unspecified malignant neoplasm of skin of left lower limb, including hip
C44.711	Basal cell carcinoma of skin of unspecified lower limb, including hip
C44.712	Basal cell carcinoma of skin of right lower limb, including hip
C44.719	Basal cell carcinoma of skin of left lower limb, including hip



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Code	Description
C44.721	Squamous cell carcinoma of skin of unspecified lower limb, including hip
C44.722	Squamous cell carcinoma of skin of right lower limb, including hip
C44.729	Squamous cell carcinoma of skin of left lower limb, including hip
C44.791	Other specified malignant neoplasm of skin of unspecified lower limb, including hip
C44.792	Other specified malignant neoplasm of skin of right lower limb, including hip
C44.799	Other specified malignant neoplasm of skin of left lower limb, including hip
C44.80	Unspecified malignant neoplasm of overlapping sites of skin
C44.81	Basal cell carcinoma of overlapping sites of skin
C44.82	Squamous cell carcinoma of overlapping sites of skin
C44.89	Other specified malignant neoplasm of overlapping sites of skin
C44.90	Unspecified malignant neoplasm of skin, unspecified
C44.91	Basal cell carcinoma of skin, unspecified
C44.92	Squamous cell carcinoma of skin, unspecified
C44.99	Other specified malignant neoplasm of skin, unspecified
C45.0	Mesothelioma of pleura
C45.1	Mesothelioma of peritoneum
C45.2	Mesothelioma of pericardium
C45.7	Mesothelioma of other sites
C45.9	Mesothelioma, unspecified
C46.0	Kaposi's sarcoma of skin
C46.1	Kaposi's sarcoma of soft tissue
C46.2	Kaposi's sarcoma of palate
C46.3	Kaposi's sarcoma of lymph nodes
C46.4	Kaposi's sarcoma of gastrointestinal sites
C46.50	Kaposi's sarcoma of unspecified lung
C46.51	Kaposi's sarcoma of right lung
C46.52	Kaposi's sarcoma of left lung
C46.7	Kaposi's sarcoma of other sites
C46.9	Kaposi's sarcoma, unspecified
C47.0	Malignant neoplasm of peripheral nerves of head, face and neck



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Code	Description
C47.10	Malignant neoplasm of peripheral nerves of unspecified upper limb, including shoulder
C47.11	Malignant neoplasm of peripheral nerves of right upper limb, including shoulder
C47.12	Malignant neoplasm of peripheral nerves of left upper limb, including shoulder
C47.20	Malignant neoplasm of peripheral nerves of unspecified lower limb, including hip
C47.21	Malignant neoplasm of peripheral nerves of right lower limb, including hip
C47.22	Malignant neoplasm of peripheral nerves of left lower limb, including hip
C47.3	Malignant neoplasm of peripheral nerves of thorax
C47.4	Malignant neoplasm of peripheral nerves of abdomen
C47.5	Malignant neoplasm of peripheral nerves of pelvis
C47.6	Malignant neoplasm of peripheral nerves of trunk, unspecified
C47.8	Malignant neoplasm of overlapping sites of peripheral nerves and autonomic nervous system
C47.9	Malignant neoplasm of peripheral nerves and autonomic nervous system, unspecified
C48.0	Malignant neoplasm of retroperitoneum
C48.1	Malignant neoplasm of specified parts of peritoneum
C48.2	Malignant neoplasm of peritoneum, unspecified
C48.8	Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum
C49.0	Malignant neoplasm of connective and soft tissue of head, face and neck
C49.10	Malignant neoplasm of connective and soft tissue of unspecified upper limb, including shoulder
C49.11	Malignant neoplasm of connective and soft tissue of right upper limb, including shoulder
C49.12	Malignant neoplasm of connective and soft tissue of left upper limb, including shoulder
C49.20	Malignant neoplasm of connective and soft tissue of unspecified lower limb, including hip
C49.21	Malignant neoplasm of connective and soft tissue of right lower limb, including hip
C49.22	Malignant neoplasm of connective and soft tissue of left lower limb, including hip
C49.3	Malignant neoplasm of connective and soft tissue of thorax
C49.4	Malignant neoplasm of connective and soft tissue of abdomen
C49.5	Malignant neoplasm of connective and soft tissue of pelvis
C49.6	Malignant neoplasm of connective and soft tissue of trunk, unspecified
C49.8	Malignant neoplasm of overlapping sites of connective and soft tissue
C49.9	Malignant neoplasm of connective and soft tissue, unspecified

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Code	Description
*C49.A0	*Gastrointestinal stromal tumor, unspecified site
*C49.A1	*Gastrointestinal stromal tumor of esophagus
*C49.A2	*Gastrointestinal stromal tumor of stomach
*C49.A3	*Gastrointestinal stromal tumor of small intestine
*C49.A4	*Gastrointestinal stromal tumor of large intestine
*C49.A5	*Gastrointestinal stromal tumor of rectum
*C49.A9	*Gastrointestinal stromal tumor of other sites
C4A.0	Merkel cell carcinoma of lip
C4A.10	Merkel cell carcinoma of unspecified eyelid, including canthus
C4A.11	Merkel cell carcinoma of right eyelid, including canthus
C4A.12	Merkel cell carcinoma of left eyelid, including canthus
C4A.20	Merkel cell carcinoma of unspecified ear and external auricular canal
C4A.21	Merkel cell carcinoma of right ear and external auricular canal
C4A.22	Merkel cell carcinoma of left ear and external auricular canal
C4A.30	Merkel cell carcinoma of unspecified part of face
C4A.31	Merkel cell carcinoma of nose
C4A.39	Merkel cell carcinoma of other parts of face
C4A.4	Merkel cell carcinoma of scalp and neck
C4A.51	Merkel cell carcinoma of anal skin
C4A.52	Merkel cell carcinoma of skin of breast
C4A.59	Merkel cell carcinoma of other part of trunk
C4A.60	Merkel cell carcinoma of unspecified upper limb, including shoulder
C4A.61	Merkel cell carcinoma of right upper limb, including shoulder
C4A.62	Merkel cell carcinoma of left upper limb, including shoulder
C4A.70	Merkel cell carcinoma of unspecified lower limb, including hip
C4A.71	Merkel cell carcinoma of right lower limb, including hip
C4A.72	Merkel cell carcinoma of left lower limb, including hip
C4A.8	Merkel cell carcinoma of overlapping sites
C4A.9	Merkel cell carcinoma, unspecified
C50.011	Malignant neoplasm of nipple and areola, right female breast



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Code	Description
C50.012	Malignant neoplasm of nipple and areola, left female breast
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast
C50.021	Malignant neoplasm of nipple and areola, right male breast
C50.022	Malignant neoplasm of nipple and areola, left male breast
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast
C50.111	Malignant neoplasm of central portion of right female breast
C50.112	Malignant neoplasm of central portion of left female breast
C50.119	Malignant neoplasm of central portion of unspecified female breast
C50.121	Malignant neoplasm of central portion of right male breast
C50.122	Malignant neoplasm of central portion of left male breast
C50.129	Malignant neoplasm of central portion of unspecified male breast
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast

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Code	Description
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast
C50.611	Malignant neoplasm of axillary tail of right female breast
C50.612	Malignant neoplasm of axillary tail of left female breast
C50.619	Malignant neoplasm of axillary tail of unspecified female breast
C50.621	Malignant neoplasm of axillary tail of right male breast
C50.622	Malignant neoplasm of axillary tail of left male breast
C50.629	Malignant neoplasm of axillary tail of unspecified male breast
C50.811	Malignant neoplasm of overlapping sites of right female breast
C50.812	Malignant neoplasm of overlapping sites of left female breast
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast
C50.821	Malignant neoplasm of overlapping sites of right male breast
C50.822	Malignant neoplasm of overlapping sites of left male breast
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast
C50.911	Malignant neoplasm of unspecified site of right female breast
C50.912	Malignant neoplasm of unspecified site of left female breast
C50.919	Malignant neoplasm of unspecified site of unspecified female breast
C50.921	Malignant neoplasm of unspecified site of right male breast
C50.922	Malignant neoplasm of unspecified site of left male breast
C50.929	Malignant neoplasm of unspecified site of unspecified male breast
C51.0	Malignant neoplasm of labium majus
C51.1	Malignant neoplasm of labium minus
C51.2	Malignant neoplasm of clitoris
C51.8	Malignant neoplasm of overlapping sites of vulva
C51.9	Malignant neoplasm of vulva, unspecified
C52	Malignant neoplasm of vagina
C53.0	Malignant neoplasm of endocervix



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Code	Description
C53.1	Malignant neoplasm of exocervix
C53.8	Malignant neoplasm of overlapping sites of cervix uteri
C53.9	Malignant neoplasm of cervix uteri, unspecified
C54.0	Malignant neoplasm of isthmus uteri
C54.1	Malignant neoplasm of endometrium
C54.2	Malignant neoplasm of myometrium
C54.3	Malignant neoplasm of fundus uteri
C54.8	Malignant neoplasm of overlapping sites of corpus uteri
C54.9	Malignant neoplasm of corpus uteri, unspecified
C55	Malignant neoplasm of uterus, part unspecified
C56.1	Malignant neoplasm of right ovary
C56.2	Malignant neoplasm of left ovary
C56.9	Malignant neoplasm of unspecified ovary
C57.00	Malignant neoplasm of unspecified fallopian tube
C57.01	Malignant neoplasm of right fallopian tube
C57.02	Malignant neoplasm of left fallopian tube
C57.10	Malignant neoplasm of unspecified broad ligament
C57.11	Malignant neoplasm of right broad ligament
C57.12	Malignant neoplasm of left broad ligament
C57.20	Malignant neoplasm of unspecified round ligament
C57.21	Malignant neoplasm of right round ligament
C57.22	Malignant neoplasm of left round ligament
C57.3	Malignant neoplasm of parametrium
C57.4	Malignant neoplasm of uterine adnexa, unspecified
C57.7	Malignant neoplasm of other specified female genital organs
C57.8	Malignant neoplasm of overlapping sites of female genital organs
C57.9	Malignant neoplasm of female genital organ, unspecified
C58	Malignant neoplasm of placenta
C60.0	Malignant neoplasm of prepuce
C60.1	Malignant neoplasm of glans penis



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Code	Description
C60.2	Malignant neoplasm of body of penis
C60.8	Malignant neoplasm of overlapping sites of penis
C60.9	Malignant neoplasm of penis, unspecified
C61	Malignant neoplasm of prostate
C62.00	Malignant neoplasm of unspecified undescended testis
C62.01	Malignant neoplasm of undescended right testis
C62.02	Malignant neoplasm of undescended left testis
C62.10	Malignant neoplasm of unspecified descended testis
C62.11	Malignant neoplasm of descended right testis
C62.12	Malignant neoplasm of descended left testis
C62.90	Malignant neoplasm of unspecified testis, unspecified whether descended or undescended
C62.91	Malignant neoplasm of right testis, unspecified whether descended or undescended
C62.92	Malignant neoplasm of left testis, unspecified whether descended or undescended
C63.00	Malignant neoplasm of unspecified epididymis
C63.01	Malignant neoplasm of right epididymis
C63.02	Malignant neoplasm of left epididymis
C63.10	Malignant neoplasm of unspecified spermatic cord
C63.11	Malignant neoplasm of right spermatic cord
C63.12	Malignant neoplasm of left spermatic cord
C63.2	Malignant neoplasm of scrotum
C63.7	Malignant neoplasm of other specified male genital organs
C63.8	Malignant neoplasm of overlapping sites of male genital organs
C63.9	Malignant neoplasm of male genital organ, unspecified
C64.1	Malignant neoplasm of right kidney, except renal pelvis
C64.2	Malignant neoplasm of left kidney, except renal pelvis
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis
C65.1	Malignant neoplasm of right renal pelvis
C65.2	Malignant neoplasm of left renal pelvis
C65.9	Malignant neoplasm of unspecified renal pelvis
C66.1	Malignant neoplasm of right ureter



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Code	Description
C66.2	Malignant neoplasm of left ureter
C66.9	Malignant neoplasm of unspecified ureter
C67.0	Malignant neoplasm of trigone of bladder
C67.1	Malignant neoplasm of dome of bladder
C67.2	Malignant neoplasm of lateral wall of bladder
C67.3	Malignant neoplasm of anterior wall of bladder
C67.4	Malignant neoplasm of posterior wall of bladder
C67.5	Malignant neoplasm of bladder neck
C67.6	Malignant neoplasm of ureteric orifice
C67.7	Malignant neoplasm of urachus
C67.8	Malignant neoplasm of overlapping sites of bladder
C67.9	Malignant neoplasm of bladder, unspecified
C68.0	Malignant neoplasm of urethra
C68.1	Malignant neoplasm of paraurethral glands
C68.8	Malignant neoplasm of overlapping sites of urinary organs
C68.9	Malignant neoplasm of urinary organ, unspecified
C69.00	Malignant neoplasm of unspecified conjunctiva
C69.01	Malignant neoplasm of right conjunctiva
C69.02	Malignant neoplasm of left conjunctiva
C69.10	Malignant neoplasm of unspecified cornea
C69.11	Malignant neoplasm of right cornea
C69.12	Malignant neoplasm of left cornea
C69.20	Malignant neoplasm of unspecified retina
C69.21	Malignant neoplasm of right retina
C69.22	Malignant neoplasm of left retina
C69.30	Malignant neoplasm of unspecified choroid
C69.31	Malignant neoplasm of right choroid
C69.32	Malignant neoplasm of left choroid
C69.40	Malignant neoplasm of unspecified ciliary body
C69.41	Malignant neoplasm of right ciliary body

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Code	Description
C69.42	Malignant neoplasm of left ciliary body
C69.50	Malignant neoplasm of unspecified lacrimal gland and duct
C69.51	Malignant neoplasm of right lacrimal gland and duct
C69.52	Malignant neoplasm of left lacrimal gland and duct
C69.60	Malignant neoplasm of unspecified orbit
C69.61	Malignant neoplasm of right orbit
C69.62	Malignant neoplasm of left orbit
C69.80	Malignant neoplasm of overlapping sites of unspecified eye and adnexa
C69.81	Malignant neoplasm of overlapping sites of right eye and adnexa
C69.82	Malignant neoplasm of overlapping sites of left eye and adnexa
C69.90	Malignant neoplasm of unspecified site of unspecified eye
C69.91	Malignant neoplasm of unspecified site of right eye
C69.92	Malignant neoplasm of unspecified site of left eye
C70.0	Malignant neoplasm of cerebral meninges
C70.1	Malignant neoplasm of spinal meninges
C70.9	Malignant neoplasm of meninges, unspecified
C71.0	Malignant neoplasm of cerebrum, except lobes and ventricles
C71.1	Malignant neoplasm of frontal lobe
C71.2	Malignant neoplasm of temporal lobe
C71.3	Malignant neoplasm of parietal lobe
C71.4	Malignant neoplasm of occipital lobe
C71.5	Malignant neoplasm of cerebral ventricle
C71.6	Malignant neoplasm of cerebellum
C71.7	Malignant neoplasm of brain stem
C71.8	Malignant neoplasm of overlapping sites of brain
C71.9	Malignant neoplasm of brain, unspecified
C72.0	Malignant neoplasm of spinal cord
C72.1	Malignant neoplasm of cauda equina
C72.20	Malignant neoplasm of unspecified olfactory nerve
C72.21	Malignant neoplasm of right olfactory nerve

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Code	Description
C72.22	Malignant neoplasm of left olfactory nerve
C72.30	Malignant neoplasm of unspecified optic nerve
C72.31	Malignant neoplasm of right optic nerve
C72.32	Malignant neoplasm of left optic nerve
C72.40	Malignant neoplasm of unspecified acoustic nerve
C72.41	Malignant neoplasm of right acoustic nerve
C72.42	Malignant neoplasm of left acoustic nerve
C72.50	Malignant neoplasm of unspecified cranial nerve
C72.59	Malignant neoplasm of other cranial nerves
C72.9	Malignant neoplasm of central nervous system, unspecified
C73	Malignant neoplasm of thyroid gland
C74.00	Malignant neoplasm of cortex of unspecified adrenal gland
C74.01	Malignant neoplasm of cortex of right adrenal gland
C74.02	Malignant neoplasm of cortex of left adrenal gland
C74.10	Malignant neoplasm of medulla of unspecified adrenal gland
C74.11	Malignant neoplasm of medulla of right adrenal gland
C74.12	Malignant neoplasm of medulla of left adrenal gland
C74.90	Malignant neoplasm of unspecified part of unspecified adrenal gland
C74.91	Malignant neoplasm of unspecified part of right adrenal gland
C74.92	Malignant neoplasm of unspecified part of left adrenal gland
C75.0	Malignant neoplasm of parathyroid gland
C75.1	Malignant neoplasm of pituitary gland
C75.2	Malignant neoplasm of craniopharyngeal duct
C75.3	Malignant neoplasm of pineal gland
C75.4	Malignant neoplasm of carotid body
C75.5	Malignant neoplasm of aortic body and other paraganglia
C75.8	Malignant neoplasm with pluriglandular involvement, unspecified
C75.9	Malignant neoplasm of endocrine gland, unspecified
C76.0	Malignant neoplasm of head, face and neck
C76.1	Malignant neoplasm of thorax



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Code	Description
C76.2	Malignant neoplasm of abdomen
C76.3	Malignant neoplasm of pelvis
C76.40	Malignant neoplasm of unspecified upper limb
C76.41	Malignant neoplasm of right upper limb
C76.42	Malignant neoplasm of left upper limb
C76.50	Malignant neoplasm of unspecified lower limb
C76.51	Malignant neoplasm of right lower limb
C76.52	Malignant neoplasm of left lower limb
C76.8	Malignant neoplasm of other specified ill-defined sites
C77.0	Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck
C77.1	Secondary and unspecified malignant neoplasm of intrathoracic lymph nodes
C77.2	Secondary and unspecified malignant neoplasm of intra-abdominal lymph nodes
C77.3	Secondary and unspecified malignant neoplasm of axilla and upper limb lymph nodes
C77.4	Secondary and unspecified malignant neoplasm of inguinal and lower limb lymph nodes
C77.5	Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes
C77.8	Secondary and unspecified malignant neoplasm of lymph nodes of multiple regions
C77.9	Secondary and unspecified malignant neoplasm of lymph node, unspecified
C78.00	Secondary malignant neoplasm of unspecified lung
C78.01	Secondary malignant neoplasm of right lung
C78.02	Secondary malignant neoplasm of left lung
C78.1	Secondary malignant neoplasm of mediastinum
C78.2	Secondary malignant neoplasm of pleura
C78.30	Secondary malignant neoplasm of unspecified respiratory organ
C78.39	Secondary malignant neoplasm of other respiratory organs
C78.4	Secondary malignant neoplasm of small intestine
C78.5	Secondary malignant neoplasm of large intestine and rectum
C78.6	Secondary malignant neoplasm of retroperitoneum and peritoneum
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct
C78.80	Secondary malignant neoplasm of unspecified digestive organ
C78.89	Secondary malignant neoplasm of other digestive organs

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Code	Description
C79.00	Secondary malignant neoplasm of unspecified kidney and renal pelvis
C79.01	Secondary malignant neoplasm of right kidney and renal pelvis
C79.02	Secondary malignant neoplasm of left kidney and renal pelvis
C79.10	Secondary malignant neoplasm of unspecified urinary organs
C79.11	Secondary malignant neoplasm of bladder
C79.19	Secondary malignant neoplasm of other urinary organs
C79.2	Secondary malignant neoplasm of skin
C79.31	Secondary malignant neoplasm of brain
C79.32	Secondary malignant neoplasm of cerebral meninges
C79.40	Secondary malignant neoplasm of unspecified part of nervous system
C79.49	Secondary malignant neoplasm of other parts of nervous system
C79.51	Secondary malignant neoplasm of bone
C79.52	Secondary malignant neoplasm of bone marrow
C79.60	Secondary malignant neoplasm of unspecified ovary
C79.61	Secondary malignant neoplasm of right ovary
C79.62	Secondary malignant neoplasm of left ovary
C79.70	Secondary malignant neoplasm of unspecified adrenal gland
C79.71	Secondary malignant neoplasm of right adrenal gland
C79.72	Secondary malignant neoplasm of left adrenal gland
C79.81	Secondary malignant neoplasm of breast
C79.82	Secondary malignant neoplasm of genital organs
C79.89	Secondary malignant neoplasm of other specified sites
C79.9	Secondary malignant neoplasm of unspecified site
C7A.00	Malignant carcinoid tumor of unspecified site
C7A.010	Malignant carcinoid tumor of the duodenum
C7A.011	Malignant carcinoid tumor of the jejunum
C7A.012	Malignant carcinoid tumor of the ileum
C7A.019	Malignant carcinoid tumor of the small intestine, unspecified portion
C7A.020	Malignant carcinoid tumor of the appendix
C7A.021	Malignant carcinoid tumor of the cecum

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Code	Description
C7A.022	Malignant carcinoid tumor of the ascending colon
C7A.023	Malignant carcinoid tumor of the transverse colon
C7A.024	Malignant carcinoid tumor of the descending colon
C7A.025	Malignant carcinoid tumor of the sigmoid colon
C7A.026	Malignant carcinoid tumor of the rectum
C7A.029	Malignant carcinoid tumor of the large intestine, unspecified portion
C7A.090	Malignant carcinoid tumor of the bronchus and lung
C7A.091	Malignant carcinoid tumor of the thymus
C7A.092	Malignant carcinoid tumor of the stomach
C7A.093	Malignant carcinoid tumor of the kidney
C7A.094	Malignant carcinoid tumor of the foregut, unspecified
C7A.095	Malignant carcinoid tumor of the midgut, unspecified
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified
C7A.098	Malignant carcinoid tumors of other sites
C7A.1	Malignant poorly differentiated neuroendocrine tumors
C7A.8	Other malignant neuroendocrine tumors
C7B.00	Secondary carcinoid tumors, unspecified site
C7B.01	Secondary carcinoid tumors of distant lymph nodes
C7B.02	Secondary carcinoid tumors of liver
C7B.03	Secondary carcinoid tumors of bone
C7B.04	Secondary carcinoid tumors of peritoneum
C7B.09	Secondary carcinoid tumors of other sites
C7B.1	Secondary Merkel cell carcinoma
C7B.8	Other secondary neuroendocrine tumors
C80.0	Disseminated malignant neoplasm, unspecified
C80.1	Malignant (primary) neoplasm, unspecified
C80.2	Malignant neoplasm associated with transplanted organ
C81.00	Nodular lymphocyte predominant Hodgkin lymphoma, unspecified site
C81.01	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.02	Nodular lymphocyte predominant Hodgkin lymphoma, intrathoracic lymph nodes

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Code	Description
C81.03	Nodular lymphocyte predominant Hodgkin lymphoma, intra-abdominal lymph nodes
C81.04	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.05	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.06	Nodular lymphocyte predominant Hodgkin lymphoma, intrapelvic lymph nodes
C81.07	Nodular lymphocyte predominant Hodgkin lymphoma, spleen
C81.08	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of multiple sites
C81.09	Nodular lymphocyte predominant Hodgkin lymphoma, extranodal and solid organ sites
C81.10	Nodular sclerosis Hodgkin lymphoma, unspecified site
C81.11	Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.12	Nodular sclerosis Hodgkin lymphoma, intrathoracic lymph nodes
C81.13	Nodular sclerosis Hodgkin lymphoma, intra-abdominal lymph nodes
C81.14	Nodular sclerosis Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.15	Nodular sclerosis Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.16	Nodular sclerosis Hodgkin lymphoma, intrapelvic lymph nodes
C81.17	Nodular sclerosis Hodgkin lymphoma, spleen
C81.18	Nodular sclerosis Hodgkin lymphoma, lymph nodes of multiple sites
C81.19	Nodular sclerosis Hodgkin lymphoma, extranodal and solid organ sites
C81.20	Mixed cellularity Hodgkin lymphoma, unspecified site
C81.21	Mixed cellularity Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.22	Mixed cellularity Hodgkin lymphoma, intrathoracic lymph nodes
C81.23	Mixed cellularity Hodgkin lymphoma, intra-abdominal lymph nodes
C81.24	Mixed cellularity Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.25	Mixed cellularity Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.26	Mixed cellularity Hodgkin lymphoma, intrapelvic lymph nodes
C81.27	Mixed cellularity Hodgkin lymphoma, spleen
C81.28	Mixed cellularity Hodgkin lymphoma, lymph nodes of multiple sites
C81.29	Mixed cellularity Hodgkin lymphoma, extranodal and solid organ sites
C81.30	Lymphocyte depleted Hodgkin lymphoma, unspecified site
C81.31	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of head, face, and neck

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Code	Description
C81.32	Lymphocyte depleted Hodgkin lymphoma, intrathoracic lymph nodes
C81.33	Lymphocyte depleted Hodgkin lymphoma, intra-abdominal lymph nodes
C81.34	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.35	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.36	Lymphocyte depleted Hodgkin lymphoma, intrapelvic lymph nodes
C81.37	Lymphocyte depleted Hodgkin lymphoma, spleen
C81.38	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of multiple sites
C81.39	Lymphocyte depleted Hodgkin lymphoma, extranodal and solid organ sites
C81.40	Lymphocyte-rich Hodgkin lymphoma, unspecified site
C81.41	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.42	Lymphocyte-rich Hodgkin lymphoma, intrathoracic lymph nodes
C81.43	Lymphocyte-rich Hodgkin lymphoma, intra-abdominal lymph nodes
C81.44	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.45	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.46	Lymphocyte-rich Hodgkin lymphoma, intrapelvic lymph nodes
C81.47	Lymphocyte-rich Hodgkin lymphoma, spleen
C81.48	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of multiple sites
C81.49	Lymphocyte-rich Hodgkin lymphoma, extranodal and solid organ sites
C81.70	Other Hodgkin lymphoma, unspecified site
C81.71	Other Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.72	Other Hodgkin lymphoma, intrathoracic lymph nodes
C81.73	Other Hodgkin lymphoma, intra-abdominal lymph nodes
C81.74	Other Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.75	Other Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.76	Other Hodgkin lymphoma, intrapelvic lymph nodes
C81.77	Other Hodgkin lymphoma, spleen
C81.78	Other Hodgkin lymphoma, lymph nodes of multiple sites
C81.79	Other Hodgkin lymphoma, extranodal and solid organ sites
C81.90	Hodgkin lymphoma, unspecified, unspecified site
C81.91	Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck

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Code	Description
C81.92	Hodgkin lymphoma, unspecified, intrathoracic lymph nodes
C81.93	Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes
C81.94	Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb
C81.95	Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C81.96	Hodgkin lymphoma, unspecified, intrapelvic lymph nodes
C81.97	Hodgkin lymphoma, unspecified, spleen
C81.98	Hodgkin lymphoma, unspecified, lymph nodes of multiple sites
C81.99	Hodgkin lymphoma, unspecified, extranodal and solid organ sites
C82.00	Follicular lymphoma grade I, unspecified site
C82.01	Follicular lymphoma grade I, lymph nodes of head, face, and neck
C82.02	Follicular lymphoma grade I, intrathoracic lymph nodes
C82.03	Follicular lymphoma grade I, intra-abdominal lymph nodes
C82.04	Follicular lymphoma grade I, lymph nodes of axilla and upper limb
C82.05	Follicular lymphoma grade I, lymph nodes of inguinal region and lower limb
C82.06	Follicular lymphoma grade I, intrapelvic lymph nodes
C82.07	Follicular lymphoma grade I, spleen
C82.08	Follicular lymphoma grade I, lymph nodes of multiple sites
C82.09	Follicular lymphoma grade I, extranodal and solid organ sites
C82.10	Follicular lymphoma grade II, unspecified site
C82.11	Follicular lymphoma grade II, lymph nodes of head, face, and neck
C82.12	Follicular lymphoma grade II, intrathoracic lymph nodes
C82.13	Follicular lymphoma grade II, intra-abdominal lymph nodes
C82.14	Follicular lymphoma grade II, lymph nodes of axilla and upper limb
C82.15	Follicular lymphoma grade II, lymph nodes of inguinal region and lower limb
C82.16	Follicular lymphoma grade II, intrapelvic lymph nodes
C82.17	Follicular lymphoma grade II, spleen
C82.18	Follicular lymphoma grade II, lymph nodes of multiple sites
C82.19	Follicular lymphoma grade II, extranodal and solid organ sites
C82.20	Follicular lymphoma grade III, unspecified, unspecified site
C82.21	Follicular lymphoma grade III, unspecified, lymph nodes of head, face, and neck

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Code	Description
C82.22	Follicular lymphoma grade III, unspecified, intrathoracic lymph nodes
C82.23	Follicular lymphoma grade III, unspecified, intra-abdominal lymph nodes
C82.24	Follicular lymphoma grade III, unspecified, lymph nodes of axilla and upper limb
C82.25	Follicular lymphoma grade III, unspecified, lymph nodes of inguinal region and lower limb
C82.26	Follicular lymphoma grade III, unspecified, intrapelvic lymph nodes
C82.27	Follicular lymphoma grade III, unspecified, spleen
C82.28	Follicular lymphoma grade III, unspecified, lymph nodes of multiple sites
C82.29	Follicular lymphoma grade III, unspecified, extranodal and solid organ sites
C82.30	Follicular lymphoma grade IIIa, unspecified site
C82.31	Follicular lymphoma grade IIIa, lymph nodes of head, face, and neck
C82.32	Follicular lymphoma grade IIIa, intrathoracic lymph nodes
C82.33	Follicular lymphoma grade IIIa, intra-abdominal lymph nodes
C82.34	Follicular lymphoma grade IIIa, lymph nodes of axilla and upper limb
C82.35	Follicular lymphoma grade IIIa, lymph nodes of inguinal region and lower limb
C82.36	Follicular lymphoma grade IIIa, intrapelvic lymph nodes
C82.37	Follicular lymphoma grade IIIa, spleen
C82.38	Follicular lymphoma grade IIIa, lymph nodes of multiple sites
C82.39	Follicular lymphoma grade IIIa, extranodal and solid organ sites
C82.40	Follicular lymphoma grade IIIb, unspecified site
C82.41	Follicular lymphoma grade IIIb, lymph nodes of head, face, and neck
C82.42	Follicular lymphoma grade IIIb, intrathoracic lymph nodes
C82.43	Follicular lymphoma grade IIIb, intra-abdominal lymph nodes
C82.44	Follicular lymphoma grade IIIb, lymph nodes of axilla and upper limb
C82.45	Follicular lymphoma grade IIIb, lymph nodes of inguinal region and lower limb
C82.46	Follicular lymphoma grade IIIb, intrapelvic lymph nodes
C82.47	Follicular lymphoma grade IIIb, spleen
C82.48	Follicular lymphoma grade IIIb, lymph nodes of multiple sites
C82.49	Follicular lymphoma grade IIIb, extranodal and solid organ sites
C82.50	Diffuse follicle center lymphoma, unspecified site
C82.51	Diffuse follicle center lymphoma, lymph nodes of head, face, and neck

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Code	Description
C82.52	Diffuse follicle center lymphoma, intrathoracic lymph nodes
C82.53	Diffuse follicle center lymphoma, intra-abdominal lymph nodes
C82.54	Diffuse follicle center lymphoma, lymph nodes of axilla and upper limb
C82.55	Diffuse follicle center lymphoma, lymph nodes of inguinal region and lower limb
C82.56	Diffuse follicle center lymphoma, intrapelvic lymph nodes
C82.57	Diffuse follicle center lymphoma, spleen
C82.58	Diffuse follicle center lymphoma, lymph nodes of multiple sites
C82.59	Diffuse follicle center lymphoma, extranodal and solid organ sites
C82.60	Cutaneous follicle center lymphoma, unspecified site
C82.61	Cutaneous follicle center lymphoma, lymph nodes of head, face, and neck
C82.62	Cutaneous follicle center lymphoma, intrathoracic lymph nodes
C82.63	Cutaneous follicle center lymphoma, intra-abdominal lymph nodes
C82.64	Cutaneous follicle center lymphoma, lymph nodes of axilla and upper limb
C82.65	Cutaneous follicle center lymphoma, lymph nodes of inguinal region and lower limb
C82.66	Cutaneous follicle center lymphoma, intrapelvic lymph nodes
C82.67	Cutaneous follicle center lymphoma, spleen
C82.68	Cutaneous follicle center lymphoma, lymph nodes of multiple sites
C82.69	Cutaneous follicle center lymphoma, extranodal and solid organ sites
C82.80	Other types of follicular lymphoma, unspecified site
C82.81	Other types of follicular lymphoma, lymph nodes of head, face, and neck
C82.82	Other types of follicular lymphoma, intrathoracic lymph nodes
C82.83	Other types of follicular lymphoma, intra-abdominal lymph nodes
C82.84	Other types of follicular lymphoma, lymph nodes of axilla and upper limb
C82.85	Other types of follicular lymphoma, lymph nodes of inguinal region and lower limb
C82.86	Other types of follicular lymphoma, intrapelvic lymph nodes
C82.87	Other types of follicular lymphoma, spleen
C82.88	Other types of follicular lymphoma, lymph nodes of multiple sites
C82.89	Other types of follicular lymphoma, extranodal and solid organ sites
C82.90	Follicular lymphoma, unspecified, unspecified site
C82.91	Follicular lymphoma, unspecified, lymph nodes of head, face, and neck

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Code	Description
C82.92	Follicular lymphoma, unspecified, intrathoracic lymph nodes
C82.93	Follicular lymphoma, unspecified, intra-abdominal lymph nodes
C82.94	Follicular lymphoma, unspecified, lymph nodes of axilla and upper limb
C82.95	Follicular lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C82.96	Follicular lymphoma, unspecified, intrapelvic lymph nodes
C82.97	Follicular lymphoma, unspecified, spleen
C82.98	Follicular lymphoma, unspecified, lymph nodes of multiple sites
C82.99	Follicular lymphoma, unspecified, extranodal and solid organ sites
C83.00	Small cell B-cell lymphoma, unspecified site
C83.01	Small cell B-cell lymphoma, lymph nodes of head, face, and neck
C83.02	Small cell B-cell lymphoma, intrathoracic lymph nodes
C83.03	Small cell B-cell lymphoma, intra-abdominal lymph nodes
C83.04	Small cell B-cell lymphoma, lymph nodes of axilla and upper limb
C83.05	Small cell B-cell lymphoma, lymph nodes of inguinal region and lower limb
C83.06	Small cell B-cell lymphoma, intrapelvic lymph nodes
C83.07	Small cell B-cell lymphoma, spleen
C83.08	Small cell B-cell lymphoma, lymph nodes of multiple sites
C83.09	Small cell B-cell lymphoma, extranodal and solid organ sites
C83.10	Mantle cell lymphoma, unspecified site
C83.11	Mantle cell lymphoma, lymph nodes of head, face, and neck
C83.12	Mantle cell lymphoma, intrathoracic lymph nodes
C83.13	Mantle cell lymphoma, intra-abdominal lymph nodes
C83.14	Mantle cell lymphoma, lymph nodes of axilla and upper limb
C83.15	Mantle cell lymphoma, lymph nodes of inguinal region and lower limb
C83.16	Mantle cell lymphoma, intrapelvic lymph nodes
C83.17	Mantle cell lymphoma, spleen
C83.18	Mantle cell lymphoma, lymph nodes of multiple sites
C83.19	Mantle cell lymphoma, extranodal and solid organ sites
C83.30	Diffuse large B-cell lymphoma, unspecified site
C83.31	Diffuse large B-cell lymphoma, lymph nodes of head, face, and neck

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Code	Description
C83.32	Diffuse large B-cell lymphoma, intrathoracic lymph nodes
C83.33	Diffuse large B-cell lymphoma, intra-abdominal lymph nodes
C83.34	Diffuse large B-cell lymphoma, lymph nodes of axilla and upper limb
C83.35	Diffuse large B-cell lymphoma, lymph nodes of inguinal region and lower limb
C83.36	Diffuse large B-cell lymphoma, intrapelvic lymph nodes
C83.37	Diffuse large B-cell lymphoma, spleen
C83.38	Diffuse large B-cell lymphoma, lymph nodes of multiple sites
C83.39	Diffuse large B-cell lymphoma, extranodal and solid organ sites
C83.50	Lymphoblastic (diffuse) lymphoma, unspecified site
C83.51	Lymphoblastic (diffuse) lymphoma, lymph nodes of head, face, and neck
C83.52	Lymphoblastic (diffuse) lymphoma, intrathoracic lymph nodes
C83.53	Lymphoblastic (diffuse) lymphoma, intra-abdominal lymph nodes
C83.54	Lymphoblastic (diffuse) lymphoma, lymph nodes of axilla and upper limb
C83.55	Lymphoblastic (diffuse) lymphoma, lymph nodes of inguinal region and lower limb
C83.56	Lymphoblastic (diffuse) lymphoma, intrapelvic lymph nodes
C83.57	Lymphoblastic (diffuse) lymphoma, spleen
C83.58	Lymphoblastic (diffuse) lymphoma, lymph nodes of multiple sites
C83.59	Lymphoblastic (diffuse) lymphoma, extranodal and solid organ sites
C83.70	Burkitt lymphoma, unspecified site
C83.71	Burkitt lymphoma, lymph nodes of head, face, and neck
C83.72	Burkitt lymphoma, intrathoracic lymph nodes
C83.73	Burkitt lymphoma, intra-abdominal lymph nodes
C83.74	Burkitt lymphoma, lymph nodes of axilla and upper limb
C83.75	Burkitt lymphoma, lymph nodes of inguinal region and lower limb
C83.76	Burkitt lymphoma, intrapelvic lymph nodes
C83.77	Burkitt lymphoma, spleen
C83.78	Burkitt lymphoma, lymph nodes of multiple sites
C83.79	Burkitt lymphoma, extranodal and solid organ sites
C83.80	Other non-follicular lymphoma, unspecified site
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck

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Code	Description
C83.82	Other non-follicular lymphoma, intrathoracic lymph nodes
C83.83	Other non-follicular lymphoma, intra-abdominal lymph nodes
C83.84	Other non-follicular lymphoma, lymph nodes of axilla and upper limb
C83.85	Other non-follicular lymphoma, lymph nodes of inguinal region and lower limb
C83.86	Other non-follicular lymphoma, intrapelvic lymph nodes
C83.87	Other non-follicular lymphoma, spleen
C83.88	Other non-follicular lymphoma, lymph nodes of multiple sites
C83.89	Other non-follicular lymphoma, extranodal and solid organ sites
C83.90	Non-follicular (diffuse) lymphoma, unspecified, unspecified site
C83.91	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of head, face, and neck
C83.92	Non-follicular (diffuse) lymphoma, unspecified, intrathoracic lymph nodes
C83.93	Non-follicular (diffuse) lymphoma, unspecified, intra-abdominal lymph nodes
C83.94	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of axilla and upper limb
C83.95	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C83.96	Non-follicular (diffuse) lymphoma, unspecified, intrapelvic lymph nodes
C83.97	Non-follicular (diffuse) lymphoma, unspecified, spleen
C83.98	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of multiple sites
C83.99	Non-follicular (diffuse) lymphoma, unspecified, extranodal and solid organ sites
C84.00	Mycosis fungoides, unspecified site
C84.01	Mycosis fungoides, lymph nodes of head, face, and neck
C84.02	Mycosis fungoides, intrathoracic lymph nodes
C84.03	Mycosis fungoides, intra-abdominal lymph nodes
C84.04	Mycosis fungoides, lymph nodes of axilla and upper limb
C84.05	Mycosis fungoides, lymph nodes of inguinal region and lower limb
C84.06	Mycosis fungoides, intrapelvic lymph nodes
C84.07	Mycosis fungoides, spleen
C84.08	Mycosis fungoides, lymph nodes of multiple sites
C84.09	Mycosis fungoides, extranodal and solid organ sites
C84.10	Sezary disease, unspecified site
C84.11	Sezary disease, lymph nodes of head, face, and neck

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Code	Description
C84.12	Sezary disease, intrathoracic lymph nodes
C84.13	Sezary disease, intra-abdominal lymph nodes
C84.14	Sezary disease, lymph nodes of axilla and upper limb
C84.15	Sezary disease, lymph nodes of inguinal region and lower limb
C84.16	Sezary disease, intrapelvic lymph nodes
C84.17	Sezary disease, spleen
C84.18	Sezary disease, lymph nodes of multiple sites
C84.19	Sezary disease, extranodal and solid organ sites
C84.40	Peripheral T-cell lymphoma, not classified, unspecified site
C84.41	Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck
C84.42	Peripheral T-cell lymphoma, not classified, intrathoracic lymph nodes
C84.43	Peripheral T-cell lymphoma, not classified, intra-abdominal lymph nodes
C84.44	Peripheral T-cell lymphoma, not classified, lymph nodes of axilla and upper limb
C84.45	Peripheral T-cell lymphoma, not classified, lymph nodes of inguinal region and lower limb
C84.46	Peripheral T-cell lymphoma, not classified, intrapelvic lymph nodes
C84.47	Peripheral T-cell lymphoma, not classified, spleen
C84.48	Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites
C84.49	Peripheral T-cell lymphoma, not classified, extranodal and solid organ sites
C84.60	Anaplastic large cell lymphoma, ALK-positive, unspecified site
C84.61	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck
C84.62	Anaplastic large cell lymphoma, ALK-positive, intrathoracic lymph nodes
C84.63	Anaplastic large cell lymphoma, ALK-positive, intra-abdominal lymph nodes
C84.64	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of axilla and upper limb
C84.65	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of inguinal region and lower limb
C84.66	Anaplastic large cell lymphoma, ALK-positive, intrapelvic lymph nodes
C84.67	Anaplastic large cell lymphoma, ALK-positive, spleen
C84.68	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of multiple sites
C84.69	Anaplastic large cell lymphoma, ALK-positive, extranodal and solid organ sites
C84.70	Anaplastic large cell lymphoma, ALK-negative, unspecified site
C84.71	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck

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Code	Description
C84.72	Anaplastic large cell lymphoma, ALK-negative, intrathoracic lymph nodes
C84.73	Anaplastic large cell lymphoma, ALK-negative, intra-abdominal lymph nodes
C84.74	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of axilla and upper limb
C84.75	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of inguinal region and lower limb
C84.76	Anaplastic large cell lymphoma, ALK-negative, intrapelvic lymph nodes
C84.77	Anaplastic large cell lymphoma, ALK-negative, spleen
C84.78	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of multiple sites
C84.79	Anaplastic large cell lymphoma, ALK-negative, extranodal and solid organ sites
C84.90	Mature T/NK-cell lymphomas, unspecified, unspecified site
C84.91	Mature T/NK-cell lymphomas, unspecified, lymph nodes of head, face, and neck
C84.92	Mature T/NK-cell lymphomas, unspecified, intrathoracic lymph nodes
C84.93	Mature T/NK-cell lymphomas, unspecified, intra-abdominal lymph nodes
C84.94	Mature T/NK-cell lymphomas, unspecified, lymph nodes of axilla and upper limb
C84.95	Mature T/NK-cell lymphomas, unspecified, lymph nodes of inguinal region and lower limb
C84.96	Mature T/NK-cell lymphomas, unspecified, intrapelvic lymph nodes
C84.97	Mature T/NK-cell lymphomas, unspecified, spleen
C84.98	Mature T/NK-cell lymphomas, unspecified, lymph nodes of multiple sites
C84.99	Mature T/NK-cell lymphomas, unspecified, extranodal and solid organ sites
C84.A0	Cutaneous T-cell lymphoma, unspecified, unspecified site
C84.A1	Cutaneous T-cell lymphoma, unspecified lymph nodes of head, face, and neck
C84.A2	Cutaneous T-cell lymphoma, unspecified, intrathoracic lymph nodes
C84.A3	Cutaneous T-cell lymphoma, unspecified, intra-abdominal lymph nodes
C84.A4	Cutaneous T-cell lymphoma, unspecified, lymph nodes of axilla and upper limb
C84.A5	Cutaneous T-cell lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C84.A6	Cutaneous T-cell lymphoma, unspecified, intrapelvic lymph nodes
C84.A7	Cutaneous T-cell lymphoma, unspecified, spleen
C84.A8	Cutaneous T-cell lymphoma, unspecified, lymph nodes of multiple sites
C84.A9	Cutaneous T-cell lymphoma, unspecified, extranodal and solid organ sites
C84.Z0	Other mature T/NK-cell lymphomas, unspecified site
C84.Z1	Other mature T/NK-cell lymphomas, lymph nodes of head, face, and neck

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Code	Description
C84.Z2	Other mature T/NK-cell lymphomas, intrathoracic lymph nodes
C84.Z3	Other mature T/NK-cell lymphomas, intra-abdominal lymph nodes
C84.Z4	Other mature T/NK-cell lymphomas, lymph nodes of axilla and upper limb
C84.Z5	Other mature T/NK-cell lymphomas, lymph nodes of inguinal region and lower limb
C84.Z6	Other mature T/NK-cell lymphomas, intrapelvic lymph nodes
C84.Z7	Other mature T/NK-cell lymphomas, spleen
C84.Z8	Other mature T/NK-cell lymphomas, lymph nodes of multiple sites
C84.Z9	Other mature T/NK-cell lymphomas, extranodal and solid organ sites
C85.10	Unspecified B-cell lymphoma, unspecified site
C85.11	Unspecified B-cell lymphoma, lymph nodes of head, face, and neck
C85.12	Unspecified B-cell lymphoma, intrathoracic lymph nodes
C85.13	Unspecified B-cell lymphoma, intra-abdominal lymph nodes
C85.14	Unspecified B-cell lymphoma, lymph nodes of axilla and upper limb
C85.15	Unspecified B-cell lymphoma, lymph nodes of inguinal region and lower limb
C85.16	Unspecified B-cell lymphoma, intrapelvic lymph nodes
C85.17	Unspecified B-cell lymphoma, spleen
C85.18	Unspecified B-cell lymphoma, lymph nodes of multiple sites
C85.19	Unspecified B-cell lymphoma, extranodal and solid organ sites
C85.20	Mediastinal (thymic) large B-cell lymphoma, unspecified site
C85.21	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of head, face, and neck
C85.22	Mediastinal (thymic) large B-cell lymphoma, intrathoracic lymph nodes
C85.23	Mediastinal (thymic) large B-cell lymphoma, intra-abdominal lymph nodes
C85.24	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of axilla and upper limb
C85.25	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of inguinal region and lower limb
C85.26	Mediastinal (thymic) large B-cell lymphoma, intrapelvic lymph nodes
C85.27	Mediastinal (thymic) large B-cell lymphoma, spleen
C85.28	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of multiple sites
C85.29	Mediastinal (thymic) large B-cell lymphoma, extranodal and solid organ sites
C85.80	Other specified types of non-Hodgkin lymphoma, unspecified site
C85.81	Other specified types of non-Hodgkin lymphoma, lymph nodes of head, face, and neck



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Code	Description
C85.82	Other specified types of non-Hodgkin lymphoma, intrathoracic lymph nodes
C85.83	Other specified types of non-Hodgkin lymphoma, intra-abdominal lymph nodes
C85.84	Other specified types of non-Hodgkin lymphoma, lymph nodes of axilla and upper limb
C85.85	Other specified types of non-Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C85.86	Other specified types of non-Hodgkin lymphoma, intrapelvic lymph nodes
C85.87	Other specified types of non-Hodgkin lymphoma, spleen
C85.88	Other specified types of non-Hodgkin lymphoma, lymph nodes of multiple sites
C85.89	Other specified types of non-Hodgkin lymphoma, extranodal and solid organ sites
C85.90	Non-Hodgkin lymphoma, unspecified, unspecified site
C85.91	Non-Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck
C85.92	Non-Hodgkin lymphoma, unspecified, intrathoracic lymph nodes
C85.93	Non-Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes
C85.94	Non-Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb
C85.95	Non-Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C85.96	Non-Hodgkin lymphoma, unspecified, intrapelvic lymph nodes
C85.97	Non-Hodgkin lymphoma, unspecified, spleen
C85.98	Non-Hodgkin lymphoma, unspecified, lymph nodes of multiple sites
C85.99	Non-Hodgkin lymphoma, unspecified, extranodal and solid organ sites
C86.0	Extranodal NK/T-cell lymphoma, nasal type
C86.1	Hepatosplenic T-cell lymphoma
C86.2	Enteropathy-type (intestinal) T-cell lymphoma
C86.3	Subcutaneous panniculitis-like T-cell lymphoma
C86.4	Blastic NK-cell lymphoma
C86.5	Angioimmunoblastic T-cell lymphoma
C86.6	Primary cutaneous CD30-positive T-cell proliferations
C88.2	Heavy chain disease
C88.3	Immunoproliferative small intestinal disease
C88.4	Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue [MALT-lymphoma]
C88.8	Other malignant immunoproliferative diseases

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Code	Description
C88.9	Malignant immunoproliferative disease, unspecified
C90.00	Multiple myeloma not having achieved remission
C90.01	Multiple myeloma in remission
C90.02	Multiple myeloma in relapse
C90.10	Plasma cell leukemia not having achieved remission
C90.11	Plasma cell leukemia in remission
C90.12	Plasma cell leukemia in relapse
C90.20	Extramedullary plasmacytoma not having achieved remission
C90.21	Extramedullary plasmacytoma in remission
C90.22	Extramedullary plasmacytoma in relapse
C90.30	Solitary plasmacytoma not having achieved remission
C90.31	Solitary plasmacytoma in remission
C90.32	Solitary plasmacytoma in relapse
C91.00	Acute lymphoblastic leukemia not having achieved remission
C91.01	Acute lymphoblastic leukemia, in remission
C91.02	Acute lymphoblastic leukemia, in relapse
C91.10	Chronic lymphocytic leukemia of B-cell type not having achieved remission
C91.11	Chronic lymphocytic leukemia of B-cell type in remission
C91.12	Chronic lymphocytic leukemia of B-cell type in relapse
C91.30	Prolymphocytic leukemia of B-cell type not having achieved remission
C91.31	Prolymphocytic leukemia of B-cell type, in remission
C91.32	Prolymphocytic leukemia of B-cell type, in relapse
C91.40	Hairy cell leukemia not having achieved remission
C91.41	Hairy cell leukemia, in remission
C91.42	Hairy cell leukemia, in relapse
C91.50	Adult T-cell lymphoma/leukemia (HTLV-1-associated) not having achieved remission
C91.51	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in remission
C91.52	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in relapse
C91.60	Prolymphocytic leukemia of T-cell type not having achieved remission
C91.61	Prolymphocytic leukemia of T-cell type, in remission

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Code	Description
C91.62	Prolymphocytic leukemia of T-cell type, in relapse
C91.90	Lymphoid leukemia, unspecified not having achieved remission
C91.91	Lymphoid leukemia, unspecified, in remission
C91.92	Lymphoid leukemia, unspecified, in relapse
C91.A0	Mature B-cell leukemia Burkitt-type not having achieved remission
C91.A1	Mature B-cell leukemia Burkitt-type, in remission
C91.A2	Mature B-cell leukemia Burkitt-type, in relapse
C91.Z0	Other lymphoid leukemia not having achieved remission
C91.Z1	Other lymphoid leukemia, in remission
C91.Z2	Other lymphoid leukemia, in relapse
C92.00	Acute myeloblastic leukemia, not having achieved remission
C92.01	Acute myeloblastic leukemia, in remission
C92.02	Acute myeloblastic leukemia, in relapse
C92.10	Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission
C92.11	Chronic myeloid leukemia, BCR/ABL-positive, in remission
C92.12	Chronic myeloid leukemia, BCR/ABL-positive, in relapse
C92.20	Atypical chronic myeloid leukemia, BCR/ABL-negative, not having achieved remission
C92.21	Atypical chronic myeloid leukemia, BCR/ABL-negative, in remission
C92.22	Atypical chronic myeloid leukemia, BCR/ABL-negative, in relapse
C92.30	Myeloid sarcoma, not having achieved remission
C92.31	Myeloid sarcoma, in remission
C92.32	Myeloid sarcoma, in relapse
C92.40	Acute promyelocytic leukemia, not having achieved remission
C92.41	Acute promyelocytic leukemia, in remission
C92.42	Acute promyelocytic leukemia, in relapse
C92.50	Acute myelomonocytic leukemia, not having achieved remission
C92.51	Acute myelomonocytic leukemia, in remission
C92.52	Acute myelomonocytic leukemia, in relapse
C92.60	Acute myeloid leukemia with 11q23-abnormality not having achieved remission
C92.61	Acute myeloid leukemia with 11q23-abnormality in remission

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Code	Description
C92.62	Acute myeloid leukemia with 11q23-abnormality in relapse
C92.90	Myeloid leukemia, unspecified, not having achieved remission
C92.91	Myeloid leukemia, unspecified in remission
C92.92	Myeloid leukemia, unspecified in relapse
C92.A0	Acute myeloid leukemia with multilineage dysplasia, not having achieved remission
C92.A1	Acute myeloid leukemia with multilineage dysplasia, in remission
C92.A2	Acute myeloid leukemia with multilineage dysplasia, in relapse
C92.Z0	Other myeloid leukemia not having achieved remission
C92.Z1	Other myeloid leukemia, in remission
C92.Z2	Other myeloid leukemia, in relapse
C93.00	Acute monoblastic/monocytic leukemia, not having achieved remission
C93.01	Acute monoblastic/monocytic leukemia, in remission
C93.02	Acute monoblastic/monocytic leukemia, in relapse
C93.10	Chronic myelomonocytic leukemia not having achieved remission
C93.11	Chronic myelomonocytic leukemia, in remission
C93.12	Chronic myelomonocytic leukemia, in relapse
C93.30	Juvenile myelomonocytic leukemia, not having achieved remission
C93.31	Juvenile myelomonocytic leukemia, in remission
C93.32	Juvenile myelomonocytic leukemia, in relapse
C93.90	Monocytic leukemia, unspecified, not having achieved remission
C93.91	Monocytic leukemia, unspecified in remission
C93.92	Monocytic leukemia, unspecified in relapse
C93.Z0	Other monocytic leukemia, not having achieved remission
C93.Z1	Other monocytic leukemia, in remission
C93.Z2	Other monocytic leukemia, in relapse
C94.00	Acute erythroid leukemia, not having achieved remission
C94.01	Acute erythroid leukemia, in remission
C94.02	Acute erythroid leukemia, in relapse
C94.20	Acute megakaryoblastic leukemia not having achieved remission
C94.21	Acute megakaryoblastic leukemia, in remission



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Code	Description
C94.22	Acute megakaryoblastic leukemia, in relapse
C94.30	Mast cell leukemia not having achieved remission
C94.31	Mast cell leukemia, in remission
C94.32	Mast cell leukemia, in relapse
C94.40	Acute panmyelosis with myelofibrosis not having achieved remission
C94.41	Acute panmyelosis with myelofibrosis, in remission
C94.42	Acute panmyelosis with myelofibrosis, in relapse
C94.6	Myelodysplastic disease, not classified
C94.80	Other specified leukemias not having achieved remission
C94.81	Other specified leukemias, in remission
C94.82	Other specified leukemias, in relapse
C95.00	Acute leukemia of unspecified cell type not having achieved remission
C95.01	Acute leukemia of unspecified cell type, in remission
C95.02	Acute leukemia of unspecified cell type, in relapse
C95.10	Chronic leukemia of unspecified cell type not having achieved remission
C95.11	Chronic leukemia of unspecified cell type, in remission
C95.12	Chronic leukemia of unspecified cell type, in relapse
C95.90	Leukemia, unspecified not having achieved remission
C95.91	Leukemia, unspecified, in remission
C95.92	Leukemia, unspecified, in relapse
C96.0	Multifocal and multisystemic (disseminated) Langerhans-cell histiocytosis
C96.2	Malignant mast cell tumor
C96.4	Sarcoma of dendritic cells (accessory cells)
C96.9	Malignant neoplasm of lymphoid, hematopoietic and related tissue, unspecified
C96.A	Histiocytic sarcoma
C96.Z	Other specified malignant neoplasms of lymphoid, hematopoietic and related tissue
D00.00	Carcinoma in situ of oral cavity, unspecified site
D00.01	Carcinoma in situ of labial mucosa and vermilion border
D00.02	Carcinoma in situ of buccal mucosa
D00.03	Carcinoma in situ of gingiva and edentulous alveolar ridge



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Code	Description
D00.04	Carcinoma in situ of soft palate
D00.05	Carcinoma in situ of hard palate
D00.06	Carcinoma in situ of floor of mouth
D00.07	Carcinoma in situ of tongue
D00.08	Carcinoma in situ of pharynx
D00.1	Carcinoma in situ of esophagus
D00.2	Carcinoma in situ of stomach
D01.0	Carcinoma in situ of colon
D01.1	Carcinoma in situ of rectosigmoid junction
D01.2	Carcinoma in situ of rectum
D01.3	Carcinoma in situ of anus and anal canal
D01.40	Carcinoma in situ of unspecified part of intestine
D01.49	Carcinoma in situ of other parts of intestine
D01.5	Carcinoma in situ of liver, gallbladder and bile ducts
D01.7	Carcinoma in situ of other specified digestive organs
D01.9	Carcinoma in situ of digestive organ, unspecified
D02.0	Carcinoma in situ of larynx
D02.1	Carcinoma in situ of trachea
D02.20	Carcinoma in situ of unspecified bronchus and lung
D02.21	Carcinoma in situ of right bronchus and lung
D02.22	Carcinoma in situ of left bronchus and lung
D02.3	Carcinoma in situ of other parts of respiratory system
D02.4	Carcinoma in situ of respiratory system, unspecified
D03.0	Melanoma in situ of lip
D03.10	Melanoma in situ of unspecified eyelid, including canthus
D03.11	Melanoma in situ of right eyelid, including canthus
D03.12	Melanoma in situ of left eyelid, including canthus
D03.20	Melanoma in situ of unspecified ear and external auricular canal
D03.21	Melanoma in situ of right ear and external auricular canal
D03.22	Melanoma in situ of left ear and external auricular canal



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Code	Description
D03.30	Melanoma in situ of unspecified part of face
D03.39	Melanoma in situ of other parts of face
D03.4	Melanoma in situ of scalp and neck
D03.51	Melanoma in situ of anal skin
D03.52	Melanoma in situ of breast (skin) (soft tissue)
D03.59	Melanoma in situ of other part of trunk
D03.60	Melanoma in situ of unspecified upper limb, including shoulder
D03.61	Melanoma in situ of right upper limb, including shoulder
D03.62	Melanoma in situ of left upper limb, including shoulder
D03.70	Melanoma in situ of unspecified lower limb, including hip
D03.71	Melanoma in situ of right lower limb, including hip
D03.72	Melanoma in situ of left lower limb, including hip
D03.8	Melanoma in situ of other sites
D03.9	Melanoma in situ, unspecified
D04.0	Carcinoma in situ of skin of lip
D04.10	Carcinoma in situ of skin of unspecified eyelid, including canthus
D04.11	Carcinoma in situ of skin of right eyelid, including canthus
D04.12	Carcinoma in situ of skin of left eyelid, including canthus
D04.20	Carcinoma in situ of skin of unspecified ear and external auricular canal
D04.21	Carcinoma in situ of skin of right ear and external auricular canal
D04.22	Carcinoma in situ of skin of left ear and external auricular canal
D04.30	Carcinoma in situ of skin of unspecified part of face
D04.39	Carcinoma in situ of skin of other parts of face
D04.4	Carcinoma in situ of skin of scalp and neck
D04.5	Carcinoma in situ of skin of trunk
D04.60	Carcinoma in situ of skin of unspecified upper limb, including shoulder
D04.61	Carcinoma in situ of skin of right upper limb, including shoulder
D04.62	Carcinoma in situ of skin of left upper limb, including shoulder
D04.70	Carcinoma in situ of skin of unspecified lower limb, including hip
D04.71	Carcinoma in situ of skin of right lower limb, including hip



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Code	Description
D04.72	Carcinoma in situ of skin of left lower limb, including hip
D04.8	Carcinoma in situ of skin of other sites
D04.9	Carcinoma in situ of skin, unspecified
D05.00	Lobular carcinoma in situ of unspecified breast
D05.01	Lobular carcinoma in situ of right breast
D05.02	Lobular carcinoma in situ of left breast
D05.10	Intraductal carcinoma in situ of unspecified breast
D05.11	Intraductal carcinoma in situ of right breast
D05.12	Intraductal carcinoma in situ of left breast
D05.80	Other specified type of carcinoma in situ of unspecified breast
D05.81	Other specified type of carcinoma in situ of right breast
D05.82	Other specified type of carcinoma in situ of left breast
D05.90	Unspecified type of carcinoma in situ of unspecified breast
D05.91	Unspecified type of carcinoma in situ of right breast
D05.92	Unspecified type of carcinoma in situ of left breast
D06.0	Carcinoma in situ of endocervix
D06.1	Carcinoma in situ of exocervix
D06.7	Carcinoma in situ of other parts of cervix
D06.9	Carcinoma in situ of cervix, unspecified
D07.0	Carcinoma in situ of endometrium
D07.1	Carcinoma in situ of vulva
D07.2	Carcinoma in situ of vagina
D07.30	Carcinoma in situ of unspecified female genital organs
D07.39	Carcinoma in situ of other female genital organs
D07.4	Carcinoma in situ of penis
D07.5	Carcinoma in situ of prostate
D07.60	Carcinoma in situ of unspecified male genital organs
D07.61	Carcinoma in situ of scrotum
D07.69	Carcinoma in situ of other male genital organs
D09.0	Carcinoma in situ of bladder



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Code	Description
D09.10	Carcinoma in situ of unspecified urinary organ
D09.19	Carcinoma in situ of other urinary organs
D09.20	Carcinoma in situ of unspecified eye
D09.21	Carcinoma in situ of right eye
D09.22	Carcinoma in situ of left eye
D09.3	Carcinoma in situ of thyroid and other endocrine glands
D09.8	Carcinoma in situ of other specified sites
D09.9	Carcinoma in situ, unspecified
D10.0	Benign neoplasm of lip
D10.1	Benign neoplasm of tongue
D10.2	Benign neoplasm of floor of mouth
D10.30	Benign neoplasm of unspecified part of mouth
D10.39	Benign neoplasm of other parts of mouth
D10.4	Benign neoplasm of tonsil
D10.5	Benign neoplasm of other parts of oropharynx
D10.6	Benign neoplasm of nasopharynx
D10.7	Benign neoplasm of hypopharynx
D10.9	Benign neoplasm of pharynx, unspecified
D11.0	Benign neoplasm of parotid gland
D11.7	Benign neoplasm of other major salivary glands
D11.9	Benign neoplasm of major salivary gland, unspecified
D12.0	Benign neoplasm of cecum
D12.1	Benign neoplasm of appendix
D12.2	Benign neoplasm of ascending colon
D12.3	Benign neoplasm of transverse colon
D12.4	Benign neoplasm of descending colon
D12.5	Benign neoplasm of sigmoid colon
D12.6	Benign neoplasm of colon, unspecified
D12.7	Benign neoplasm of rectosigmoid junction
D12.8	Benign neoplasm of rectum

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Code	Description
D12.9	Benign neoplasm of anus and anal canal
D13.0	Benign neoplasm of esophagus
D13.1	Benign neoplasm of stomach
D13.2	Benign neoplasm of duodenum
D13.30	Benign neoplasm of unspecified part of small intestine
D13.39	Benign neoplasm of other parts of small intestine
D13.4	Benign neoplasm of liver
D13.5	Benign neoplasm of extrahepatic bile ducts
D13.6	Benign neoplasm of pancreas
D13.7	Benign neoplasm of endocrine pancreas
D13.9	Benign neoplasm of ill-defined sites within the digestive system
D14.0	Benign neoplasm of middle ear, nasal cavity and accessory sinuses
D14.1	Benign neoplasm of larynx
D14.2	Benign neoplasm of trachea
D14.30	Benign neoplasm of unspecified bronchus and lung
D14.31	Benign neoplasm of right bronchus and lung
D14.32	Benign neoplasm of left bronchus and lung
D14.4	Benign neoplasm of respiratory system, unspecified
D15.0	Benign neoplasm of thymus
D15.1	Benign neoplasm of heart
D15.2	Benign neoplasm of mediastinum
D15.7	Benign neoplasm of other specified intrathoracic organs
D15.9	Benign neoplasm of intrathoracic organ, unspecified
D16.00	Benign neoplasm of scapula and long bones of unspecified upper limb
D16.01	Benign neoplasm of scapula and long bones of right upper limb
D16.02	Benign neoplasm of scapula and long bones of left upper limb
D16.10	Benign neoplasm of short bones of unspecified upper limb
D16.11	Benign neoplasm of short bones of right upper limb
D16.12	Benign neoplasm of short bones of left upper limb
D16.20	Benign neoplasm of long bones of unspecified lower limb

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Code	Description
D16.21	Benign neoplasm of long bones of right lower limb
D16.22	Benign neoplasm of long bones of left lower limb
D16.30	Benign neoplasm of short bones of unspecified lower limb
D16.31	Benign neoplasm of short bones of right lower limb
D16.32	Benign neoplasm of short bones of left lower limb
D16.4	Benign neoplasm of bones of skull and face
D16.5	Benign neoplasm of lower jaw bone
D16.6	Benign neoplasm of vertebral column
D16.7	Benign neoplasm of ribs, sternum and clavicle
D16.8	Benign neoplasm of pelvic bones, sacrum and coccyx
D16.9	Benign neoplasm of bone and articular cartilage, unspecified
D17.0	Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck
D17.1	Benign lipomatous neoplasm of skin and subcutaneous tissue of trunk
D17.20	Benign lipomatous neoplasm of skin and subcutaneous tissue of unspecified limb
D17.21	Benign lipomatous neoplasm of skin and subcutaneous tissue of right arm
D17.22	Benign lipomatous neoplasm of skin and subcutaneous tissue of left arm
D17.23	Benign lipomatous neoplasm of skin and subcutaneous tissue of right leg
D17.24	Benign lipomatous neoplasm of skin and subcutaneous tissue of left leg
D17.30	Benign lipomatous neoplasm of skin and subcutaneous tissue of unspecified sites
D17.39	Benign lipomatous neoplasm of skin and subcutaneous tissue of other sites
D17.4	Benign lipomatous neoplasm of intrathoracic organs
D17.5	Benign lipomatous neoplasm of intra-abdominal organs
D17.6	Benign lipomatous neoplasm of spermatic cord
D17.71	Benign lipomatous neoplasm of kidney
D17.72	Benign lipomatous neoplasm of other genitourinary organ
D17.79	Benign lipomatous neoplasm of other sites
D17.9	Benign lipomatous neoplasm, unspecified
D18.00	Hemangioma unspecified site
D18.01	Hemangioma of skin and subcutaneous tissue
D18.02	Hemangioma of intracranial structures

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Code	Description
D18.03	Hemangioma of intra-abdominal structures
D18.09	Hemangioma of other sites
D18.1	Lymphangioma, any site
D19.0	Benign neoplasm of mesothelial tissue of pleura
D19.1	Benign neoplasm of mesothelial tissue of peritoneum
D19.7	Benign neoplasm of mesothelial tissue of other sites
D19.9	Benign neoplasm of mesothelial tissue, unspecified
D20.0	Benign neoplasm of soft tissue of retroperitoneum
D20.1	Benign neoplasm of soft tissue of peritoneum
D21.0	Benign neoplasm of connective and other soft tissue of head, face and neck
D21.10	Benign neoplasm of connective and other soft tissue of unspecified upper limb, including shoulder
D21.11	Benign neoplasm of connective and other soft tissue of right upper limb, including shoulder
D21.12	Benign neoplasm of connective and other soft tissue of left upper limb, including shoulder
D21.20	Benign neoplasm of connective and other soft tissue of unspecified lower limb, including hip
D21.21	Benign neoplasm of connective and other soft tissue of right lower limb, including hip
D21.22	Benign neoplasm of connective and other soft tissue of left lower limb, including hip
D21.3	Benign neoplasm of connective and other soft tissue of thorax
D21.4	Benign neoplasm of connective and other soft tissue of abdomen
D21.5	Benign neoplasm of connective and other soft tissue of pelvis
D21.6	Benign neoplasm of connective and other soft tissue of trunk, unspecified
D21.9	Benign neoplasm of connective and other soft tissue, unspecified
D22.0	Melanocytic nevi of lip
D22.10	Melanocytic nevi of unspecified eyelid, including canthus
D22.11	Melanocytic nevi of right eyelid, including canthus
D22.12	Melanocytic nevi of left eyelid, including canthus
D22.20	Melanocytic nevi of unspecified ear and external auricular canal
D22.21	Melanocytic nevi of right ear and external auricular canal
D22.22	Melanocytic nevi of left ear and external auricular canal
D22.30	Melanocytic nevi of unspecified part of face

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Code	Description
D22.39	Melanocytic nevi of other parts of face
D22.4	Melanocytic nevi of scalp and neck
D22.5	Melanocytic nevi of trunk
D22.60	Melanocytic nevi of unspecified upper limb, including shoulder
D22.61	Melanocytic nevi of right upper limb, including shoulder
D22.62	Melanocytic nevi of left upper limb, including shoulder
D22.70	Melanocytic nevi of unspecified lower limb, including hip
D22.71	Melanocytic nevi of right lower limb, including hip
D22.72	Melanocytic nevi of left lower limb, including hip
D22.9	Melanocytic nevi, unspecified
D23.0	Other benign neoplasm of skin of lip
D23.10	Other benign neoplasm of skin of unspecified eyelid, including canthus
D23.11	Other benign neoplasm of skin of right eyelid, including canthus
D23.12	Other benign neoplasm of skin of left eyelid, including canthus
D23.20	Other benign neoplasm of skin of unspecified ear and external auricular canal
D23.21	Other benign neoplasm of skin of right ear and external auricular canal
D23.22	Other benign neoplasm of skin of left ear and external auricular canal
D23.30	Other benign neoplasm of skin of unspecified part of face
D23.39	Other benign neoplasm of skin of other parts of face
D23.4	Other benign neoplasm of skin of scalp and neck
D23.5	Other benign neoplasm of skin of trunk
D23.60	Other benign neoplasm of skin of unspecified upper limb, including shoulder
D23.61	Other benign neoplasm of skin of right upper limb, including shoulder
D23.62	Other benign neoplasm of skin of left upper limb, including shoulder
D23.70	Other benign neoplasm of skin of unspecified lower limb, including hip
D23.71	Other benign neoplasm of skin of right lower limb, including hip
D23.72	Other benign neoplasm of skin of left lower limb, including hip
D23.9	Other benign neoplasm of skin, unspecified
D24.1	Benign neoplasm of right breast
D24.2	Benign neoplasm of left breast



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Code	Description
D24.9	Benign neoplasm of unspecified breast
D25.0	Submucous leiomyoma of uterus
D25.1	Intramural leiomyoma of uterus
D25.2	Subserosal leiomyoma of uterus
D25.9	Leiomyoma of uterus, unspecified
D26.0	Other benign neoplasm of cervix uteri
D26.1	Other benign neoplasm of corpus uteri
D26.7	Other benign neoplasm of other parts of uterus
D26.9	Other benign neoplasm of uterus, unspecified
D27.0	Benign neoplasm of right ovary
D27.1	Benign neoplasm of left ovary
D27.9	Benign neoplasm of unspecified ovary
D28.0	Benign neoplasm of vulva
D28.1	Benign neoplasm of vagina
D28.2	Benign neoplasm of uterine tubes and ligaments
D28.7	Benign neoplasm of other specified female genital organs
D28.9	Benign neoplasm of female genital organ, unspecified
D29.0	Benign neoplasm of penis
D29.1	Benign neoplasm of prostate
D29.20	Benign neoplasm of unspecified testis
D29.21	Benign neoplasm of right testis
D29.22	Benign neoplasm of left testis
D29.30	Benign neoplasm of unspecified epididymis
D29.31	Benign neoplasm of right epididymis
D29.32	Benign neoplasm of left epididymis
D29.4	Benign neoplasm of scrotum
D29.8	Benign neoplasm of other specified male genital organs
D29.9	Benign neoplasm of male genital organ, unspecified
D30.00	Benign neoplasm of unspecified kidney
D30.01	Benign neoplasm of right kidney



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Code	Description
D30.02	Benign neoplasm of left kidney
D30.10	Benign neoplasm of unspecified renal pelvis
D30.11	Benign neoplasm of right renal pelvis
D30.12	Benign neoplasm of left renal pelvis
D30.20	Benign neoplasm of unspecified ureter
D30.21	Benign neoplasm of right ureter
D30.22	Benign neoplasm of left ureter
D30.3	Benign neoplasm of bladder
D30.4	Benign neoplasm of urethra
D30.8	Benign neoplasm of other specified urinary organs
D30.9	Benign neoplasm of urinary organ, unspecified
D31.00	Benign neoplasm of unspecified conjunctiva
D31.01	Benign neoplasm of right conjunctiva
D31.02	Benign neoplasm of left conjunctiva
D31.10	Benign neoplasm of unspecified cornea
D31.11	Benign neoplasm of right cornea
D31.12	Benign neoplasm of left cornea
D31.20	Benign neoplasm of unspecified retina
D31.21	Benign neoplasm of right retina
D31.22	Benign neoplasm of left retina
D31.30	Benign neoplasm of unspecified choroid
D31.31	Benign neoplasm of right choroid
D31.32	Benign neoplasm of left choroid
D31.40	Benign neoplasm of unspecified ciliary body
D31.41	Benign neoplasm of right ciliary body
D31.42	Benign neoplasm of left ciliary body
D31.50	Benign neoplasm of unspecified lacrimal gland and duct
D31.51	Benign neoplasm of right lacrimal gland and duct
D31.52	Benign neoplasm of left lacrimal gland and duct
D31.60	Benign neoplasm of unspecified site of unspecified orbit

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Code	Description
D31.61	Benign neoplasm of unspecified site of right orbit
D31.62	Benign neoplasm of unspecified site of left orbit
D31.90	Benign neoplasm of unspecified part of unspecified eye
D31.91	Benign neoplasm of unspecified part of right eye
D31.92	Benign neoplasm of unspecified part of left eye
D32.0	Benign neoplasm of cerebral meninges
D32.1	Benign neoplasm of spinal meninges
D32.9	Benign neoplasm of meninges, unspecified
D33.0	Benign neoplasm of brain, supratentorial
D33.1	Benign neoplasm of brain, infratentorial
D33.2	Benign neoplasm of brain, unspecified
D33.3	Benign neoplasm of cranial nerves
D33.4	Benign neoplasm of spinal cord
D33.7	Benign neoplasm of other specified parts of central nervous system
D33.9	Benign neoplasm of central nervous system, unspecified
D34	Benign neoplasm of thyroid gland
D35.00	Benign neoplasm of unspecified adrenal gland
D35.01	Benign neoplasm of right adrenal gland
D35.02	Benign neoplasm of left adrenal gland
D35.1	Benign neoplasm of parathyroid gland
D35.2	Benign neoplasm of pituitary gland
D35.3	Benign neoplasm of craniopharyngeal duct
D35.4	Benign neoplasm of pineal gland
D35.5	Benign neoplasm of carotid body
D35.6	Benign neoplasm of aortic body and other paraganglia
D35.7	Benign neoplasm of other specified endocrine glands
D35.9	Benign neoplasm of endocrine gland, unspecified
D36.0	Benign neoplasm of lymph nodes
D36.10	Benign neoplasm of peripheral nerves and autonomic nervous system, unspecified
D36.11	Benign neoplasm of peripheral nerves and autonomic nervous system of face, head, and neck

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Code	Description
D36.12	Benign neoplasm of peripheral nerves and autonomic nervous system, upper limb, including shoulder
D36.13	Benign neoplasm of peripheral nerves and autonomic nervous system of lower limb, including hip
D36.14	Benign neoplasm of peripheral nerves and autonomic nervous system of thorax
D36.15	Benign neoplasm of peripheral nerves and autonomic nervous system of abdomen
D36.16	Benign neoplasm of peripheral nerves and autonomic nervous system of pelvis
D36.17	Benign neoplasm of peripheral nerves and autonomic nervous system of trunk, unspecified
D36.7	Benign neoplasm of other specified sites
D36.9	Benign neoplasm, unspecified site
D37.01	Neoplasm of uncertain behavior of lip
D37.02	Neoplasm of uncertain behavior of tongue
D37.030	Neoplasm of uncertain behavior of the parotid salivary glands
D37.031	Neoplasm of uncertain behavior of the sublingual salivary glands
D37.032	Neoplasm of uncertain behavior of the submandibular salivary glands
D37.039	Neoplasm of uncertain behavior of the major salivary glands, unspecified
D37.04	Neoplasm of uncertain behavior of the minor salivary glands
D37.05	Neoplasm of uncertain behavior of pharynx
D37.09	Neoplasm of uncertain behavior of other specified sites of the oral cavity
D37.1	Neoplasm of uncertain behavior of stomach
D37.2	Neoplasm of uncertain behavior of small intestine
D37.3	Neoplasm of uncertain behavior of appendix
D37.4	Neoplasm of uncertain behavior of colon
D37.5	Neoplasm of uncertain behavior of rectum
D37.6	Neoplasm of uncertain behavior of liver, gallbladder and bile ducts
D37.8	Neoplasm of uncertain behavior of other specified digestive organs
D37.9	Neoplasm of uncertain behavior of digestive organ, unspecified
D38.0	Neoplasm of uncertain behavior of larynx
D38.1	Neoplasm of uncertain behavior of trachea, bronchus and lung
D38.2	Neoplasm of uncertain behavior of pleura
D38.3	Neoplasm of uncertain behavior of mediastinum

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Code	Description
D38.4	Neoplasm of uncertain behavior of thymus
D38.5	Neoplasm of uncertain behavior of other respiratory organs
D38.6	Neoplasm of uncertain behavior of respiratory organ, unspecified
D39.0	Neoplasm of uncertain behavior of uterus
D39.10	Neoplasm of uncertain behavior of unspecified ovary
D39.11	Neoplasm of uncertain behavior of right ovary
D39.12	Neoplasm of uncertain behavior of left ovary
D39.2	Neoplasm of uncertain behavior of placenta
D39.8	Neoplasm of uncertain behavior of other specified female genital organs
D39.9	Neoplasm of uncertain behavior of female genital organ, unspecified
D3A.00	Benign carcinoid tumor of unspecified site
D3A.010	Benign carcinoid tumor of the duodenum
D3A.011	Benign carcinoid tumor of the jejunum
D3A.012	Benign carcinoid tumor of the ileum
D3A.019	Benign carcinoid tumor of the small intestine, unspecified portion
D3A.020	Benign carcinoid tumor of the appendix
D3A.021	Benign carcinoid tumor of the cecum
D3A.022	Benign carcinoid tumor of the ascending colon
D3A.023	Benign carcinoid tumor of the transverse colon
D3A.024	Benign carcinoid tumor of the descending colon
D3A.025	Benign carcinoid tumor of the sigmoid colon
D3A.026	Benign carcinoid tumor of the rectum
D3A.029	Benign carcinoid tumor of the large intestine, unspecified portion
D3A.090	Benign carcinoid tumor of the bronchus and lung
D3A.091	Benign carcinoid tumor of the thymus
D3A.092	Benign carcinoid tumor of the stomach
D3A.093	Benign carcinoid tumor of the kidney
D3A.094	Benign carcinoid tumor of the foregut, unspecified
D3A.095	Benign carcinoid tumor of the midgut, unspecified
D3A.096	Benign carcinoid tumor of the hindgut, unspecified

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Code	Description
D3A.098	Benign carcinoid tumors of other sites
D3A.8	Other benign neuroendocrine tumors
D40.0	Neoplasm of uncertain behavior of prostate
D40.10	Neoplasm of uncertain behavior of unspecified testis
D40.11	Neoplasm of uncertain behavior of right testis
D40.12	Neoplasm of uncertain behavior of left testis
D40.8	Neoplasm of uncertain behavior of other specified male genital organs
D40.9	Neoplasm of uncertain behavior of male genital organ, unspecified
D41.00	Neoplasm of uncertain behavior of unspecified kidney
D41.01	Neoplasm of uncertain behavior of right kidney
D41.02	Neoplasm of uncertain behavior of left kidney
D41.10	Neoplasm of uncertain behavior of unspecified renal pelvis
D41.11	Neoplasm of uncertain behavior of right renal pelvis
D41.12	Neoplasm of uncertain behavior of left renal pelvis
D41.20	Neoplasm of uncertain behavior of unspecified ureter
D41.21	Neoplasm of uncertain behavior of right ureter
D41.22	Neoplasm of uncertain behavior of left ureter
D41.3	Neoplasm of uncertain behavior of urethra
D41.4	Neoplasm of uncertain behavior of bladder
D41.8	Neoplasm of uncertain behavior of other specified urinary organs
D41.9	Neoplasm of uncertain behavior of unspecified urinary organ
D42.0	Neoplasm of uncertain behavior of cerebral meninges
D42.1	Neoplasm of uncertain behavior of spinal meninges
D42.9	Neoplasm of uncertain behavior of meninges, unspecified
D43.0	Neoplasm of uncertain behavior of brain, supratentorial
D43.1	Neoplasm of uncertain behavior of brain, infratentorial
D43.2	Neoplasm of uncertain behavior of brain, unspecified
D43.3	Neoplasm of uncertain behavior of cranial nerves
D43.4	Neoplasm of uncertain behavior of spinal cord
D43.8	Neoplasm of uncertain behavior of other specified parts of central nervous system



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Code	Description
D43.9	Neoplasm of uncertain behavior of central nervous system, unspecified
D44.0	Neoplasm of uncertain behavior of thyroid gland
D44.10	Neoplasm of uncertain behavior of unspecified adrenal gland
D44.11	Neoplasm of uncertain behavior of right adrenal gland
D44.12	Neoplasm of uncertain behavior of left adrenal gland
D44.2	Neoplasm of uncertain behavior of parathyroid gland
D44.3	Neoplasm of uncertain behavior of pituitary gland
D44.4	Neoplasm of uncertain behavior of craniopharyngeal duct
D44.5	Neoplasm of uncertain behavior of pineal gland
D44.6	Neoplasm of uncertain behavior of carotid body
D44.7	Neoplasm of uncertain behavior of aortic body and other paraganglia
D44.9	Neoplasm of uncertain behavior of unspecified endocrine gland
D45	Polycythemia vera
D46.0	Refractory anemia without ring sideroblasts, so stated
D46.1	Refractory anemia with ring sideroblasts
D46.20	Refractory anemia with excess of blasts, unspecified
D46.21	Refractory anemia with excess of blasts 1
D46.22	Refractory anemia with excess of blasts 2
D46.4	Refractory anemia, unspecified
D46.9	Myelodysplastic syndrome, unspecified
D46.A	Refractory cytopenia with multilineage dysplasia
D46.B	Refractory cytopenia with multilineage dysplasia and ring sideroblasts
D46.C	Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality
D46.Z	Other myelodysplastic syndromes
D47.0	Histiocytic and mast cell tumors of uncertain behavior
D47.1	Chronic myeloproliferative disease
D47.3	Essential (hemorrhagic) thrombocythemia
D47.9	Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified
D47.Z1	Post-transplant lymphoproliferative disorder (PTLD)
*D47.Z2	*Castleman disease



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Code	Description
D47.Z9	Other specified neoplasms of uncertain behavior of lymphoid, hematopoietic and related tissue
D48.0	Neoplasm of uncertain behavior of bone and articular cartilage
D48.1	Neoplasm of uncertain behavior of connective and other soft tissue
D48.2	Neoplasm of uncertain behavior of peripheral nerves and autonomic nervous system
D48.3	Neoplasm of uncertain behavior of retroperitoneum
D48.4	Neoplasm of uncertain behavior of peritoneum
D48.5	Neoplasm of uncertain behavior of skin
D48.60	Neoplasm of uncertain behavior of unspecified breast
D48.61	Neoplasm of uncertain behavior of right breast
D48.62	Neoplasm of uncertain behavior of left breast
D48.7	Neoplasm of uncertain behavior of other specified sites
D48.9	Neoplasm of uncertain behavior, unspecified
D49.0	Neoplasm of unspecified behavior of digestive system
D49.1	Neoplasm of unspecified behavior of respiratory system
D49.2	Neoplasm of unspecified behavior of bone, soft tissue, and skin
D49.3	Neoplasm of unspecified behavior of breast
D49.4	Neoplasm of unspecified behavior of bladder
D49.511	Neoplasm of unspecified behavior of right kidney
D49.512	Neoplasm of unspecified behavior of left kidney
D49.519	Neoplasm of unspecified behavior of unspecified kidney
D49.59	Neoplasm of unspecified behavior of other genitourinary organ
D49.6	Neoplasm of unspecified behavior of brain
D49.7	Neoplasm of unspecified behavior of endocrine glands and other parts of nervous system
D49.81	Neoplasm of unspecified behavior of retina and choroid
D49.89	Neoplasm of unspecified behavior of other specified sites
D49.9	Neoplasm of unspecified behavior of unspecified site
D50.0	Iron deficiency anemia secondary to blood loss (chronic)
D50.1	Sideropenic dysphagia
D50.8	Other iron deficiency anemias
D50.9	Iron deficiency anemia, unspecified

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**Medicare National Coverage Determinations (NCD)
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Code	Description
D51.0	Vitamin B12 deficiency anemia due to intrinsic factor deficiency
D51.1	Vitamin B12 deficiency anemia due to selective vitamin B12 malabsorption with proteinuria
D51.2	Transcobalamin II deficiency
D51.3	Other dietary vitamin B12 deficiency anemia
D51.8	Other vitamin B12 deficiency anemias
D51.9	Vitamin B12 deficiency anemia, unspecified
D52.0	Dietary folate deficiency anemia
D52.1	Drug-induced folate deficiency anemia
D52.8	Other folate deficiency anemias
D52.9	Folate deficiency anemia, unspecified
D53.0	Protein deficiency anemia
D53.1	Other megaloblastic anemias, not elsewhere classified
D53.2	Scorbutic anemia
D53.8	Other specified nutritional anemias
D53.9	Nutritional anemia, unspecified
D56.0	Alpha thalassemia
D56.1	Beta thalassemia
D56.2	Delta-beta thalassemia
D56.3	Thalassemia minor
D56.5	Hemoglobin E-beta thalassemia
D56.8	Other thalassemias
D56.9	Thalassemia, unspecified
D57.00	Hb-SS disease with crisis, unspecified
D57.01	Hb-SS disease with acute chest syndrome
D57.02	Hb-SS disease with splenic sequestration
D57.1	Sickle-cell disease without crisis
D57.20	Sickle-cell/Hb-C disease without crisis
D57.211	Sickle-cell/Hb-C disease with acute chest syndrome
D57.212	Sickle-cell/Hb-C disease with splenic sequestration
D57.219	Sickle-cell/Hb-C disease with crisis, unspecified



**Medicare National Coverage Determinations (NCD)
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Code	Description
D57.40	Sickle-cell thalassemia without crisis
D57.411	Sickle-cell thalassemia with acute chest syndrome
D57.412	Sickle-cell thalassemia with splenic sequestration
D57.419	Sickle-cell thalassemia with crisis, unspecified
D57.80	Other sickle-cell disorders without crisis
D57.811	Other sickle-cell disorders with acute chest syndrome
D57.812	Other sickle-cell disorders with splenic sequestration
D57.819	Other sickle-cell disorders with crisis, unspecified
D62	Acute posthemorrhagic anemia
D63.0	Anemia in neoplastic disease
D63.1	Anemia in chronic kidney disease
D63.8	Anemia in other chronic diseases classified elsewhere
D64.0	Hereditary sideroblastic anemia
D64.1	Secondary sideroblastic anemia due to disease
D64.2	Secondary sideroblastic anemia due to drugs and toxins
D64.3	Other sideroblastic anemias
D64.81	Anemia due to antineoplastic chemotherapy
D64.9	Anemia, unspecified
D65	Disseminated intravascular coagulation [defibrination syndrome]
D66	Hereditary factor VIII deficiency
D67	Hereditary factor IX deficiency
D68.0	Von Willebrand's disease
D68.1	Hereditary factor XI deficiency
D68.2	Hereditary deficiency of other clotting factors
D68.311	Acquired hemophilia
D68.312	Antiphospholipid antibody with hemorrhagic disorder
D68.318	Other hemorrhagic disorder due to intrinsic circulating anticoagulants, antibodies, or inhibitors
D68.32	Hemorrhagic disorder due to extrinsic circulating anticoagulants
D68.4	Acquired coagulation factor deficiency
D68.8	Other specified coagulation defects

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Code	Description
D68.9	Coagulation defect, unspecified
D69.0	Allergic purpura
D69.1	Qualitative platelet defects
D69.2	Other nonthrombocytopenic purpura
D69.3	Immune thrombocytopenic purpura
D69.41	Evans syndrome
D69.42	Congenital and hereditary thrombocytopenia purpura
D69.49	Other primary thrombocytopenia
D69.51	Posttransfusion purpura
D69.59	Other secondary thrombocytopenia
D69.6	Thrombocytopenia, unspecified
D69.8	Other specified hemorrhagic conditions
D69.9	Hemorrhagic condition, unspecified
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye

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Code	Description
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye



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Code	Description
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye
*E08.3521	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E08.3522	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E08.3523	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E08.3529	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E08.3531	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E08.3532	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E08.3533	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E08.3539	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E08.3541	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E08.3542	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E08.3543	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral



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Code	Description
*E08.3549	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E08.3551	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye
*E08.3552	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye
*E08.3553	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral
*E08.3559	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract
*E08.37X1	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye
*E08.37X2	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye
*E08.37X3	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral
*E08.37X9	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication



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Code	Description
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis
E08.621	Diabetes mellitus due to underlying condition with foot ulcer
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer
E08.628	Diabetes mellitus due to underlying condition with other skin complications
E08.630	Diabetes mellitus due to underlying condition with periodontal disease
E08.638	Diabetes mellitus due to underlying condition with other oral complications
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia
E08.69	Diabetes mellitus due to underlying condition with other specified complication
E08.8	Diabetes mellitus due to underlying condition with unspecified complications
E08.9	Diabetes mellitus due to underlying condition without complications
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema



**Medicare National Coverage Determinations (NCD)
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Code	Description
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E09.3521	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E09.3522	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E09.3523	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E09.3529	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E09.3531	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E09.3532	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E09.3533	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E09.3539	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye



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Code	Description
*E09.3541	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E09.3542	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E09.3543	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E09.3549	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E09.3551	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E09.3552	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E09.3553	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E09.3559	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract
*E09.37X1	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E09.37X2	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E09.37X3	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E09.37X9	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye



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Code	Description
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer
E09.628	Drug or chemical induced diabetes mellitus with other skin complications
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease
E09.638	Drug or chemical induced diabetes mellitus with other oral complications
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia
E09.69	Drug or chemical induced diabetes mellitus with other specified complication
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications
E09.9	Drug or chemical induced diabetes mellitus without complications
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma

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Code	Description
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma
E10.21	Type 1 diabetes mellitus with diabetic nephropathy
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye

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Code	Description
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E10.3521	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E10.3522	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E10.3523	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E10.3529	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye



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Code	Description
*E10.3531	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E10.3532	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E10.3533	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E10.3539	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E10.3541	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E10.3542	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E10.3543	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E10.3549	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E10.3551	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E10.3552	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E10.3553	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E10.3559	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E10.36	Type 1 diabetes mellitus with diabetic cataract
*E10.37X1	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E10.37X2	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye



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Code	Description
*E10.37X3	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E10.37X9	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.59	Type 1 diabetes mellitus with other circulatory complications
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy
E10.620	Type 1 diabetes mellitus with diabetic dermatitis
E10.621	Type 1 diabetes mellitus with foot ulcer
E10.622	Type 1 diabetes mellitus with other skin ulcer
E10.628	Type 1 diabetes mellitus with other skin complications
E10.630	Type 1 diabetes mellitus with periodontal disease
E10.638	Type 1 diabetes mellitus with other oral complications
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma
E10.65	Type 1 diabetes mellitus with hyperglycemia
E10.69	Type 1 diabetes mellitus with other specified complication
E10.8	Type 1 diabetes mellitus with unspecified complications
E10.9	Type 1 diabetes mellitus without complications
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma



**Medicare National Coverage Determinations (NCD)
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Code	Description
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral

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Code	Description
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E11.3521	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E11.3522	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E11.3523	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E11.3529	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E11.3531	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E11.3532	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E11.3533	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E11.3539	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E11.3541	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E11.3542	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E11.3543	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E11.3549	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E11.3551	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E11.3552	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E11.3553	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E11.3559	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E11.36	Type 2 diabetes mellitus with diabetic cataract
*E11.37X1	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E11.37X2	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E11.37X3	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E11.37X9	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.59	Type 2 diabetes mellitus with other circulatory complications
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy
E11.620	Type 2 diabetes mellitus with diabetic dermatitis
E11.621	Type 2 diabetes mellitus with foot ulcer
E11.622	Type 2 diabetes mellitus with other skin ulcer
E11.628	Type 2 diabetes mellitus with other skin complications
E11.630	Type 2 diabetes mellitus with periodontal disease
E11.638	Type 2 diabetes mellitus with other oral complications
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma
E11.65	Type 2 diabetes mellitus with hyperglycemia
E11.69	Type 2 diabetes mellitus with other specified complication
E11.8	Type 2 diabetes mellitus with unspecified complications
E11.9	Type 2 diabetes mellitus without complications
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma
E13.10	Other specified diabetes mellitus with ketoacidosis without coma
E13.11	Other specified diabetes mellitus with ketoacidosis with coma

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E13.21	Other specified diabetes mellitus with diabetic nephropathy
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
E13.29	Other specified diabetes mellitus with other diabetic kidney complication
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E13.3521	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E13.3522	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E13.3523	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E13.3529	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E13.3531	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye



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Code	Description
*E13.3532	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E13.3533	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E13.3539	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E13.3541	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E13.3542	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E13.3543	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E13.3549	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E13.3551	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E13.3552	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E13.3553	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E13.3559	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E13.36	Other specified diabetes mellitus with diabetic cataract
*E13.37X1	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E13.37X2	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E13.37X3	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E13.37X9	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy
E13.44	Other specified diabetes mellitus with diabetic amyotrophy
E13.49	Other specified diabetes mellitus with other diabetic neurological complication
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E13.59	Other specified diabetes mellitus with other circulatory complications
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy
E13.618	Other specified diabetes mellitus with other diabetic arthropathy
E13.620	Other specified diabetes mellitus with diabetic dermatitis
E13.621	Other specified diabetes mellitus with foot ulcer
E13.622	Other specified diabetes mellitus with other skin ulcer
E13.628	Other specified diabetes mellitus with other skin complications
E13.630	Other specified diabetes mellitus with periodontal disease
E13.638	Other specified diabetes mellitus with other oral complications
E13.641	Other specified diabetes mellitus with hypoglycemia with coma
E13.649	Other specified diabetes mellitus with hypoglycemia without coma
E13.65	Other specified diabetes mellitus with hyperglycemia
E13.69	Other specified diabetes mellitus with other specified complication
E13.8	Other specified diabetes mellitus with unspecified complications
E13.9	Other specified diabetes mellitus without complications
E23.0	Hypopituitarism

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Code	Description
E23.1	Drug-induced hypopituitarism
E23.6	Other disorders of pituitary gland
E24.1	Nelson's syndrome
E28.310	Symptomatic premature menopause
E28.319	Asymptomatic premature menopause
E28.39	Other primary ovarian failure
E29.1	Testicular hypofunction
E40	Kwashiorkor
E41	Nutritional marasmus
E42	Marasmic kwashiorkor
E43	Unspecified severe protein-calorie malnutrition
E44.0	Moderate protein-calorie malnutrition
E44.1	Mild protein-calorie malnutrition
E45	Retarded development following protein-calorie malnutrition
E46	Unspecified protein-calorie malnutrition
E61.1	Iron deficiency
E64.0	Sequelae of protein-calorie malnutrition
E79.0	Hyperuricemia without signs of inflammatory arthritis and tophaceous disease
E80.0	Hereditary erythropoietic porphyria
E80.1	Porphyria cutanea tarda
E80.20	Unspecified porphyria
E80.21	Acute intermittent (hepatic) porphyria
E80.29	Other porphyria
E83.10	Disorder of iron metabolism, unspecified
E83.110	Hereditary hemochromatosis
E83.111	Hemochromatosis due to repeated red blood cell transfusions
E83.118	Other hemochromatosis
E83.119	Hemochromatosis, unspecified
E83.19	Other disorders of iron metabolism
E89.3	Postprocedural hypopituitarism



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Code	Description
F45.8	Other somatoform disorders
F50.00	Anorexia nervosa, unspecified
F50.01	Anorexia nervosa, restricting type
F50.02	Anorexia nervosa, binge eating/purging type
F50.2	Bulimia nervosa
F50.81	Binge eating disorder
F50.89	Other specified eating disorder
F50.9	Eating disorder, unspecified
F98.21	Rumination disorder of infancy
F98.29	Other feeding disorders of infancy and early childhood
F98.3	Pica of infancy and childhood
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease
I42.0	Dilated cardiomyopathy
I42.5	Other restrictive cardiomyopathy
I42.6	Alcoholic cardiomyopathy
I42.7	Cardiomyopathy due to drug and external agent
I42.8	Other cardiomyopathies
I42.9	Cardiomyopathy, unspecified
I43	Cardiomyopathy in diseases classified elsewhere
I44.0	Atrioventricular block, first degree
I44.1	Atrioventricular block, second degree
I44.2	Atrioventricular block, complete
I44.30	Unspecified atrioventricular block
I44.39	Other atrioventricular block
I44.4	Left anterior fascicular block
I44.5	Left posterior fascicular block

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Code	Description
I44.60	Unspecified fascicular block
I44.69	Other fascicular block
I44.7	Left bundle-branch block, unspecified
I45.0	Right fascicular block
I45.10	Unspecified right bundle-branch block
I45.19	Other right bundle-branch block
I45.2	Bifascicular block
I45.3	Trifascicular block
I45.4	Nonspecific intraventricular block
I45.5	Other specified heart block
I45.6	Pre-excitation syndrome
I45.89	Other specified conduction disorders
I45.9	Conduction disorder, unspecified
I46.2	Cardiac arrest due to underlying cardiac condition
I46.8	Cardiac arrest due to other underlying condition
I46.9	Cardiac arrest, cause unspecified
I47.0	Re-entry ventricular arrhythmia
I47.1	Supraventricular tachycardia
I47.2	Ventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation
I48.2	Chronic atrial fibrillation
I48.3	Typical atrial flutter
I48.4	Atypical atrial flutter
I48.91	Unspecified atrial fibrillation
I48.92	Unspecified atrial flutter
I49.01	Ventricular fibrillation
I49.02	Ventricular flutter
I49.1	Atrial premature depolarization



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Code	Description
I49.2	Junctional premature depolarization
I49.3	Ventricular premature depolarization
I49.40	Unspecified premature depolarization
I49.49	Other premature depolarization
I49.5	Sick sinus syndrome
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
I50.1	Left ventricular failure
I50.20	Unspecified systolic (congestive) heart failure
I50.21	Acute systolic (congestive) heart failure
I50.22	Chronic systolic (congestive) heart failure
I50.23	Acute on chronic systolic (congestive) heart failure
I50.30	Unspecified diastolic (congestive) heart failure
I50.31	Acute diastolic (congestive) heart failure
I50.32	Chronic diastolic (congestive) heart failure
I50.33	Acute on chronic diastolic (congestive) heart failure
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.9	Heart failure, unspecified
K22.6	Gastro-esophageal laceration-hemorrhage syndrome
K22.8	Other specified diseases of esophagus
K25.0	Acute gastric ulcer with hemorrhage
K25.1	Acute gastric ulcer with perforation
K25.2	Acute gastric ulcer with both hemorrhage and perforation
K25.3	Acute gastric ulcer without hemorrhage or perforation
K25.4	Chronic or unspecified gastric ulcer with hemorrhage
K25.5	Chronic or unspecified gastric ulcer with perforation
K25.6	Chronic or unspecified gastric ulcer with both hemorrhage and perforation

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Code	Description
K25.7	Chronic gastric ulcer without hemorrhage or perforation
K25.9	Gastric ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K26.0	Acute duodenal ulcer with hemorrhage
K26.1	Acute duodenal ulcer with perforation
K26.2	Acute duodenal ulcer with both hemorrhage and perforation
K26.3	Acute duodenal ulcer without hemorrhage or perforation
K26.4	Chronic or unspecified duodenal ulcer with hemorrhage
K26.5	Chronic or unspecified duodenal ulcer with perforation
K26.6	Chronic or unspecified duodenal ulcer with both hemorrhage and perforation
K26.7	Chronic duodenal ulcer without hemorrhage or perforation
K26.9	Duodenal ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K27.0	Acute peptic ulcer, site unspecified, with hemorrhage
K27.1	Acute peptic ulcer, site unspecified, with perforation
K27.2	Acute peptic ulcer, site unspecified, with both hemorrhage and perforation
K27.3	Acute peptic ulcer, site unspecified, without hemorrhage or perforation
K27.4	Chronic or unspecified peptic ulcer, site unspecified, with hemorrhage
K27.5	Chronic or unspecified peptic ulcer, site unspecified, with perforation
K27.6	Chronic or unspecified peptic ulcer, site unspecified, with both hemorrhage and perforation
K27.7	Chronic peptic ulcer, site unspecified, without hemorrhage or perforation
K27.9	Peptic ulcer, site unspecified, unspecified as acute or chronic, without hemorrhage or perforation
K28.0	Acute gastrojejunal ulcer with hemorrhage
K28.1	Acute gastrojejunal ulcer with perforation
K28.2	Acute gastrojejunal ulcer with both hemorrhage and perforation
K28.3	Acute gastrojejunal ulcer without hemorrhage or perforation
K28.4	Chronic or unspecified gastrojejunal ulcer with hemorrhage
K28.5	Chronic or unspecified gastrojejunal ulcer with perforation
K28.6	Chronic or unspecified gastrojejunal ulcer with both hemorrhage and perforation
K28.7	Chronic gastrojejunal ulcer without hemorrhage or perforation
K28.9	Gastrojejunal ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K29.00	Acute gastritis without bleeding

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Code	Description
K29.01	Acute gastritis with bleeding
K29.20	Alcoholic gastritis without bleeding
K29.21	Alcoholic gastritis with bleeding
K29.30	Chronic superficial gastritis without bleeding
K29.31	Chronic superficial gastritis with bleeding
K29.40	Chronic atrophic gastritis without bleeding
K29.41	Chronic atrophic gastritis with bleeding
K29.50	Unspecified chronic gastritis without bleeding
K29.51	Unspecified chronic gastritis with bleeding
K29.60	Other gastritis without bleeding
K29.61	Other gastritis with bleeding
K29.70	Gastritis, unspecified, without bleeding
K29.71	Gastritis, unspecified, with bleeding
K29.80	Duodenitis without bleeding
K29.81	Duodenitis with bleeding
K29.90	Gastroduodenitis, unspecified, without bleeding
K29.91	Gastroduodenitis, unspecified, with bleeding
K30	Functional dyspepsia
K31.0	Acute dilatation of stomach
K31.7	Polyp of stomach and duodenum
K31.811	Angiodysplasia of stomach and duodenum with bleeding
K31.82	Dieulafoy lesion (hemorrhagic) of stomach and duodenum
K31.83	Achlorhydria
K31.84	Gastroparesis
K31.9	Disease of stomach and duodenum, unspecified
K50.00	Crohn's disease of small intestine without complications
K50.011	Crohn's disease of small intestine with rectal bleeding
K50.012	Crohn's disease of small intestine with intestinal obstruction
K50.013	Crohn's disease of small intestine with fistula
K50.014	Crohn's disease of small intestine with abscess

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Code	Description
K50.018	Crohn's disease of small intestine with other complication
K50.019	Crohn's disease of small intestine with unspecified complications
K50.10	Crohn's disease of large intestine without complications
K50.111	Crohn's disease of large intestine with rectal bleeding
K50.112	Crohn's disease of large intestine with intestinal obstruction
K50.113	Crohn's disease of large intestine with fistula
K50.114	Crohn's disease of large intestine with abscess
K50.118	Crohn's disease of large intestine with other complication
K50.119	Crohn's disease of large intestine with unspecified complications
K50.80	Crohn's disease of both small and large intestine without complications
K50.811	Crohn's disease of both small and large intestine with rectal bleeding
K50.812	Crohn's disease of both small and large intestine with intestinal obstruction
K50.813	Crohn's disease of both small and large intestine with fistula
K50.814	Crohn's disease of both small and large intestine with abscess
K50.818	Crohn's disease of both small and large intestine with other complication
K50.819	Crohn's disease of both small and large intestine with unspecified complications
K50.90	Crohn's disease, unspecified, without complications
K50.911	Crohn's disease, unspecified, with rectal bleeding
K50.912	Crohn's disease, unspecified, with intestinal obstruction
K50.913	Crohn's disease, unspecified, with fistula
K50.914	Crohn's disease, unspecified, with abscess
K50.918	Crohn's disease, unspecified, with other complication
K50.919	Crohn's disease, unspecified, with unspecified complications
K51.00	Ulcerative (chronic) pancolitis without complications
K51.011	Ulcerative (chronic) pancolitis with rectal bleeding
K51.012	Ulcerative (chronic) pancolitis with intestinal obstruction
K51.013	Ulcerative (chronic) pancolitis with fistula
K51.014	Ulcerative (chronic) pancolitis with abscess
K51.018	Ulcerative (chronic) pancolitis with other complication
K51.019	Ulcerative (chronic) pancolitis with unspecified complications

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Code	Description
K51.20	Ulcerative (chronic) proctitis without complications
K51.211	Ulcerative (chronic) proctitis with rectal bleeding
K51.212	Ulcerative (chronic) proctitis with intestinal obstruction
K51.213	Ulcerative (chronic) proctitis with fistula
K51.214	Ulcerative (chronic) proctitis with abscess
K51.218	Ulcerative (chronic) proctitis with other complication
K51.219	Ulcerative (chronic) proctitis with unspecified complications
K51.30	Ulcerative (chronic) rectosigmoiditis without complications
K51.311	Ulcerative (chronic) rectosigmoiditis with rectal bleeding
K51.312	Ulcerative (chronic) rectosigmoiditis with intestinal obstruction
K51.313	Ulcerative (chronic) rectosigmoiditis with fistula
K51.314	Ulcerative (chronic) rectosigmoiditis with abscess
K51.318	Ulcerative (chronic) rectosigmoiditis with other complication
K51.319	Ulcerative (chronic) rectosigmoiditis with unspecified complications
K51.40	Inflammatory polyps of colon without complications
K51.411	Inflammatory polyps of colon with rectal bleeding
K51.412	Inflammatory polyps of colon with intestinal obstruction
K51.413	Inflammatory polyps of colon with fistula
K51.414	Inflammatory polyps of colon with abscess
K51.418	Inflammatory polyps of colon with other complication
K51.419	Inflammatory polyps of colon with unspecified complications
K51.50	Left sided colitis without complications
K51.511	Left sided colitis with rectal bleeding
K51.512	Left sided colitis with intestinal obstruction
K51.513	Left sided colitis with fistula
K51.514	Left sided colitis with abscess
K51.518	Left sided colitis with other complication
K51.519	Left sided colitis with unspecified complications
K51.80	Other ulcerative colitis without complications
K51.811	Other ulcerative colitis with rectal bleeding

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Code	Description
K51.812	Other ulcerative colitis with intestinal obstruction
K51.813	Other ulcerative colitis with fistula
K51.814	Other ulcerative colitis with abscess
K51.818	Other ulcerative colitis with other complication
K51.819	Other ulcerative colitis with unspecified complications
K51.90	Ulcerative colitis, unspecified, without complications
K51.911	Ulcerative colitis, unspecified with rectal bleeding
K51.912	Ulcerative colitis, unspecified with intestinal obstruction
K51.913	Ulcerative colitis, unspecified with fistula
K51.914	Ulcerative colitis, unspecified with abscess
K51.918	Ulcerative colitis, unspecified with other complication
K51.919	Ulcerative colitis, unspecified with unspecified complications
*K52.3	*Indeterminate colitis
K52.81	Eosinophilic gastritis or gastroenteritis
*K52.831	*Collagenous colitis
*K52.832	*Lymphocytic colitis
*K52.838	*Other microscopic colitis
*K52.839	*Microscopic colitis, unspecified
K55.011	Focal (segmental) acute (reversible) ischemia of small intestine
K55.012	Diffuse acute (reversible) ischemia of small intestine
K55.019	Acute (reversible) ischemia of small intestine, extent unspecified
K55.021	Focal (segmental) acute infarction of small intestine
K55.022	Diffuse acute infarction of small intestine
K55.029	Acute infarction of small intestine, extent unspecified
K55.031	Focal (segmental) acute (reversible) ischemia of large intestine
K55.032	Diffuse acute (reversible) ischemia of large intestine
K55.039	Acute (reversible) ischemia of large intestine, extent unspecified
K55.041	Focal (segmental) acute infarction of large intestine
K55.042	Diffuse acute infarction of large intestine
K55.049	Acute infarction of large intestine, extent unspecified



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Code	Description
K55.051	Focal (segmental) acute (reversible) ischemia of intestine, part unspecified
K55.052	Diffuse acute (reversible) ischemia of intestine, part unspecified
K55.059	Acute (reversible) ischemia of intestine, part and extent unspecified
K55.061	Focal (segmental) acute infarction of intestine, part unspecified
K55.062	Diffuse acute infarction of intestine, part unspecified
K55.069	Acute infarction of intestine, part and extent unspecified
K55.1	Chronic vascular disorders of intestine
K55.21	Angiodysplasia of colon with hemorrhage
*K55.30	*Necrotizing enterocolitis, unspecified
*K55.31	*Stage 1 necrotizing enterocolitis
*K55.32	*Stage 2 necrotizing enterocolitis
*K55.33	*Stage 3 necrotizing enterocolitis
K57.01	Diverticulitis of small intestine with perforation and abscess with bleeding
K57.11	Diverticulosis of small intestine without perforation or abscess with bleeding
K57.13	Diverticulitis of small intestine without perforation or abscess with bleeding
K57.21	Diverticulitis of large intestine with perforation and abscess with bleeding
K57.31	Diverticulosis of large intestine without perforation or abscess with bleeding
K57.33	Diverticulitis of large intestine without perforation or abscess with bleeding
K57.41	Diverticulitis of both small and large intestine with perforation and abscess with bleeding
K57.51	Diverticulosis of both small and large intestine without perforation or abscess with bleeding
K57.53	Diverticulitis of both small and large intestine without perforation or abscess with bleeding
K57.81	Diverticulitis of intestine, part unspecified, with perforation and abscess with bleeding
K57.91	Diverticulosis of intestine, part unspecified, without perforation or abscess with bleeding
K57.93	Diverticulitis of intestine, part unspecified, without perforation or abscess with bleeding
K62.5	Hemorrhage of anus and rectum
K63.5	Polyp of colon
K63.81	Dieulafoy lesion of intestine
K70.0	Alcoholic fatty liver
K70.10	Alcoholic hepatitis without ascites
K70.11	Alcoholic hepatitis with ascites



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Code	Description
K70.2	Alcoholic fibrosis and sclerosis of liver
K70.30	Alcoholic cirrhosis of liver without ascites
K70.31	Alcoholic cirrhosis of liver with ascites
K70.40	Alcoholic hepatic failure without coma
K70.41	Alcoholic hepatic failure with coma
K70.9	Alcoholic liver disease, unspecified
K71.0	Toxic liver disease with cholestasis
K71.10	Toxic liver disease with hepatic necrosis, without coma
K71.11	Toxic liver disease with hepatic necrosis, with coma
K71.2	Toxic liver disease with acute hepatitis
K71.3	Toxic liver disease with chronic persistent hepatitis
K71.4	Toxic liver disease with chronic lobular hepatitis
K71.50	Toxic liver disease with chronic active hepatitis without ascites
K71.51	Toxic liver disease with chronic active hepatitis with ascites
K71.6	Toxic liver disease with hepatitis, not elsewhere classified
K71.7	Toxic liver disease with fibrosis and cirrhosis of liver
K71.8	Toxic liver disease with other disorders of liver
K71.9	Toxic liver disease, unspecified
K72.00	Acute and subacute hepatic failure without coma
K72.01	Acute and subacute hepatic failure with coma
K72.10	Chronic hepatic failure without coma
K72.11	Chronic hepatic failure with coma
K72.90	Hepatic failure, unspecified without coma
K72.91	Hepatic failure, unspecified with coma
K73.0	Chronic persistent hepatitis, not elsewhere classified
K73.1	Chronic lobular hepatitis, not elsewhere classified
K73.2	Chronic active hepatitis, not elsewhere classified
K73.8	Other chronic hepatitis, not elsewhere classified
K73.9	Chronic hepatitis, unspecified
K74.0	Hepatic fibrosis



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Code	Description
K74.1	Hepatic sclerosis
K74.2	Hepatic fibrosis with hepatic sclerosis
K74.3	Primary biliary cirrhosis
K74.4	Secondary biliary cirrhosis
K74.5	Biliary cirrhosis, unspecified
K74.60	Unspecified cirrhosis of liver
K74.69	Other cirrhosis of liver
K75.0	Abscess of liver
K75.1	Phlebitis of portal vein
K75.2	Nonspecific reactive hepatitis
K75.3	Granulomatous hepatitis, not elsewhere classified
K75.4	Autoimmune hepatitis
K75.81	Nonalcoholic steatohepatitis (NASH)
K75.89	Other specified inflammatory liver diseases
K75.9	Inflammatory liver disease, unspecified
K76.0	Fatty (change of) liver, not elsewhere classified
K76.1	Chronic passive congestion of liver
K76.2	Central hemorrhagic necrosis of liver
K76.3	Infarction of liver
K76.4	Peliosis hepatis
K76.5	Hepatic veno-occlusive disease
K76.6	Portal hypertension
K76.7	Hepatorenal syndrome
K76.81	Hepatopulmonary syndrome
K76.89	Other specified diseases of liver
K76.9	Liver disease, unspecified
K77	Liver disorders in diseases classified elsewhere
K90.0	Celiac disease
K90.1	Tropical sprue
K90.2	Blind loop syndrome, not elsewhere classified



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Code	Description
K90.41	Non-celiac gluten sensitivity
K90.49	Malabsorption due to intolerance, not elsewhere classified
K90.89	Other intestinal malabsorption
K90.9	Intestinal malabsorption, unspecified
K91.2	Postsurgical malabsorption, not elsewhere classified
K92.0	Hematemesis
K92.1	Melena
K92.2	Gastrointestinal hemorrhage, unspecified
K94.20	Gastrostomy complication, unspecified
K94.21	Gastrostomy hemorrhage
K94.22	Gastrostomy infection
K94.23	Gastrostomy malfunction
K94.29	Other complications of gastrostomy
L28.0	Lichen simplex chronicus
L28.1	Prurigo nodularis
L28.2	Other prurigo
L29.0	Pruritus ani
L29.1	Pruritus scroti
L29.2	Pruritus vulvae
L29.3	Anogenital pruritus, unspecified
L29.8	Other pruritus
L29.9	Pruritus, unspecified
L57.3	Poikiloderma of Civatte
L63.0	Alopecia (capitis) totalis
L63.1	Alopecia universalis
L63.2	Ophiasis
L63.8	Other alopecia areata
L63.9	Alopecia areata, unspecified
L64.0	Drug-induced androgenic alopecia
L64.8	Other androgenic alopecia

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Code	Description
L64.9	Androgenic alopecia, unspecified
L65.0	Telogen effluvium
L65.1	Anagen effluvium
L65.2	Alopecia mucinosa
L65.8	Other specified nonscarring hair loss
L65.9	Nonscarring hair loss, unspecified
L66.0	Pseudopelade
L66.2	Folliculitis decalvans
L66.8	Other cicatricial alopecia
L66.9	Cicatricial alopecia, unspecified
L80	Vitiligo
L81.0	Postinflammatory hyperpigmentation
L81.1	Chloasma
L81.2	Freckles
L81.3	Cafe au lait spots
L81.4	Other melanin hyperpigmentation
L81.5	Leukoderma, not elsewhere classified
L81.6	Other disorders of diminished melanin formation
L81.7	Pigmented purpuric dermatosis
L81.8	Other specified disorders of pigmentation
L81.9	Disorder of pigmentation, unspecified
L98.1	Factitial dermatitis
M07.60	Enteropathic arthropathies, unspecified site
M07.611	Enteropathic arthropathies, right shoulder
M07.612	Enteropathic arthropathies, left shoulder
M07.619	Enteropathic arthropathies, unspecified shoulder
M07.621	Enteropathic arthropathies, right elbow
M07.622	Enteropathic arthropathies, left elbow
M07.629	Enteropathic arthropathies, unspecified elbow
M07.631	Enteropathic arthropathies, right wrist

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Code	Description
M07.632	Enteropathic arthropathies, left wrist
M07.639	Enteropathic arthropathies, unspecified wrist
M07.641	Enteropathic arthropathies, right hand
M07.642	Enteropathic arthropathies, left hand
M07.649	Enteropathic arthropathies, unspecified hand
M07.651	Enteropathic arthropathies, right hip
M07.652	Enteropathic arthropathies, left hip
M07.659	Enteropathic arthropathies, unspecified hip
M07.661	Enteropathic arthropathies, right knee
M07.662	Enteropathic arthropathies, left knee
M07.669	Enteropathic arthropathies, unspecified knee
M07.671	Enteropathic arthropathies, right ankle and foot
M07.672	Enteropathic arthropathies, left ankle and foot
M07.679	Enteropathic arthropathies, unspecified ankle and foot
M07.68	Enteropathic arthropathies, vertebrae
M07.69	Enteropathic arthropathies, multiple sites
M12.80	Other specific arthropathies, not elsewhere classified, unspecified site
M12.811	Other specific arthropathies, not elsewhere classified, right shoulder
M12.812	Other specific arthropathies, not elsewhere classified, left shoulder
M12.819	Other specific arthropathies, not elsewhere classified, unspecified shoulder
M12.821	Other specific arthropathies, not elsewhere classified, right elbow
M12.822	Other specific arthropathies, not elsewhere classified, left elbow
M12.829	Other specific arthropathies, not elsewhere classified, unspecified elbow
M12.831	Other specific arthropathies, not elsewhere classified, right wrist
M12.832	Other specific arthropathies, not elsewhere classified, left wrist
M12.839	Other specific arthropathies, not elsewhere classified, unspecified wrist
M12.841	Other specific arthropathies, not elsewhere classified, right hand
M12.842	Other specific arthropathies, not elsewhere classified, left hand
M12.849	Other specific arthropathies, not elsewhere classified, unspecified hand
M12.851	Other specific arthropathies, not elsewhere classified, right hip

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Code	Description
M12.852	Other specific arthropathies, not elsewhere classified, left hip
M12.859	Other specific arthropathies, not elsewhere classified, unspecified hip
M12.861	Other specific arthropathies, not elsewhere classified, right knee
M12.862	Other specific arthropathies, not elsewhere classified, left knee
M12.869	Other specific arthropathies, not elsewhere classified, unspecified knee
M12.871	Other specific arthropathies, not elsewhere classified, right ankle and foot
M12.872	Other specific arthropathies, not elsewhere classified, left ankle and foot
M12.879	Other specific arthropathies, not elsewhere classified, unspecified ankle and foot
M12.88	Other specific arthropathies, not elsewhere classified, other specified site
M12.89	Other specific arthropathies, not elsewhere classified, multiple sites
M12.9	Arthropathy, unspecified
M13.0	Polyarthritis, unspecified
M13.10	Monoarthritis, not elsewhere classified, unspecified site
M13.111	Monoarthritis, not elsewhere classified, right shoulder
M13.112	Monoarthritis, not elsewhere classified, left shoulder
M13.119	Monoarthritis, not elsewhere classified, unspecified shoulder
M13.121	Monoarthritis, not elsewhere classified, right elbow
M13.122	Monoarthritis, not elsewhere classified, left elbow
M13.129	Monoarthritis, not elsewhere classified, unspecified elbow
M13.131	Monoarthritis, not elsewhere classified, right wrist
M13.132	Monoarthritis, not elsewhere classified, left wrist
M13.139	Monoarthritis, not elsewhere classified, unspecified wrist
M13.141	Monoarthritis, not elsewhere classified, right hand
M13.142	Monoarthritis, not elsewhere classified, left hand
M13.149	Monoarthritis, not elsewhere classified, unspecified hand
M13.151	Monoarthritis, not elsewhere classified, right hip
M13.152	Monoarthritis, not elsewhere classified, left hip
M13.159	Monoarthritis, not elsewhere classified, unspecified hip
M13.161	Monoarthritis, not elsewhere classified, right knee
M13.162	Monoarthritis, not elsewhere classified, left knee



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Code	Description
M13.169	Monoarthritis, not elsewhere classified, unspecified knee
M13.171	Monoarthritis, not elsewhere classified, right ankle and foot
M13.172	Monoarthritis, not elsewhere classified, left ankle and foot
M13.179	Monoarthritis, not elsewhere classified, unspecified ankle and foot
M14.80	Arthropathies in other specified diseases classified elsewhere, unspecified site
M1A.10X0	Lead-induced chronic gout, unspecified site, without tophus (tophi)
M1A.10X1	Lead-induced chronic gout, unspecified site, with tophus (tophi)
M1A.1110	Lead-induced chronic gout, right shoulder, without tophus (tophi)
M1A.1111	Lead-induced chronic gout, right shoulder, with tophus (tophi)
M1A.1120	Lead-induced chronic gout, left shoulder, without tophus (tophi)
M1A.1121	Lead-induced chronic gout, left shoulder, with tophus (tophi)
M1A.1190	Lead-induced chronic gout, unspecified shoulder, without tophus (tophi)
M1A.1191	Lead-induced chronic gout, unspecified shoulder, with tophus (tophi)
M1A.1210	Lead-induced chronic gout, right elbow, without tophus (tophi)
M1A.1211	Lead-induced chronic gout, right elbow, with tophus (tophi)
M1A.1220	Lead-induced chronic gout, left elbow, without tophus (tophi)
M1A.1221	Lead-induced chronic gout, left elbow, with tophus (tophi)
M1A.1290	Lead-induced chronic gout, unspecified elbow, without tophus (tophi)
M1A.1291	Lead-induced chronic gout, unspecified elbow, with tophus (tophi)
M1A.1310	Lead-induced chronic gout, right wrist, without tophus (tophi)
M1A.1311	Lead-induced chronic gout, right wrist, with tophus (tophi)
M1A.1320	Lead-induced chronic gout, left wrist, without tophus (tophi)
M1A.1321	Lead-induced chronic gout, left wrist, with tophus (tophi)
M1A.1390	Lead-induced chronic gout, unspecified wrist, without tophus (tophi)
M1A.1391	Lead-induced chronic gout, unspecified wrist, with tophus (tophi)
M1A.1410	Lead-induced chronic gout, right hand, without tophus (tophi)
M1A.1411	Lead-induced chronic gout, right hand, with tophus (tophi)
M1A.1420	Lead-induced chronic gout, left hand, without tophus (tophi)
M1A.1421	Lead-induced chronic gout, left hand, with tophus (tophi)
M1A.1490	Lead-induced chronic gout, unspecified hand, without tophus (tophi)

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Code	Description
M1A.1491	Lead-induced chronic gout, unspecified hand, with tophus (tophi)
M1A.1510	Lead-induced chronic gout, right hip, without tophus (tophi)
M1A.1511	Lead-induced chronic gout, right hip, with tophus (tophi)
M1A.1520	Lead-induced chronic gout, left hip, without tophus (tophi)
M1A.1521	Lead-induced chronic gout, left hip, with tophus (tophi)
M1A.1590	Lead-induced chronic gout, unspecified hip, without tophus (tophi)
M1A.1591	Lead-induced chronic gout, unspecified hip, with tophus (tophi)
M1A.1610	Lead-induced chronic gout, right knee, without tophus (tophi)
M1A.1611	Lead-induced chronic gout, right knee, with tophus (tophi)
M1A.1620	Lead-induced chronic gout, left knee, without tophus (tophi)
M1A.1621	Lead-induced chronic gout, left knee, with tophus (tophi)
M1A.1690	Lead-induced chronic gout, unspecified knee, without tophus (tophi)
M1A.1691	Lead-induced chronic gout, unspecified knee, with tophus (tophi)
M1A.1710	Lead-induced chronic gout, right ankle and foot, without tophus (tophi)
M1A.1711	Lead-induced chronic gout, right ankle and foot, with tophus (tophi)
M1A.1720	Lead-induced chronic gout, left ankle and foot, without tophus (tophi)
M1A.1721	Lead-induced chronic gout, left ankle and foot, with tophus (tophi)
M1A.1790	Lead-induced chronic gout, unspecified ankle and foot, without tophus (tophi)
M1A.1791	Lead-induced chronic gout, unspecified ankle and foot, with tophus (tophi)
M1A.18X0	Lead-induced chronic gout, vertebrae, without tophus (tophi)
M1A.18X1	Lead-induced chronic gout, vertebrae, with tophus (tophi)
M1A.19X0	Lead-induced chronic gout, multiple sites, without tophus (tophi)
M1A.19X1	Lead-induced chronic gout, multiple sites, with tophus (tophi)
M25.50	Pain in unspecified joint
M25.511	Pain in right shoulder
M25.512	Pain in left shoulder
M25.519	Pain in unspecified shoulder
M25.521	Pain in right elbow
M25.522	Pain in left elbow
M25.529	Pain in unspecified elbow



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Code	Description
M25.531	Pain in right wrist
M25.532	Pain in left wrist
M25.539	Pain in unspecified wrist
M25.551	Pain in right hip
M25.552	Pain in left hip
M25.559	Pain in unspecified hip
M25.561	Pain in right knee
M25.562	Pain in left knee
M25.569	Pain in unspecified knee
M25.571	Pain in right ankle and joints of right foot
M25.572	Pain in left ankle and joints of left foot
M25.579	Pain in unspecified ankle and joints of unspecified foot
M79.641	Pain in right hand
M79.642	Pain in left hand
M79.644	Pain in right finger(s)
M79.645	Pain in left finger(s)
M79.646	Pain in unspecified finger(s)
*M84.750A	*Atypical femoral fracture, unspecified, initial encounter for fracture
*M84.750D	*Atypical femoral fracture, unspecified, subsequent encounter for fracture with routine healing
*M84.750G	*Atypical femoral fracture, unspecified, subsequent encounter for fracture with delayed healing
*M84.750K	*Atypical femoral fracture, unspecified, subsequent encounter for fracture with nonunion
*M84.750P	*Atypical femoral fracture, unspecified, subsequent encounter for fracture with malunion
*M84.750S	*Atypical femoral fracture, unspecified, sequela
*M84.751D	*Incomplete atypical femoral fracture, right leg, subsequent encounter for fracture with routine healing
*M84.751G	*Incomplete atypical femoral fracture, right leg, subsequent encounter for fracture with delayed healing
*M84.751K	*Incomplete atypical femoral fracture, right leg, subsequent encounter for fracture with nonunion



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Code	Description
*M84.751P	*Incomplete atypical femoral fracture, right leg, subsequent encounter for fracture with malunion
*M84.751S	*Incomplete atypical femoral fracture, right leg, sequela
*M84.752A	*Incomplete atypical femoral fracture, left leg, initial encounter for fracture
*M84.752D	*Incomplete atypical femoral fracture, left leg, subsequent encounter for fracture with routine healing
*M84.752G	*Incomplete atypical femoral fracture, left leg, subsequent encounter for fracture with delayed healing
*M84.752K	*Incomplete atypical femoral fracture, left leg, subsequent encounter for fracture with nonunion
*M84.752P	*Incomplete atypical femoral fracture, left leg, subsequent encounter for fracture with malunion
*M84.752S	*Incomplete atypical femoral fracture, left leg, sequela
*M84.753A	*Incomplete atypical femoral fracture, unspecified leg, initial encounter for fracture
*M84.753D	*Incomplete atypical femoral fracture, unspecified leg, subsequent encounter for fracture with routine healing
*M84.753G	*Incomplete atypical femoral fracture, unspecified leg, subsequent encounter for fracture with delayed healing
*M84.753K	*Incomplete atypical femoral fracture, unspecified leg, subsequent encounter for fracture with nonunion
*M84.753P	*Incomplete atypical femoral fracture, unspecified leg, subsequent encounter for fracture with malunion
*M84.753S	*Incomplete atypical femoral fracture, unspecified leg, sequela
*M84.754A	*Complete transverse atypical femoral fracture, right leg, initial encounter for fracture
*M84.754D	*Complete transverse atypical femoral fracture, right leg, subsequent encounter for fracture with routine healing
*M84.754G	*Complete transverse atypical femoral fracture, right leg, subsequent encounter for fracture with delayed healing
*M84.754K	*Complete transverse atypical femoral fracture, right leg, subsequent encounter for fracture with nonunion
*M84.754P	*Complete transverse atypical femoral fracture, right leg, subsequent encounter for fracture with malunion
*M84.754S	*Complete transverse atypical femoral fracture, right leg, sequela
*M84.755A	*Complete transverse atypical femoral fracture, left leg, initial encounter for fracture



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Code	Description
*M84.755D	*Complete transverse atypical femoral fracture, left leg, subsequent encounter for fracture with routine healing
*M84.755G	*Complete transverse atypical femoral fracture, left leg, subsequent encounter for fracture with delayed healing
*M84.755K	*Complete transverse atypical femoral fracture, left leg, subsequent encounter for fracture with nonunion
*M84.755P	*Complete transverse atypical femoral fracture, left leg, subsequent encounter for fracture with malunion
*M84.755S	*Complete transverse atypical femoral fracture, left leg, sequela
*M84.756A	*Complete transverse atypical femoral fracture, unspecified leg, initial encounter for fracture
*M84.756D	*Complete transverse atypical femoral fracture, unspecified leg, subsequent encounter for fracture with routine healing
*M84.756G	*Complete transverse atypical femoral fracture, unspecified leg, subsequent encounter for fracture with delayed healing
*M84.756K	*Complete transverse atypical femoral fracture, unspecified leg, subsequent encounter for fracture with nonunion
*M84.756P	*Complete transverse atypical femoral fracture, unspecified leg, subsequent encounter for fracture with malunion
*M84.756S	*Complete transverse atypical femoral fracture, unspecified leg, sequela
*M84.757A	*Complete oblique atypical femoral fracture, right leg, initial encounter for fracture
*M84.757D	*Complete oblique atypical femoral fracture, right leg, subsequent encounter for fracture with routine healing
*M84.757G	*Complete oblique atypical femoral fracture, right leg, subsequent encounter for fracture with delayed healing
*M84.757K	*Complete oblique atypical femoral fracture, right leg, subsequent encounter for fracture with nonunion
*M84.757P	*Complete oblique atypical femoral fracture, right leg, subsequent encounter for fracture with malunion
*M84.757S	*Complete oblique atypical femoral fracture, right leg, sequela
*M84.758A	*Complete oblique atypical femoral fracture, left leg, initial encounter for fracture
*M84.758D	*Complete oblique atypical femoral fracture, left leg, subsequent encounter for fracture with routine healing
*M84.758G	*Complete oblique atypical femoral fracture, left leg, subsequent encounter for fracture with delayed healing



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Code	Description
*M84.758K	*Complete oblique atypical femoral fracture, left leg, subsequent encounter for fracture with nonunion
*M84.758P	*Complete oblique atypical femoral fracture, left leg, subsequent encounter for fracture with malunion
*M84.758S	*Complete oblique atypical femoral fracture, left leg, sequela
*M84.759A	*Complete oblique atypical femoral fracture, unspecified leg, initial encounter for fracture
*M84.759D	*Complete oblique atypical femoral fracture, unspecified leg, subsequent encounter for fracture with routine healing
*M84.759G	*Complete oblique atypical femoral fracture, unspecified leg, subsequent encounter for fracture with delayed healing
*M84.759K	*Complete oblique atypical femoral fracture, unspecified leg, subsequent encounter for fracture with nonunion
*M84.759P	*Complete oblique atypical femoral fracture, unspecified leg, subsequent encounter for fracture with malunion
*M84.759S	*Complete oblique atypical femoral fracture, unspecified leg, sequela
*M97.01XA	*Periprosthetic fracture around internal prosthetic right hip joint, initial encounter
*M97.02XA	*Periprosthetic fracture around internal prosthetic left hip joint, initial encounter
*M97.11XA	*Periprosthetic fracture around internal prosthetic right knee joint, initial encounter
*M97.12XA	*Periprosthetic fracture around internal prosthetic left knee joint, initial encounter
*M97.21XA	*Periprosthetic fracture around internal prosthetic right ankle joint, initial encounter
*M97.22XA	*Periprosthetic fracture around internal prosthetic left ankle joint, initial encounter
*M97.31XA	*Periprosthetic fracture around internal prosthetic right shoulder joint, initial encounter
*M97.32XA	*Periprosthetic fracture around internal prosthetic left shoulder joint, initial encounter
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis
N02.6	Recurrent and persistent hematuria with dense deposit disease

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Code	Description
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis
N02.8	Recurrent and persistent hematuria with other morphologic changes
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes
N04.0	Nephrotic syndrome with minor glomerular abnormality
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis
N04.6	Nephrotic syndrome with dense deposit disease
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis
N04.8	Nephrotic syndrome with other morphologic changes
N04.9	Nephrotic syndrome with unspecified morphologic changes
N08	Glomerular disorders in diseases classified elsewhere
N18.4	Chronic kidney disease, stage 4 (severe)
N18.5	Chronic kidney disease, stage 5
N18.6	End stage renal disease
N18.9	Chronic kidney disease, unspecified
N19	Unspecified kidney failure
N50.0	Atrophy of testis
N89.7	Hematocolpos
N91.0	Primary amenorrhea
N91.1	Secondary amenorrhea
N91.2	Amenorrhea, unspecified
N91.3	Primary oligomenorrhea
N91.4	Secondary oligomenorrhea
N91.5	Oligomenorrhea, unspecified
N92.0	Excessive and frequent menstruation with regular cycle
N92.1	Excessive and frequent menstruation with irregular cycle
N92.2	Excessive menstruation at puberty

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Code	Description
N92.3	Ovulation bleeding
N92.4	Excessive bleeding in the premenopausal period
N92.5	Other specified irregular menstruation
N92.6	Irregular menstruation, unspecified
N93.0	Postcoital and contact bleeding
*N93.1	*Pre-pubertal vaginal bleeding
N93.8	Other specified abnormal uterine and vaginal bleeding
N93.9	Abnormal uterine and vaginal bleeding, unspecified
N95.0	Postmenopausal bleeding
*O09.A0	*Supervision of pregnancy with history of molar pregnancy, unspecified trimester
*O09.A1	*Supervision of pregnancy with history of molar pregnancy, first trimester
*O09.A2	*Supervision of pregnancy with history of molar pregnancy, second trimester
*O09.A3	*Supervision of pregnancy with history of molar pregnancy, third trimester
*O11.4	*Pre-existing hypertension with pre-eclampsia, complicating childbirth
*O11.5	*Pre-existing hypertension with pre-eclampsia, complicating the puerperium
O90.81	Anemia of the puerperium
O99.011	Anemia complicating pregnancy, first trimester
O99.012	Anemia complicating pregnancy, second trimester
O99.013	Anemia complicating pregnancy, third trimester
O99.019	Anemia complicating pregnancy, unspecified trimester
O99.02	Anemia complicating childbirth
O99.03	Anemia complicating the puerperium
P55.1	ABO isoimmunization of newborn
P55.8	Other hemolytic diseases of newborn
P55.9	Hemolytic disease of newborn, unspecified
P56.0	Hydrops fetalis due to isoimmunization
P56.90	Hydrops fetalis due to unspecified hemolytic disease
P56.99	Hydrops fetalis due to other hemolytic disease
P57.0	Kernicterus due to isoimmunization
Q85.00	Neurofibromatosis, unspecified

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Code	Description
Q85.01	Neurofibromatosis, type 1
Q85.02	Neurofibromatosis, type 2
Q85.03	Schwannomatosis
Q85.09	Other neurofibromatosis
R00.1	Bradycardia, unspecified
R11.10	Vomiting, unspecified
R11.13	Vomiting of fecal matter
R63.8	Other symptoms and signs concerning food and fluid intake
R64	Cachexia
R71.0	Precipitous drop in hematocrit
R71.8	Other abnormality of red blood cells
R74.0	Nonspecific elevation of levels of transaminase and lactic acid dehydrogenase [LDH]
R74.8	Abnormal levels of other serum enzymes
R74.9	Abnormal serum enzyme level, unspecified
R78.71	Abnormal lead level in blood
R78.79	Finding of abnormal level of heavy metals in blood
R78.89	Finding of other specified substances, not normally found in blood
R79.0	Abnormal level of blood mineral
R79.89	Other specified abnormal findings of blood chemistry
R79.9	Abnormal finding of blood chemistry, unspecified
T45.4X1A	Poisoning by iron and its compounds, accidental (unintentional), initial encounter
T45.4X2A	Poisoning by iron and its compounds, intentional self-harm, initial encounter
T45.4X3A	Poisoning by iron and its compounds, assault, initial encounter
T45.4X4A	Poisoning by iron and its compounds, undetermined, initial encounter
T56.0X1A	Toxic effect of lead and its compounds, accidental (unintentional), initial encounter
T56.0X2A	Toxic effect of lead and its compounds, intentional self-harm, initial encounter
T56.0X3A	Toxic effect of lead and its compounds, assault, initial encounter
T56.0X4A	Toxic effect of lead and its compounds, undetermined, initial encounter
T80.89XA	Other complications following infusion, transfusion and therapeutic injection, initial encounter
T80.910A	Acute hemolytic transfusion reaction, unspecified incompatibility, initial encounter

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Code	Description
T80.911A	Delayed hemolytic transfusion reaction, unspecified incompatibility, initial encounter
T80.919A	Hemolytic transfusion reaction, unspecified incompatibility, unspecified as acute or delayed, initial encounter
T80.92XA	Unspecified transfusion reaction, initial encounter
T86.00	Unspecified complication of bone marrow transplant
T86.01	Bone marrow transplant rejection
T86.02	Bone marrow transplant failure
T86.03	Bone marrow transplant infection
T86.09	Other complications of bone marrow transplant
Z21	Asymptomatic human immunodeficiency virus [HIV] infection status
*Z31.7	*Encounter for procreative management and counseling for gestational carrier
Z49.31	Encounter for adequacy testing for hemodialysis
Z49.32	Encounter for adequacy testing for peritoneal dialysis
*Z84.82	*Family history of sudden infant death syndrome
Z86.2	Personal history of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
Z86.39	Personal history of other endocrine, nutritional and metabolic disease
Z95.2	Presence of prosthetic heart valve
Z95.811	Presence of heart assist device
Z95.812	Presence of fully implantable artificial heart
Z95.820	Peripheral vascular angioplasty status with implants and grafts
Z95.828	Presence of other vascular implants and grafts
Z96.60	Presence of unspecified orthopedic joint implant
Z98.870	Personal history of in utero procedure during pregnancy
Z98.871	Personal history of in utero procedure while a fetus
Z98.890	Other specified postprocedural states
Z98.891	History of uterine scar from previous surgery

Indications

1. Ferritin, iron and either iron binding capacity or transferrin are useful in the differential diagnosis of iron deficiency, anemia, and for iron overload conditions.



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a. The following presentations are examples that may support the use of these studies for evaluating iron deficiency:

- Certain abnormal blood count values (i.e., decreased Mean Corpuscular Volume (MCV), decreased hemoglobin/hematocrit when the MCV is low or normal, or increased Red cell Distribution Width (RDW) and low or normal MCV)
- Abnormal appetite (pica)
- Acute or chronic gastrointestinal blood loss
- Hematuria
- Menorrhagia
- Malabsorption
- Status post-gastrectomy
- Status post-gastrojejunostomy
- Malnutrition
- Preoperative autologous blood collection(s)
- Malignant, chronic inflammatory and infectious conditions associated with anemia which may present in a similar manner to iron deficiency anemia
- Following a significant surgical procedure where blood loss had occurred and had not been repaired with adequate iron replacement.

b. The following presentations are examples that may support the use of these studies for evaluating iron overload:

- Chronic Hepatitis
 - Diabetes
 - Hyperpigmentation of skin
 - Arthropathy
 - Cirrhosis
 - Hypogonadism
 - Hypopituitarism
 - Impaired porphyrin metabolism
 - Heart failure
 - Multiple transfusions
 - Sideroblastic anemia
 - Thalassemia major
 - Cardiomyopathy, cardiac dysrhythmias and conduction disturbances
2. Follow-up testing may be appropriate to monitor response to therapy, e.g., oral or parenteral iron, ascorbic acid, and erythropoietin.
3. Iron studies may be appropriate in patients after treatment for other nutritional deficiency anemias, such as folate and vitamin B12, because iron deficiency may not be revealed until such a nutritional deficiency is treated.



4. Serum ferritin may be appropriate for monitoring iron status in patients with chronic renal disease with or without dialysis.
5. Serum iron may also be indicated for evaluation of toxic effects of iron and other metals (e.g., nickel, cadmium, aluminum, and lead) whether due to accidental, intentional exposure or metabolic causes.

Limitations

1. Iron studies should be used to diagnose and manage iron deficiency or iron overload states. These tests are not to be used solely to assess acute phase reactants where disease management will be unchanged. For example, infections and malignancies are associated with elevations in acute phase reactants such as ferritin, and decreases in serum iron concentration, but iron studies would only be medically necessary if results of iron studies might alter the management of the primary diagnosis or might warrant direct treatment of an iron disorder or condition.
2. If a normal serum ferritin level is documented, repeat testing would not ordinarily be medically necessary unless there is a change in the patient's condition, and ferritin assessment is needed for the ongoing management of the patient. For example, a patient presents with new onset insulin-dependent diabetes mellitus and has a serum ferritin level performed for the suspicion of hemochromatosis. If the ferritin level is normal, the repeat ferritin for diabetes mellitus would not be medically necessary.
3. When an End Stage Renal Disease (ESRD) patient is tested for ferritin, testing more frequently than every three months requires documentation of medical necessity (e.g., other than chronic renal failure or renal failure, unspecified).
4. It is ordinarily not necessary to measure both transferrin and TIBC at the same time because TIBC is an indirect measure of transferrin. When transferrin is ordered as part of the nutritional assessment for evaluating malnutrition, it is not necessary to order other iron studies unless iron deficiency or iron overload is suspected as well.
5. It is not ordinarily necessary to measure either iron/TIBC (or transferrin) and ferritin in initial patient testing. If clinically indicated after evaluation of the initial iron studies, it may be appropriate to perform additional iron studies either on the initial specimen or on a subsequently obtained specimen. After a diagnosis of iron deficiency or iron overload is established, either iron/TIBC (or transferrin) or ferritin may be medically necessary for monitoring, but not both.
6. It would not ordinarily be considered medically necessary to do a ferritin as a preoperative test except in the presence of anemia or recent autologous blood collections prior to the surgery.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.



Sources of Information

- CDC. Recommendations to prevent and control iron deficiency in the United States. MMWR 1998; 47(RR-3):1-29.
- Powell LW, George DK, McDonnell SM, Kowdley KV. Diagnosis of hemochromatosis. Ann.Intern.Med. 1998;129:925-931.
- Spiekerman AM. Proteins used in nutritional assessment. Clin.Lab.Med. 1993;13:353-369.
- Wallach JB. Handbook of Interpretation of Diagnostic Tests. Lippincott-Raven Publishers (Philadelphia) 1998, pp. 170-180.
- Van Walraven C, Goel V, Chan B. Effect of Population-Based Interventions on Laboratory Utilization. JAMA. 1998; 280:2028-2033.
- Guyatt GH, Patterson C, Ali M, Singer J, Levine M, Turpie I, Meyer R. Diagnosis of Iron-Deficiency Anemia in the Elderly. AmJMed. 1990; 88:205-209.
- Burns ER, Goldberg SN, Lawrence C, Wenz B. AJCP. 1990; 3: 240-245.
- Burns ER, et al. Brief Clinical Observations. AmJMed. 1991; 90:653-654.
- Yang Q, et al. Hemochromatosis-associated Mortality in the United States from 1979 to 1992: An Analysis of Multiple-Cause Mortality Data. AnIntMed.1998;129:946-953.



190.19 - Collagen Crosslinks, Any Method

Description

Collagen crosslinks, part of the matrix of bone upon which bone mineral is deposited, are biochemical markers the excretion of which provides a quantitative measurement of bone resorption. Elevated levels of urinary collagen crosslinks indicate elevated bone resorption. Elevated bone resorption contributes to age-related and postmenopausal loss of bone leading to osteoporosis and increased risk of fracture. The collagen crosslinks assay can be performed by immunoassay or by high performance liquid chromatography (HPLC). Collagen crosslink immunoassays measure the pyridinoline crosslinks and associated telopeptides in urine.

Bone is constantly undergoing a metabolic process called turnover or remodeling. This includes a degradation process, bone resorption, mediated by the action of osteoclasts, and a building process, bone formation, mediated by the action of osteoblasts. Remodeling is required for the maintenance and overall health of bone and is tightly coupled; that is, resorption and formation must be in balance. In abnormal states of bone remodeling, when resorption exceeds formation, it results in a net loss of bone. The measurement of specific, bone-derived resorption products provides analytical data about the rate of bone resorption.

Osteoporosis is a condition characterized by low bone mass and structural deterioration of bone tissue, leading to bone fragility and an increased susceptibility to fractures of the hip, spine, and wrist. The term primary osteoporosis is applied where the causal factor in the disease is menopause or aging. The term secondary osteoporosis is applied where the causal factor is something other than menopause or aging, such as long-term administration of glucocorticosteroids, endocrine-related disorders (other than loss of estrogen due to menopause), and certain bone diseases such as cancer of the bone.

With respect to quantifying bone resorption, collagen crosslink tests can provide adjunct diagnostic information in concert with bone mass measurements. Bone mass measurements and biochemical markers may have complementary roles to play in assessing effectiveness of osteoporosis treatment. Proper management of osteoporosis patients, who are on long-term therapeutic regimens, may include laboratory testing of biochemical markers of bone turnover, such as collagen crosslinks, that provide a profile of bone turnover responses within weeks of therapy. Changes in collagen crosslinks are determined following commencement of antiresorptive therapy. These can be measured over a shorter time interval when compared to bone mass density. If bone resorption is not elevated, repeat testing is not medically necessary.

HCPCS Codes (Alphanumeric, CPT[®] AMA)

Code	Description
82523	Collagen cross links, any method



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ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
E05.00	Thyrotoxicosis with diffuse goiter without thyrotoxic crisis or storm
E05.01	Thyrotoxicosis with diffuse goiter with thyrotoxic crisis or storm
E05.10	Thyrotoxicosis with toxic single thyroid nodule without thyrotoxic crisis or storm
E05.11	Thyrotoxicosis with toxic single thyroid nodule with thyrotoxic crisis or storm
E05.20	Thyrotoxicosis with toxic multinodular goiter without thyrotoxic crisis or storm
E05.21	Thyrotoxicosis with toxic multinodular goiter with thyrotoxic crisis or storm
E05.30	Thyrotoxicosis from ectopic thyroid tissue without thyrotoxic crisis or storm
E05.31	Thyrotoxicosis from ectopic thyroid tissue with thyrotoxic crisis or storm
E05.40	Thyrotoxicosis factitia without thyrotoxic crisis or storm
E05.41	Thyrotoxicosis factitia with thyrotoxic crisis or storm
E05.80	Other thyrotoxicosis without thyrotoxic crisis or storm
E05.81	Other thyrotoxicosis with thyrotoxic crisis or storm
E05.90	Thyrotoxicosis, unspecified without thyrotoxic crisis or storm
E05.91	Thyrotoxicosis, unspecified with thyrotoxic crisis or storm
E06.3	Autoimmune thyroiditis
E07.9	Disorder of thyroid, unspecified
E21.0	Primary hyperparathyroidism
E21.1	Secondary hyperparathyroidism, not elsewhere classified
E21.2	Other hyperparathyroidism
E21.3	Hyperparathyroidism, unspecified
E28.310	Symptomatic premature menopause
E28.319	Asymptomatic premature menopause
E28.39	Other primary ovarian failure
E28.8	Other ovarian dysfunction
E28.9	Ovarian dysfunction, unspecified



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Code	Description
E55.9	Vitamin D deficiency, unspecified
E58	Dietary calcium deficiency
E59	Dietary selenium deficiency
E60	Dietary zinc deficiency
E61.0	Copper deficiency
E61.1	Iron deficiency
E61.2	Magnesium deficiency
E61.3	Manganese deficiency
E61.4	Chromium deficiency
E61.5	Molybdenum deficiency
E61.6	Vanadium deficiency
E89.40	Asymptomatic postprocedural ovarian failure
E89.41	Symptomatic postprocedural ovarian failure
M48.50XA	Collapsed vertebra, not elsewhere classified, site unspecified, initial encounter for fracture
M48.51XA	Collapsed vertebra, not elsewhere classified, occipito-atlanto-axial region, initial encounter for fracture
M48.52XA	Collapsed vertebra, not elsewhere classified, cervical region, initial encounter for fracture
M48.53XA	Collapsed vertebra, not elsewhere classified, cervicothoracic region, initial encounter for fracture
M48.54XA	Collapsed vertebra, not elsewhere classified, thoracic region, initial encounter for fracture
M48.55XA	Collapsed vertebra, not elsewhere classified, thoracolumbar region, initial encounter for fracture
M48.56XA	Collapsed vertebra, not elsewhere classified, lumbar region, initial encounter for fracture
M48.57XA	Collapsed vertebra, not elsewhere classified, lumbosacral region, initial encounter for fracture
M48.58XA	Collapsed vertebra, not elsewhere classified, sacral and sacrococcygeal region, initial encounter for fracture
M80.00XA	Age-related osteoporosis with current pathological fracture, unspecified site, initial encounter for fracture
M80.011A	Age-related osteoporosis with current pathological fracture, right shoulder, initial encounter for fracture
M80.012A	Age-related osteoporosis with current pathological fracture, left shoulder, initial encounter for fracture

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Code	Description
M80.019A	Age-related osteoporosis with current pathological fracture, unspecified shoulder, initial encounter for fracture
M80.021A	Age-related osteoporosis with current pathological fracture, right humerus, initial encounter for fracture
M80.022A	Age-related osteoporosis with current pathological fracture, left humerus, initial encounter for fracture
M80.029A	Age-related osteoporosis with current pathological fracture, unspecified humerus, initial encounter for fracture
M80.031A	Age-related osteoporosis with current pathological fracture, right forearm, initial encounter for fracture
M80.032A	Age-related osteoporosis with current pathological fracture, left forearm, initial encounter for fracture
M80.039A	Age-related osteoporosis with current pathological fracture, unspecified forearm, initial encounter for fracture
M80.041A	Age-related osteoporosis with current pathological fracture, right hand, initial encounter for fracture
M80.042A	Age-related osteoporosis with current pathological fracture, left hand, initial encounter for fracture
M80.049A	Age-related osteoporosis with current pathological fracture, unspecified hand, initial encounter for fracture
M80.051A	Age-related osteoporosis with current pathological fracture, right femur, initial encounter for fracture
M80.052A	Age-related osteoporosis with current pathological fracture, left femur, initial encounter for fracture
M80.059A	Age-related osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture
M80.061A	Age-related osteoporosis with current pathological fracture, right lower leg, initial encounter for fracture
M80.062A	Age-related osteoporosis with current pathological fracture, left lower leg, initial encounter for fracture
M80.069A	Age-related osteoporosis with current pathological fracture, unspecified lower leg, initial encounter for fracture
M80.071A	Age-related osteoporosis with current pathological fracture, right ankle and foot, initial encounter for fracture
M80.072A	Age-related osteoporosis with current pathological fracture, left ankle and foot, initial encounter for fracture



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Code	Description
M80.079A	Age-related osteoporosis with current pathological fracture, unspecified ankle and foot, initial encounter for fracture
M80.08XA	Age-related osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture
M80.80XA	Other osteoporosis with current pathological fracture, unspecified site, initial encounter for fracture
M80.811A	Other osteoporosis with current pathological fracture, right shoulder, initial encounter for fracture
M80.812A	Other osteoporosis with current pathological fracture, left shoulder, initial encounter for fracture
M80.819A	Other osteoporosis with current pathological fracture, unspecified shoulder, initial encounter for fracture
M80.821A	Other osteoporosis with current pathological fracture, right humerus, initial encounter for fracture
M80.822A	Other osteoporosis with current pathological fracture, left humerus, initial encounter for fracture
M80.829A	Other osteoporosis with current pathological fracture, unspecified humerus, initial encounter for fracture
M80.831A	Other osteoporosis with current pathological fracture, right forearm, initial encounter for fracture
M80.832A	Other osteoporosis with current pathological fracture, left forearm, initial encounter for fracture
M80.839A	Other osteoporosis with current pathological fracture, unspecified forearm, initial encounter for fracture
M80.841A	Other osteoporosis with current pathological fracture, right hand, initial encounter for fracture
M80.842A	Other osteoporosis with current pathological fracture, left hand, initial encounter for fracture
M80.849A	Other osteoporosis with current pathological fracture, unspecified hand, initial encounter for fracture
M80.851A	Other osteoporosis with current pathological fracture, right femur, initial encounter for fracture
M80.852A	Other osteoporosis with current pathological fracture, left femur, initial encounter for fracture
M80.859A	Other osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture



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Code	Description
M80.861A	Other osteoporosis with current pathological fracture, right lower leg, initial encounter for fracture
M80.862A	Other osteoporosis with current pathological fracture, left lower leg, initial encounter for fracture
M80.869A	Other osteoporosis with current pathological fracture, unspecified lower leg, initial encounter for fracture
M80.871A	Other osteoporosis with current pathological fracture, right ankle and foot, initial encounter for fracture
M80.872A	Other osteoporosis with current pathological fracture, left ankle and foot, initial encounter for fracture
M80.879A	Other osteoporosis with current pathological fracture, unspecified ankle and foot, initial encounter for fracture
M80.88XA	Other osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture
M81.0	Age-related osteoporosis without current pathological fracture
M81.6	Localized osteoporosis [Lequesne]
M81.8	Other osteoporosis without current pathological fracture
M84.40XA	Pathological fracture, unspecified site, initial encounter for fracture
M84.411A	Pathological fracture, right shoulder, initial encounter for fracture
M84.412A	Pathological fracture, left shoulder, initial encounter for fracture
M84.419A	Pathological fracture, unspecified shoulder, initial encounter for fracture
M84.421A	Pathological fracture, right humerus, initial encounter for fracture
M84.422A	Pathological fracture, left humerus, initial encounter for fracture
M84.429A	Pathological fracture, unspecified humerus, initial encounter for fracture
M84.431A	Pathological fracture, right ulna, initial encounter for fracture
M84.432A	Pathological fracture, left ulna, initial encounter for fracture
M84.433A	Pathological fracture, right radius, initial encounter for fracture
M84.434A	Pathological fracture, left radius, initial encounter for fracture
M84.439A	Pathological fracture, unspecified ulna and radius, initial encounter for fracture
M84.441A	Pathological fracture, right hand, initial encounter for fracture
M84.442A	Pathological fracture, left hand, initial encounter for fracture
M84.443A	Pathological fracture, unspecified hand, initial encounter for fracture
M84.444A	Pathological fracture, right finger(s), initial encounter for fracture

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Code	Description
M84.445A	Pathological fracture, left finger(s), initial encounter for fracture
M84.446A	Pathological fracture, unspecified finger(s), initial encounter for fracture
M84.451A	Pathological fracture, right femur, initial encounter for fracture
M84.452A	Pathological fracture, left femur, initial encounter for fracture
M84.453A	Pathological fracture, unspecified femur, initial encounter for fracture
M84.454A	Pathological fracture, pelvis, initial encounter for fracture
M84.459A	Pathological fracture, hip, unspecified, initial encounter for fracture
M84.461A	Pathological fracture, right tibia, initial encounter for fracture
M84.462A	Pathological fracture, left tibia, initial encounter for fracture
M84.463A	Pathological fracture, right fibula, initial encounter for fracture
M84.464A	Pathological fracture, left fibula, initial encounter for fracture
M84.469A	Pathological fracture, unspecified tibia and fibula, initial encounter for fracture
M84.471A	Pathological fracture, right ankle, initial encounter for fracture
M84.472A	Pathological fracture, left ankle, initial encounter for fracture
M84.473A	Pathological fracture, unspecified ankle, initial encounter for fracture
M84.474A	Pathological fracture, right foot, initial encounter for fracture
M84.475A	Pathological fracture, left foot, initial encounter for fracture
M84.476A	Pathological fracture, unspecified foot, initial encounter for fracture
M84.477A	Pathological fracture, right toe(s), initial encounter for fracture
M84.478A	Pathological fracture, left toe(s), initial encounter for fracture
M84.479A	Pathological fracture, unspecified toe(s), initial encounter for fracture
M84.48XA	Pathological fracture, other site, initial encounter for fracture
M84.50XA	Pathological fracture in neoplastic disease, unspecified site, initial encounter for fracture
M84.511A	Pathological fracture in neoplastic disease, right shoulder, initial encounter for fracture
M84.512A	Pathological fracture in neoplastic disease, left shoulder, initial encounter for fracture
M84.519A	Pathological fracture in neoplastic disease, unspecified shoulder, initial encounter for fracture
M84.521A	Pathological fracture in neoplastic disease, right humerus, initial encounter for fracture
M84.522A	Pathological fracture in neoplastic disease, left humerus, initial encounter for fracture
M84.529A	Pathological fracture in neoplastic disease, unspecified humerus, initial encounter for fracture

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Code	Description
M84.531A	Pathological fracture in neoplastic disease, right ulna, initial encounter for fracture
M84.532A	Pathological fracture in neoplastic disease, left ulna, initial encounter for fracture
M84.533A	Pathological fracture in neoplastic disease, right radius, initial encounter for fracture
M84.534A	Pathological fracture in neoplastic disease, left radius, initial encounter for fracture
M84.539A	Pathological fracture in neoplastic disease, unspecified ulna and radius, initial encounter for fracture
M84.541A	Pathological fracture in neoplastic disease, right hand, initial encounter for fracture
M84.542A	Pathological fracture in neoplastic disease, left hand, initial encounter for fracture
M84.549A	Pathological fracture in neoplastic disease, unspecified hand, initial encounter for fracture
M84.550A	Pathological fracture in neoplastic disease, pelvis, initial encounter for fracture
M84.551A	Pathological fracture in neoplastic disease, right femur, initial encounter for fracture
M84.552A	Pathological fracture in neoplastic disease, left femur, initial encounter for fracture
M84.553A	Pathological fracture in neoplastic disease, unspecified femur, initial encounter for fracture
M84.559A	Pathological fracture in neoplastic disease, hip, unspecified, initial encounter for fracture
M84.561A	Pathological fracture in neoplastic disease, right tibia, initial encounter for fracture
M84.562A	Pathological fracture in neoplastic disease, left tibia, initial encounter for fracture
M84.563A	Pathological fracture in neoplastic disease, right fibula, initial encounter for fracture
M84.564A	Pathological fracture in neoplastic disease, left fibula, initial encounter for fracture
M84.569A	Pathological fracture in neoplastic disease, unspecified tibia and fibula, initial encounter for fracture
M84.571A	Pathological fracture in neoplastic disease, right ankle, initial encounter for fracture
M84.572A	Pathological fracture in neoplastic disease, left ankle, initial encounter for fracture
M84.573A	Pathological fracture in neoplastic disease, unspecified ankle, initial encounter for fracture
M84.574A	Pathological fracture in neoplastic disease, right foot, initial encounter for fracture
M84.575A	Pathological fracture in neoplastic disease, left foot, initial encounter for fracture
M84.576A	Pathological fracture in neoplastic disease, unspecified foot, initial encounter for fracture
M84.58XA	Pathological fracture in neoplastic disease, other specified site, initial encounter for fracture
M84.60XA	Pathological fracture in other disease, unspecified site, initial encounter for fracture
M84.611A	Pathological fracture in other disease, right shoulder, initial encounter for fracture
M84.612A	Pathological fracture in other disease, left shoulder, initial encounter for fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
M84.619A	Pathological fracture in other disease, unspecified shoulder, initial encounter for fracture
M84.621A	Pathological fracture in other disease, right humerus, initial encounter for fracture
M84.622A	Pathological fracture in other disease, left humerus, initial encounter for fracture
M84.629A	Pathological fracture in other disease, unspecified humerus, initial encounter for fracture
M84.631A	Pathological fracture in other disease, right ulna, initial encounter for fracture
M84.632A	Pathological fracture in other disease, left ulna, initial encounter for fracture
M84.633A	Pathological fracture in other disease, right radius, initial encounter for fracture
M84.634A	Pathological fracture in other disease, left radius, initial encounter for fracture
M84.639A	Pathological fracture in other disease, unspecified ulna and radius, initial encounter for fracture
M84.641A	Pathological fracture in other disease, right hand, initial encounter for fracture
M84.642A	Pathological fracture in other disease, left hand, initial encounter for fracture
M84.649A	Pathological fracture in other disease, unspecified hand, initial encounter for fracture
M84.650A	Pathological fracture in other disease, pelvis, initial encounter for fracture
M84.651A	Pathological fracture in other disease, right femur, initial encounter for fracture
M84.652A	Pathological fracture in other disease, left femur, initial encounter for fracture
M84.653A	Pathological fracture in other disease, unspecified femur, initial encounter for fracture
M84.659A	Pathological fracture in other disease, hip, unspecified, initial encounter for fracture
M84.661A	Pathological fracture in other disease, right tibia, initial encounter for fracture
M84.662A	Pathological fracture in other disease, left tibia, initial encounter for fracture
M84.663A	Pathological fracture in other disease, right fibula, initial encounter for fracture
M84.664A	Pathological fracture in other disease, left fibula, initial encounter for fracture
M84.669A	Pathological fracture in other disease, unspecified tibia and fibula, initial encounter for fracture
M84.671A	Pathological fracture in other disease, right ankle, initial encounter for fracture
M84.672A	Pathological fracture in other disease, left ankle, initial encounter for fracture
M84.673A	Pathological fracture in other disease, unspecified ankle, initial encounter for fracture
M84.674A	Pathological fracture in other disease, right foot, initial encounter for fracture
M84.675A	Pathological fracture in other disease, left foot, initial encounter for fracture
M84.676A	Pathological fracture in other disease, unspecified foot, initial encounter for fracture
M84.68XA	Pathological fracture in other disease, other site, initial encounter for fracture

NCD 190.19

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*M84.751A	*Incomplete atypical femoral fracture, right leg, initial encounter for fracture
*M85.80	*Other specified disorders of bone density and structure, unspecified site
*M85.811	*Other specified disorders of bone density and structure, right shoulder
*M85.812	*Other specified disorders of bone density and structure, left shoulder
*M85.819	*Other specified disorders of bone density and structure, unspecified shoulder
*M85.821	*Other specified disorders of bone density and structure, right upper arm
*M85.822	*Other specified disorders of bone density and structure, left upper arm
*M85.829	*Other specified disorders of bone density and structure, unspecified upper arm
*M85.831	*Other specified disorders of bone density and structure, right forearm
*M85.832	*Other specified disorders of bone density and structure, left forearm
*M85.839	*Other specified disorders of bone density and structure, unspecified forearm
*M85.841	*Other specified disorders of bone density and structure, right hand
*M85.842	*Other specified disorders of bone density and structure, left hand
*M85.849	*Other specified disorders of bone density and structure, unspecified hand
*M85.851	*Other specified disorders of bone density and structure, right thigh
*M85.852	*Other specified disorders of bone density and structure, left thigh
*M85.859	*Other specified disorders of bone density and structure, unspecified thigh
*M85.861	*Other specified disorders of bone density and structure, right lower leg
*M85.862	*Other specified disorders of bone density and structure, left lower leg
*M85.869	*Other specified disorders of bone density and structure, unspecified lower leg
*M85.871	*Other specified disorders of bone density and structure, right ankle and foot
*M85.872	*Other specified disorders of bone density and structure, left ankle and foot
*M85.879	*Other specified disorders of bone density and structure, unspecified ankle and foot
*M85.88	*Other specified disorders of bone density and structure, other site
*M85.89	*Other specified disorders of bone density and structure, multiple sites
M85.9	Disorder of bone density and structure, unspecified
M88.0	Osteitis deformans of skull
M88.1	Osteitis deformans of vertebrae
M88.811	Osteitis deformans of right shoulder
M88.812	Osteitis deformans of left shoulder



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
M88.819	Osteitis deformans of unspecified shoulder
M88.821	Osteitis deformans of right upper arm
M88.822	Osteitis deformans of left upper arm
M88.829	Osteitis deformans of unspecified upper arm
M88.831	Osteitis deformans of right forearm
M88.832	Osteitis deformans of left forearm
M88.839	Osteitis deformans of unspecified forearm
M88.841	Osteitis deformans of right hand
M88.842	Osteitis deformans of left hand
M88.849	Osteitis deformans of unspecified hand
M88.851	Osteitis deformans of right thigh
M88.852	Osteitis deformans of left thigh
M88.859	Osteitis deformans of unspecified thigh
M88.861	Osteitis deformans of right lower leg
M88.862	Osteitis deformans of left lower leg
M88.869	Osteitis deformans of unspecified lower leg
M88.871	Osteitis deformans of right ankle and foot
M88.872	Osteitis deformans of left ankle and foot
M88.879	Osteitis deformans of unspecified ankle and foot
M88.88	Osteitis deformans of other bones
M88.89	Osteitis deformans of multiple sites
M88.9	Osteitis deformans of unspecified bone
M89.9	Disorder of bone, unspecified
M94.9	Disorder of cartilage, unspecified
N92.4	Excessive bleeding in the premenopausal period
N95.0	Postmenopausal bleeding
N95.1	Menopausal and female climacteric states
N95.8	Other specified menopausal and perimenopausal disorders
N95.9	Unspecified menopausal and perimenopausal disorder
S12.9XXA	Fracture of neck, unspecified, initial encounter

NCD 190.19

***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

April 2017



Code	Description
Z79.3	Long term (current) use of hormonal contraceptives
Z79.51	Long term (current) use of inhaled steroids
Z79.52	Long term (current) use of systemic steroids
*Z79.84	*Long term (current) use of oral hypoglycemic drugs
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy

Indications

Generally speaking, collagen crosslink testing is useful mostly in “fast losers” of bone. The age when these bone markers can help direct therapy is often pre-Medicare. By the time a fast loser of bone reaches age 65, she will most likely have been stabilized by appropriate therapy or have lost so much bone mass that further testing is useless. Coverage for bone marker assays may be established, however, for younger Medicare beneficiaries and for those men and women who might become fast losers because of some other therapy such as glucocorticoids. Safeguards should be incorporated to prevent excessive use of tests in patients for whom they have no clinical relevance.

Collagen crosslinks testing is used to:

- Identify individuals with elevated bone resorption, who have osteoporosis in whom response to treatment is being monitored.
- Predict response (as assessed by bone mass measurements) to FDA approved antiresorptive therapy in postmenopausal women.
- Assess response to treatment of patients with osteoporosis, Paget’s disease of the bone, or risk for osteoporosis where treatment may include FDA approved antiresorptive agents, anti-estrogens or selective estrogen receptor moderators.

Limitations

Because of significant specimen to specimen collagen crosslink physiologic variability (15-20%), current recommendations for appropriate utilization include: one or two base-line assays from specified urine collections on separate days; followed by a repeat assay about 3 months after starting anti-resorptive therapy; followed by a repeat assay in 12 months after the 3-month assay; and thereafter not more than annually, unless there is a change in therapy in which circumstance an additional test may be indicated 3 months after the initiation of new therapy.

Some collagen crosslink assays may not be appropriate for use in some disorders, according to FDA labeling restrictions.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.



Sources of Information

Arnaud CD. Osteoporosis: Using 'bone markers' for diagnosis and monitoring. *Geriatrics* 1996; 51:24-30.

Chesnut CH, III, Bell NH, Clark G, et al. Hormone replacement therapy in postmenopausal women: urinary N-telopeptide of type I collagen monitors therapeutic effect and predicts response of bone mineral density. *Am. J. Med.* 1997;102:29-37.

Garnero P, Delmas PD. Clinical usefulness of markers of bone remodelling in osteoporosis. In: Meunier PJ. (ed). *Osteoporosis: diagnosis and management*. London: Martin Dunitz Ltd 1998:79-101.

Garnero P, Shih WJ, Gineyts E, et al. Comparison of new biochemical markers of bone turnover in late postmenopausal osteoporotic women in response to alendronate treatment. *J. Clin. Endocrinol. Metab.* 1994;79:1693-700.

Harper KD, Weber TJ. Secondary osteoporosis - Diagnostic considerations. *Endocrinol. Metab. Clin. North Am.* 1998;27:325-48.

Hesley RP, Shepard KA, Jenkins DK, Riggs BL. Monitoring estrogen replacement therapy and identifying rapid bone losers with an immunoassay for deoxypyridinoline. *Osteoporos. Int.* 1998;8:159-64.

Melton LJ, III, Khosla S, Atkinson EJ, et al. Relationship of bone turnover to bone density and fractures. *J. Bone Miner. Res.* 1997;12:1083-91.

Millard PS. Prevention of osteoporosis: making sense of the published evidence. In: Rosen CJ (ed). *Osteoporosis: diagnostic & therapeutic principles*. Totowa: Humana Press. 1996:275-85.

Rosen CJ. Biochemical markers of bone turnover. In: Rosen CJ(ed). *Osteoporosis: diagnostic and therapeutic principles*. Totowa: Humana Press Inc. 1996:129-41.

Schneider DL, Barrett-Connor EL. Urinary N-Telopeptide levels discriminate normal, osteopenic, and osteoporotic bone mineral density. *Arch. Intern. Med.* 1997;157:1241-5.



190.20 - Blood Glucose Testing

Description

This policy is intended to apply to blood samples used to determine glucose levels. Blood glucose determination may be done using whole blood, serum or plasma. It may be sampled by capillary puncture, as in the fingerstick method, or by vein puncture or arterial sampling. The method for assay may be by color comparison of an indicator stick, by meter assay of whole blood or a filtrate of whole blood, using a device approved for home monitoring, or by using a laboratory assay system using serum or plasma. The convenience of the meter or stick color method allows a patient to have access to blood glucose values in less than a minute or so and has become a standard of care for control of blood glucose, even in the inpatient setting.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
82947	Glucose; quantitative, blood (except reagent strip)
82948	Glucose; blood, reagent strip
82962	Glucose, blood by glucose monitoring device cleared by FDA for home use.

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of
Downloads: Lab Code List, at
<http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A15.0	Tuberculosis of lung
A15.5	Tuberculosis of larynx, trachea and bronchus
A22.1	Pulmonary anthrax
A37.01	Whooping cough due to Bordetella pertussis with pneumonia
A37.11	Whooping cough due to Bordetella parapertussis with pneumonia
A37.81	Whooping cough due to other Bordetella species with pneumonia
A37.91	Whooping cough, unspecified species with pneumonia
A40.0	Sepsis due to streptococcus, group A
A40.1	Sepsis due to streptococcus, group B
A40.3	Sepsis due to Streptococcus pneumoniae
A40.8	Other streptococcal sepsis
A40.9	Streptococcal sepsis, unspecified



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Code	Description
A41.01	Sepsis due to Methicillin susceptible Staphylococcus aureus
A41.02	Sepsis due to Methicillin resistant Staphylococcus aureus
A41.1	Sepsis due to other specified staphylococcus
A41.2	Sepsis due to unspecified staphylococcus
A41.3	Sepsis due to Hemophilus influenzae
A41.4	Sepsis due to anaerobes
A41.50	Gram-negative sepsis, unspecified
A41.51	Sepsis due to Escherichia coli [E. coli]
A41.52	Sepsis due to Pseudomonas
A41.53	Sepsis due to Serratia
A41.59	Other Gram-negative sepsis
A41.81	Sepsis due to Enterococcus
A41.89	Other specified sepsis
A41.9	Sepsis, unspecified organism
A42.7	Actinomycotic sepsis
A48.1	Legionnaires' disease
B25.0	Cytomegaloviral pneumonitis
B25.2	Cytomegaloviral pancreatitis
B37.2	Candidiasis of skin and nail
B37.3	Candidiasis of vulva and vagina
B44.0	Invasive pulmonary aspergillosis
B48.8	Other specified mycoses
B77.81	Ascariasis pneumonia
B78.1	Cutaneous strongyloidiasis
C25.4	Malignant neoplasm of endocrine pancreas
C48.0	Malignant neoplasm of retroperitoneum
D13.7	Benign neoplasm of endocrine pancreas
E03.5	Myxedema coma
E05.00	Thyrotoxicosis with diffuse goiter without thyrotoxic crisis or storm
E05.01	Thyrotoxicosis with diffuse goiter with thyrotoxic crisis or storm



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E05.10	Thyrotoxicosis with toxic single thyroid nodule without thyrotoxic crisis or storm
E05.11	Thyrotoxicosis with toxic single thyroid nodule with thyrotoxic crisis or storm
E05.20	Thyrotoxicosis with toxic multinodular goiter without thyrotoxic crisis or storm
E05.21	Thyrotoxicosis with toxic multinodular goiter with thyrotoxic crisis or storm
E05.30	Thyrotoxicosis from ectopic thyroid tissue without thyrotoxic crisis or storm
E05.31	Thyrotoxicosis from ectopic thyroid tissue with thyrotoxic crisis or storm
E05.40	Thyrotoxicosis factitia without thyrotoxic crisis or storm
E05.41	Thyrotoxicosis factitia with thyrotoxic crisis or storm
E05.80	Other thyrotoxicosis without thyrotoxic crisis or storm
E05.81	Other thyrotoxicosis with thyrotoxic crisis or storm
E05.90	Thyrotoxicosis, unspecified without thyrotoxic crisis or storm
E05.91	Thyrotoxicosis, unspecified with thyrotoxic crisis or storm
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye
*E08.3521	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E08.3522	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E08.3523	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E08.3529	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E08.3531	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E08.3532	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E08.3533	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E08.3539	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E08.3541	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E08.3542	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E08.3543	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E08.3549	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E08.3551	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye
*E08.3552	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye
*E08.3553	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral
*E08.3559	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract
*E08.37X1	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye
*E08.37X2	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye
*E08.37X3	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral
*E08.37X9	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis
E08.621	Diabetes mellitus due to underlying condition with foot ulcer
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer
E08.628	Diabetes mellitus due to underlying condition with other skin complications
E08.630	Diabetes mellitus due to underlying condition with periodontal disease
E08.638	Diabetes mellitus due to underlying condition with other oral complications
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia
E08.69	Diabetes mellitus due to underlying condition with other specified complication
E08.8	Diabetes mellitus due to underlying condition with unspecified complications
E08.9	Diabetes mellitus due to underlying condition without complications
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E09.3521	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E09.3522	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E09.3523	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E09.3529	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E09.3531	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E09.3532	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E09.3533	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E09.3539	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E09.3541	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E09.3542	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E09.3543	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E09.3549	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E09.3551	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E09.3552	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E09.3553	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E09.3559	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract
*E09.37X1	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E09.37X2	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E09.37X3	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E09.37X9	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer
E09.628	Drug or chemical induced diabetes mellitus with other skin complications
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease
E09.638	Drug or chemical induced diabetes mellitus with other oral complications
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia
E09.69	Drug or chemical induced diabetes mellitus with other specified complication
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications
E09.9	Drug or chemical induced diabetes mellitus without complications
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma
E10.21	Type 1 diabetes mellitus with diabetic nephropathy
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E10.3521	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E10.3522	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E10.3523	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E10.3529	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E10.3531	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E10.3532	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E10.3533	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E10.3539	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E10.3541	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E10.3542	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E10.3543	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E10.3549	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E10.3551	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E10.3552	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E10.3553	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E10.3559	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E10.36	Type 1 diabetes mellitus with diabetic cataract
*E10.37X1	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E10.37X2	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E10.37X3	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E10.37X9	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.59	Type 1 diabetes mellitus with other circulatory complications
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy
E10.620	Type 1 diabetes mellitus with diabetic dermatitis
E10.621	Type 1 diabetes mellitus with foot ulcer
E10.622	Type 1 diabetes mellitus with other skin ulcer
E10.628	Type 1 diabetes mellitus with other skin complications
E10.630	Type 1 diabetes mellitus with periodontal disease
E10.638	Type 1 diabetes mellitus with other oral complications
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma
E10.65	Type 1 diabetes mellitus with hyperglycemia
E10.69	Type 1 diabetes mellitus with other specified complication
E10.8	Type 1 diabetes mellitus with unspecified complications
E10.9	Type 1 diabetes mellitus without complications
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E11.3521	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E11.3522	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E11.3523	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E11.3529	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E11.3531	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E11.3532	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E11.3533	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E11.3539	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E11.3541	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E11.3542	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E11.3543	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E11.3549	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E11.3551	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E11.3552	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E11.3553	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E11.3559	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E11.36	Type 2 diabetes mellitus with diabetic cataract
*E11.37X1	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E11.37X2	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E11.37X3	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E11.37X9	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.59	Type 2 diabetes mellitus with other circulatory complications
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy
E11.620	Type 2 diabetes mellitus with diabetic dermatitis
E11.621	Type 2 diabetes mellitus with foot ulcer
E11.622	Type 2 diabetes mellitus with other skin ulcer
E11.628	Type 2 diabetes mellitus with other skin complications
E11.630	Type 2 diabetes mellitus with periodontal disease
E11.638	Type 2 diabetes mellitus with other oral complications
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma
E11.65	Type 2 diabetes mellitus with hyperglycemia
E11.69	Type 2 diabetes mellitus with other specified complication
E11.8	Type 2 diabetes mellitus with unspecified complications
E11.9	Type 2 diabetes mellitus without complications
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma
E13.10	Other specified diabetes mellitus with ketoacidosis without coma
E13.11	Other specified diabetes mellitus with ketoacidosis with coma

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E13.21	Other specified diabetes mellitus with diabetic nephropathy
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
E13.29	Other specified diabetes mellitus with other diabetic kidney complication
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E13.3521	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E13.3522	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E13.3523	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E13.3529	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E13.3531	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E13.3532	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E13.3533	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E13.3539	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E13.3541	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E13.3542	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E13.3543	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E13.3549	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E13.3551	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E13.3552	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E13.3553	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E13.3559	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E13.36	Other specified diabetes mellitus with diabetic cataract
*E13.37X1	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E13.37X2	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E13.37X3	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E13.37X9	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy
E13.44	Other specified diabetes mellitus with diabetic amyotrophy
E13.49	Other specified diabetes mellitus with other diabetic neurological complication
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E13.59	Other specified diabetes mellitus with other circulatory complications
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy
E13.618	Other specified diabetes mellitus with other diabetic arthropathy
E13.620	Other specified diabetes mellitus with diabetic dermatitis
E13.621	Other specified diabetes mellitus with foot ulcer
E13.622	Other specified diabetes mellitus with other skin ulcer
E13.628	Other specified diabetes mellitus with other skin complications
E13.630	Other specified diabetes mellitus with periodontal disease
E13.638	Other specified diabetes mellitus with other oral complications
E13.641	Other specified diabetes mellitus with hypoglycemia with coma
E13.649	Other specified diabetes mellitus with hypoglycemia without coma
E13.65	Other specified diabetes mellitus with hyperglycemia
E13.69	Other specified diabetes mellitus with other specified complication
E13.8	Other specified diabetes mellitus with unspecified complications
E13.9	Other specified diabetes mellitus without complications
E15	Nondiabetic hypoglycemic coma



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Code	Description
E16.0	Drug-induced hypoglycemia without coma
E16.1	Other hypoglycemia
E16.2	Hypoglycemia, unspecified
E16.3	Increased secretion of glucagon
E16.4	Increased secretion of gastrin
E16.8	Other specified disorders of pancreatic internal secretion
E16.9	Disorder of pancreatic internal secretion, unspecified
E22.0	Acromegaly and pituitary gigantism
E22.1	Hyperprolactinemia
E22.2	Syndrome of inappropriate secretion of antidiuretic hormone
E22.8	Other hyperfunction of pituitary gland
E22.9	Hyperfunction of pituitary gland, unspecified
E23.0	Hypopituitarism
E23.1	Drug-induced hypopituitarism
E23.2	Diabetes insipidus
E23.3	Hypothalamic dysfunction, not elsewhere classified
E23.6	Other disorders of pituitary gland
E23.7	Disorder of pituitary gland, unspecified
E24.0	Pituitary-dependent Cushing's disease
E24.1	Nelson's syndrome
E24.2	Drug-induced Cushing's syndrome
E24.3	Ectopic ACTH syndrome
E24.4	Alcohol-induced pseudo-Cushing's syndrome
E24.8	Other Cushing's syndrome
E24.9	Cushing's syndrome, unspecified
E34.4	Constitutional tall stature
E44.0	Moderate protein-calorie malnutrition
E44.1	Mild protein-calorie malnutrition
E45	Retarded development following protein-calorie malnutrition
E46	Unspecified protein-calorie malnutrition



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Code	Description
E64.0	Sequelae of protein-calorie malnutrition
E67.1	Hypercarotinemias
E72.52	Trimethylaminuria
E72.53	Hyperoxaluria
E73.0	Congenital lactase deficiency
E73.1	Secondary lactase deficiency
E73.8	Other lactose intolerance
E73.9	Lactose intolerance, unspecified
E74.00	Glycogen storage disease, unspecified
E74.01	von Gierke disease
E74.02	Pompe disease
E74.03	Cori disease
E74.04	McArdle disease
E74.09	Other glycogen storage disease
E74.10	Disorder of fructose metabolism, unspecified
E74.11	Essential fructosuria
E74.12	Hereditary fructose intolerance
E74.19	Other disorders of fructose metabolism
E74.20	Disorders of galactose metabolism, unspecified
E74.21	Galactosemia
E74.29	Other disorders of galactose metabolism
E74.31	Sucrase-isomaltase deficiency
E74.39	Other disorders of intestinal carbohydrate absorption
E74.4	Disorders of pyruvate metabolism and gluconeogenesis
E74.8	Other specified disorders of carbohydrate metabolism
E74.9	Disorder of carbohydrate metabolism, unspecified
E77.1	Defects in glycoprotein degradation
E78.00	Pure hypercholesterolemia, unspecified
E78.01	Familial hypercholesterolemia
E78.1	Pure hyperglyceridemia

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Code	Description
E78.2	Mixed hyperlipidemia
E78.3	Hyperchylomicronemia
E78.4	Other hyperlipidemia
E78.5	Hyperlipidemia, unspecified
E79.0	Hyperuricemia without signs of inflammatory arthritis and tophaceous disease
E83.10	Disorder of iron metabolism, unspecified
E83.110	Hereditary hemochromatosis
E83.111	Hemochromatosis due to repeated red blood cell transfusions
E83.118	Other hemochromatosis
E83.119	Hemochromatosis, unspecified
E83.19	Other disorders of iron metabolism
E83.2	Disorders of zinc metabolism
E86.0	Dehydration
E86.1	Hypovolemia
E86.9	Volume depletion, unspecified
E87.0	Hyperosmolality and hypernatremia
E87.1	Hypo-osmolality and hyponatremia
E87.2	Acidosis
E87.3	Alkalosis
E87.4	Mixed disorder of acid-base balance
E87.5	Hyperkalemia
E87.6	Hypokalemia
E87.70	Fluid overload, unspecified
E87.71	Transfusion associated circulatory overload
E87.79	Other fluid overload
E87.8	Other disorders of electrolyte and fluid balance, not elsewhere classified
E89.1	Postprocedural hypoinsulinemia
E89.3	Postprocedural hypopituitarism
F05	Delirium due to known physiological condition
F06.8	Other specified mental disorders due to known physiological condition



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Code	Description
F07.0	Personality change due to known physiological condition
F28	Other psychotic disorder not due to a substance or known physiological condition
F29	Unspecified psychosis not due to a substance or known physiological condition
F48.9	Nonpsychotic mental disorder, unspecified
F99	Mental disorder, not otherwise specified
G31.84	Mild cognitive impairment, so stated
G40.309	Generalized idiopathic epilepsy and epileptic syndromes, not intractable, without status epilepticus
G40.311	Generalized idiopathic epilepsy and epileptic syndromes, intractable, with status epilepticus
G40.319	Generalized idiopathic epilepsy and epileptic syndromes, intractable, without status epilepticus
G40.401	Other generalized epilepsy and epileptic syndromes, not intractable, with status epilepticus
G40.409	Other generalized epilepsy and epileptic syndromes, not intractable, without status epilepticus
G40.411	Other generalized epilepsy and epileptic syndromes, intractable, with status epilepticus
G40.419	Other generalized epilepsy and epileptic syndromes, intractable, without status epilepticus
*G56.03 <i>*Covered only for procedure code 82947.</i>	*Carpal tunnel syndrome, bilateral upper limbs
*G56.13 <i>*Covered only for procedure code 82947.</i>	*Other lesions of median nerve, bilateral upper limbs
*G56.23 <i>*Covered only for procedure code 82947.</i>	*Lesion of ulnar nerve, bilateral upper limbs
*G56.33 <i>*Covered only for procedure code 82947.</i>	*Lesion of radial nerve, bilateral upper limbs
*G56.43 <i>*Covered only for procedure code 82947.</i>	*Causalgia of bilateral upper limbs



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Code	Description
*G56.83 <i>*Covered only for procedure code 82947.</i>	*Other specified mononeuropathies of bilateral upper limbs
*G56.93 <i>*Covered only for procedure code 82947.</i>	*Unspecified mononeuropathy of bilateral upper limbs
*G57.83 <i>*Covered only for procedure code 82947.</i>	*Other specified mononeuropathies of bilateral lower limbs
*G57.93 <i>*Covered only for procedure code 82947.</i>	*Unspecified mononeuropathy of bilateral lower limbs
G58.8	Other specified mononeuropathies
G58.9	Mononeuropathy, unspecified
G59	Mononeuropathy in diseases classified elsewhere
G60.9	Hereditary and idiopathic neuropathy, unspecified
*G61.82 <i>*Covered only for procedure code 82947.</i>	*Multifocal motor neuropathy
G61.9	Inflammatory polyneuropathy, unspecified
G62.9	Polyneuropathy, unspecified
G90.2	Horner's syndrome
G90.8	Other disorders of autonomic nervous system
G90.9	Disorder of the autonomic nervous system, unspecified
G93.3	Postviral fatigue syndrome
G93.41	Metabolic encephalopathy
H01.001	Unspecified blepharitis right upper eyelid
H01.002	Unspecified blepharitis right lower eyelid
H01.003	Unspecified blepharitis right eye, unspecified eyelid
H01.004	Unspecified blepharitis left upper eyelid
H01.005	Unspecified blepharitis left lower eyelid
H01.006	Unspecified blepharitis left eye, unspecified eyelid



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Code	Description
H01.009	Unspecified blepharitis unspecified eye, unspecified eyelid
H25.011	Cortical age-related cataract, right eye
H25.012	Cortical age-related cataract, left eye
H25.013	Cortical age-related cataract, bilateral
H25.019	Cortical age-related cataract, unspecified eye
H25.031	Anterior subcapsular polar age-related cataract, right eye
H25.032	Anterior subcapsular polar age-related cataract, left eye
H25.033	Anterior subcapsular polar age-related cataract, bilateral
H25.039	Anterior subcapsular polar age-related cataract, unspecified eye
H25.041	Posterior subcapsular polar age-related cataract, right eye
H25.042	Posterior subcapsular polar age-related cataract, left eye
H25.043	Posterior subcapsular polar age-related cataract, bilateral
H25.049	Posterior subcapsular polar age-related cataract, unspecified eye
H25.091	Other age-related incipient cataract, right eye
H25.092	Other age-related incipient cataract, left eye
H25.093	Other age-related incipient cataract, bilateral
H25.099	Other age-related incipient cataract, unspecified eye
H25.10	Age-related nuclear cataract, unspecified eye
H25.11	Age-related nuclear cataract, right eye
H25.12	Age-related nuclear cataract, left eye
H25.13	Age-related nuclear cataract, bilateral
H25.20	Age-related cataract, morgagnian type, unspecified eye
H25.21	Age-related cataract, morgagnian type, right eye
H25.22	Age-related cataract, morgagnian type, left eye
H25.23	Age-related cataract, morgagnian type, bilateral
H25.811	Combined forms of age-related cataract, right eye
H25.812	Combined forms of age-related cataract, left eye
H25.813	Combined forms of age-related cataract, bilateral
H25.819	Combined forms of age-related cataract, unspecified eye
H25.89	Other age-related cataract

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Code	Description
H25.9	Unspecified age-related cataract
H26.001	Unspecified infantile and juvenile cataract, right eye
H26.002	Unspecified infantile and juvenile cataract, left eye
H26.003	Unspecified infantile and juvenile cataract, bilateral
H26.009	Unspecified infantile and juvenile cataract, unspecified eye
H26.011	Infantile and juvenile cortical, lamellar, or zonular cataract, right eye
H26.012	Infantile and juvenile cortical, lamellar, or zonular cataract, left eye
H26.013	Infantile and juvenile cortical, lamellar, or zonular cataract, bilateral
H26.019	Infantile and juvenile cortical, lamellar, or zonular cataract, unspecified eye
H26.031	Infantile and juvenile nuclear cataract, right eye
H26.032	Infantile and juvenile nuclear cataract, left eye
H26.033	Infantile and juvenile nuclear cataract, bilateral
H26.039	Infantile and juvenile nuclear cataract, unspecified eye
H26.041	Anterior subcapsular polar infantile and juvenile cataract, right eye
H26.042	Anterior subcapsular polar infantile and juvenile cataract, left eye
H26.043	Anterior subcapsular polar infantile and juvenile cataract, bilateral
H26.049	Anterior subcapsular polar infantile and juvenile cataract, unspecified eye
H26.051	Posterior subcapsular polar infantile and juvenile cataract, right eye
H26.052	Posterior subcapsular polar infantile and juvenile cataract, left eye
H26.053	Posterior subcapsular polar infantile and juvenile cataract, bilateral
H26.059	Posterior subcapsular polar infantile and juvenile cataract, unspecified eye
H26.061	Combined forms of infantile and juvenile cataract, right eye
H26.062	Combined forms of infantile and juvenile cataract, left eye
H26.063	Combined forms of infantile and juvenile cataract, bilateral
H26.069	Combined forms of infantile and juvenile cataract, unspecified eye
H26.09	Other infantile and juvenile cataract
H35.00	Unspecified background retinopathy
H35.061	Retinal vasculitis, right eye
H35.062	Retinal vasculitis, left eye
H35.063	Retinal vasculitis, bilateral

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Code	Description
H35.069	Retinal vasculitis, unspecified eye
H35.20	Other non-diabetic proliferative retinopathy, unspecified eye
H35.21	Other non-diabetic proliferative retinopathy, right eye
H35.22	Other non-diabetic proliferative retinopathy, left eye
H35.23	Other non-diabetic proliferative retinopathy, bilateral
H35.30	Unspecified macular degeneration
H35.3110	Nonexudative age-related macular degeneration, right eye, stage unspecified
H35.3111	Nonexudative age-related macular degeneration, right eye, early dry stage
H35.3112	Nonexudative age-related macular degeneration, right eye, intermediate dry stage
H35.3113	Nonexudative age-related macular degeneration, right eye, advanced atrophic without subfoveal involvement
H35.3114	Nonexudative age-related macular degeneration, right eye, advanced atrophic with subfoveal involvement
H35.3120	Nonexudative age-related macular degeneration, left eye, stage unspecified
H35.3121	Nonexudative age-related macular degeneration, left eye, early dry stage
H35.3122	Nonexudative age-related macular degeneration, left eye, intermediate dry stage
H35.3123	Nonexudative age-related macular degeneration, left eye, advanced atrophic without subfoveal involvement
H35.3124	Nonexudative age-related macular degeneration, left eye, advanced atrophic with subfoveal involvement
H35.3130	Nonexudative age-related macular degeneration, bilateral, stage unspecified
H35.3131	Nonexudative age-related macular degeneration, bilateral, early dry stage
H35.3132	Nonexudative age-related macular degeneration, bilateral, intermediate dry stage
H35.3133	Nonexudative age-related macular degeneration, bilateral, advanced atrophic without subfoveal involvement
H35.3134	Nonexudative age-related macular degeneration, bilateral, advanced atrophic with subfoveal involvement
H35.3190	Nonexudative age-related macular degeneration, unspecified eye, stage unspecified
H35.3191	Nonexudative age-related macular degeneration, unspecified eye, early dry stage
H35.3192	Nonexudative age-related macular degeneration, unspecified eye, intermediate dry stage
H35.3193	Nonexudative age-related macular degeneration, unspecified eye, advanced atrophic without subfoveal involvement

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Code	Description
H35.3194	Nonexudative age-related macular degeneration, unspecified eye, advanced atrophic with subfoveal involvement
H35.3210	Exudative age-related macular degeneration, right eye, stage unspecified
H35.3211	Exudative age-related macular degeneration, right eye, with active choroidal neovascularization
H35.3212	Exudative age-related macular degeneration, right eye, with inactive choroidal neovascularization
H35.3213	Exudative age-related macular degeneration, right eye, with inactive scar
H35.3220	Exudative age-related macular degeneration, left eye, stage unspecified
H35.3221	Exudative age-related macular degeneration, left eye, with active choroidal neovascularization
H35.3222	Exudative age-related macular degeneration, left eye, with inactive choroidal neovascularization
H35.3223	Exudative age-related macular degeneration, left eye, with inactive scar
H35.3230	Exudative age-related macular degeneration, bilateral, stage unspecified
H35.3231	Exudative age-related macular degeneration, bilateral, with active choroidal neovascularization
H35.3232	Exudative age-related macular degeneration, bilateral, with inactive choroidal neovascularization
H35.3233	Exudative age-related macular degeneration, bilateral, with inactive scar
H35.3290	Exudative age-related macular degeneration, unspecified eye, stage unspecified
H35.3291	Exudative age-related macular degeneration, unspecified eye, with active choroidal neovascularization
H35.3292	Exudative age-related macular degeneration, unspecified eye, with inactive choroidal neovascularization
H35.3293	Exudative age-related macular degeneration, unspecified eye, with inactive scar
H35.341	Macular cyst, hole, or pseudohole, right eye
H35.342	Macular cyst, hole, or pseudohole, left eye
H35.343	Macular cyst, hole, or pseudohole, bilateral
H35.349	Macular cyst, hole, or pseudohole, unspecified eye
H35.351	Cystoid macular degeneration, right eye
H35.352	Cystoid macular degeneration, left eye
H35.353	Cystoid macular degeneration, bilateral



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Code	Description
H35.359	Cystoid macular degeneration, unspecified eye
H35.361	Drusen (degenerative) of macula, right eye
H35.362	Drusen (degenerative) of macula, left eye
H35.363	Drusen (degenerative) of macula, bilateral
H35.369	Drusen (degenerative) of macula, unspecified eye
H35.371	Puckering of macula, right eye
H35.372	Puckering of macula, left eye
H35.373	Puckering of macula, bilateral
H35.379	Puckering of macula, unspecified eye
H35.381	Toxic maculopathy, right eye
H35.382	Toxic maculopathy, left eye
H35.383	Toxic maculopathy, bilateral
H35.389	Toxic maculopathy, unspecified eye
H35.40	Unspecified peripheral retinal degeneration
H35.411	Lattice degeneration of retina, right eye
H35.412	Lattice degeneration of retina, left eye
H35.413	Lattice degeneration of retina, bilateral
H35.419	Lattice degeneration of retina, unspecified eye
H35.421	Microcystoid degeneration of retina, right eye
H35.422	Microcystoid degeneration of retina, left eye
H35.423	Microcystoid degeneration of retina, bilateral
H35.429	Microcystoid degeneration of retina, unspecified eye
H35.431	Paving stone degeneration of retina, right eye
H35.432	Paving stone degeneration of retina, left eye
H35.433	Paving stone degeneration of retina, bilateral
H35.439	Paving stone degeneration of retina, unspecified eye
H35.441	Age-related reticular degeneration of retina, right eye
H35.442	Age-related reticular degeneration of retina, left eye
H35.443	Age-related reticular degeneration of retina, bilateral
H35.449	Age-related reticular degeneration of retina, unspecified eye

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Code	Description
H35.451	Secondary pigmentary degeneration, right eye
H35.452	Secondary pigmentary degeneration, left eye
H35.453	Secondary pigmentary degeneration, bilateral
H35.459	Secondary pigmentary degeneration, unspecified eye
H35.461	Secondary vitreoretinal degeneration, right eye
H35.462	Secondary vitreoretinal degeneration, left eye
H35.463	Secondary vitreoretinal degeneration, bilateral
H35.469	Secondary vitreoretinal degeneration, unspecified eye
H35.60	Retinal hemorrhage, unspecified eye
H35.61	Retinal hemorrhage, right eye
H35.62	Retinal hemorrhage, left eye
H35.63	Retinal hemorrhage, bilateral
H35.81	Retinal edema
H35.82	Retinal ischemia
H35.89	Other specified retinal disorders
H35.9	Unspecified retinal disorder
H40.051	Ocular hypertension, right eye
H40.052	Ocular hypertension, left eye
H40.053	Ocular hypertension, bilateral
H40.059	Ocular hypertension, unspecified eye
*H40.1110 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, right eye, stage unspecified
*H40.1111 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, right eye, mild stage
*H40.1112 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, right eye, moderate stage
*H40.1113 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, right eye, severe stage



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*H40.1114 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, right eye, indeterminate stage
*H40.1120 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, left eye, stage unspecified
*H40.1121 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, left eye, mild stage
*H40.1122 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, left eye, moderate stage
*H40.1123 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, left eye, severe stage
*H40.1124 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, left eye, indeterminate stage
*H40.1130 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, bilateral, stage unspecified
*H40.1131 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, bilateral, mild stage
*H40.1132 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, bilateral, moderate stage
*H40.1133 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, bilateral, severe stage
*H40.1134 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, bilateral, indeterminate stage



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Code	Description
*H40.1190 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, unspecified eye, stage unspecified
*H40.1191 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, unspecified eye, mild stage
*H40.1192 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, unspecified eye, moderate stage
*H40.1193 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, unspecified eye, severe stage
*H40.1194 <i>*Covered only for procedure code 82947.</i>	*Primary open-angle glaucoma, unspecified eye, indeterminate stage
H40.60X0	Glaucoma secondary to drugs, unspecified eye, stage unspecified
H40.60X1	Glaucoma secondary to drugs, unspecified eye, mild stage
H40.60X2	Glaucoma secondary to drugs, unspecified eye, moderate stage
H40.60X3	Glaucoma secondary to drugs, unspecified eye, severe stage
H40.60X4	Glaucoma secondary to drugs, unspecified eye, indeterminate stage
H40.61X0	Glaucoma secondary to drugs, right eye, stage unspecified
H40.61X1	Glaucoma secondary to drugs, right eye, mild stage
H40.61X2	Glaucoma secondary to drugs, right eye, moderate stage
H40.61X3	Glaucoma secondary to drugs, right eye, severe stage
H40.61X4	Glaucoma secondary to drugs, right eye, indeterminate stage
H40.62X0	Glaucoma secondary to drugs, left eye, stage unspecified
H40.62X1	Glaucoma secondary to drugs, left eye, mild stage
H40.62X2	Glaucoma secondary to drugs, left eye, moderate stage
H40.62X3	Glaucoma secondary to drugs, left eye, severe stage
H40.62X4	Glaucoma secondary to drugs, left eye, indeterminate stage
H40.63X0	Glaucoma secondary to drugs, bilateral, stage unspecified
H40.63X1	Glaucoma secondary to drugs, bilateral, mild stage

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Code	Description
H40.63X2	Glaucoma secondary to drugs, bilateral, moderate stage
H40.63X3	Glaucoma secondary to drugs, bilateral, severe stage
H40.63X4	Glaucoma secondary to drugs, bilateral, indeterminate stage
H47.331	Pseudopapilledema of optic disc, right eye
H47.332	Pseudopapilledema of optic disc, left eye
H47.333	Pseudopapilledema of optic disc, bilateral
H47.339	Pseudopapilledema of optic disc, unspecified eye
H47.9	Unspecified disorder of visual pathways
H49.00	Third [oculomotor] nerve palsy, unspecified eye
H49.01	Third [oculomotor] nerve palsy, right eye
H49.02	Third [oculomotor] nerve palsy, left eye
H49.03	Third [oculomotor] nerve palsy, bilateral
H49.10	Fourth [trochlear] nerve palsy, unspecified eye
H49.11	Fourth [trochlear] nerve palsy, right eye
H49.12	Fourth [trochlear] nerve palsy, left eye
H49.13	Fourth [trochlear] nerve palsy, bilateral
H49.20	Sixth [abducent] nerve palsy, unspecified eye
H49.21	Sixth [abducent] nerve palsy, right eye
H49.22	Sixth [abducent] nerve palsy, left eye
H49.23	Sixth [abducent] nerve palsy, bilateral
H49.40	Progressive external ophthalmoplegia, unspecified eye
H49.41	Progressive external ophthalmoplegia, right eye
H49.42	Progressive external ophthalmoplegia, left eye
H49.43	Progressive external ophthalmoplegia, bilateral
H49.881	Other paralytic strabismus, right eye
H49.882	Other paralytic strabismus, left eye
H49.883	Other paralytic strabismus, bilateral
H49.889	Other paralytic strabismus, unspecified eye
H49.9	Unspecified paralytic strabismus
H52.10	Myopia, unspecified eye

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Code	Description
H52.11	Myopia, right eye
H52.12	Myopia, left eye
H52.13	Myopia, bilateral
H53.71	Glare sensitivity
H53.72	Impaired contrast sensitivity
H53.8	Other visual disturbances
H57.01	Argyll Robertson pupil, atypical
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site
I21.4	Non-ST elevation (NSTEMI) myocardial infarction
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
I25.3	Aneurysm of heart
I25.41	Coronary artery aneurysm
I25.42	Coronary artery dissection

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Code	Description
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm



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Code	Description
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris
I25.810	Atherosclerosis of coronary artery bypass graft(s) without angina pectoris
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris
I25.83	Coronary atherosclerosis due to lipid rich plaque
I25.84	Coronary atherosclerosis due to calcified coronary lesion
I42.7	Cardiomyopathy due to drug and external agent
I42.9	Cardiomyopathy, unspecified
I70.231	Atherosclerosis of native arteries of right leg with ulceration of thigh
I70.232	Atherosclerosis of native arteries of right leg with ulceration of calf
I70.233	Atherosclerosis of native arteries of right leg with ulceration of ankle
I70.234	Atherosclerosis of native arteries of right leg with ulceration of heel and midfoot
I70.235	Atherosclerosis of native arteries of right leg with ulceration of other part of foot
I70.238	Atherosclerosis of native arteries of right leg with ulceration of other part of lower right leg
I70.239	Atherosclerosis of native arteries of right leg with ulceration of unspecified site
I70.241	Atherosclerosis of native arteries of left leg with ulceration of thigh

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Code	Description
I70.242	Atherosclerosis of native arteries of left leg with ulceration of calf
I70.243	Atherosclerosis of native arteries of left leg with ulceration of ankle
I70.244	Atherosclerosis of native arteries of left leg with ulceration of heel and midfoot
I70.245	Atherosclerosis of native arteries of left leg with ulceration of other part of foot
I70.248	Atherosclerosis of native arteries of left leg with ulceration of other part of lower left leg
I70.249	Atherosclerosis of native arteries of left leg with ulceration of unspecified site
I70.25	Atherosclerosis of native arteries of other extremities with ulceration
I70.261	Atherosclerosis of native arteries of extremities with gangrene, right leg
I70.262	Atherosclerosis of native arteries of extremities with gangrene, left leg
I70.263	Atherosclerosis of native arteries of extremities with gangrene, bilateral legs
I70.268	Atherosclerosis of native arteries of extremities with gangrene, other extremity
I70.269	Atherosclerosis of native arteries of extremities with gangrene, unspecified extremity
I70.331	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of thigh
I70.332	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of calf
I70.333	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of ankle
I70.334	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.335	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of foot
I70.338	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.339	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of unspecified site
I70.341	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of thigh
I70.342	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of calf
I70.343	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of ankle
I70.344	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.345	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of foot



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Code	Description
I70.348	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.349	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of unspecified site
I70.35	Atherosclerosis of unspecified type of bypass graft(s) of other extremity with ulceration
I70.361	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, right leg
I70.362	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, left leg
I70.363	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, bilateral legs
I70.368	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, other extremity
I70.369	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.431	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of thigh
I70.432	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of calf
I70.433	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of ankle
I70.434	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.435	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of foot
I70.438	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.439	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of unspecified site
I70.441	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of thigh
I70.442	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of calf
I70.443	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of ankle
I70.444	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.445	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of foot
I70.448	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of lower leg



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Code	Description
I70.449	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of unspecified site
I70.45	Atherosclerosis of autologous vein bypass graft(s) of other extremity with ulceration
I70.461	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, right leg
I70.462	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, left leg
I70.463	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, bilateral legs
I70.468	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, other extremity
I70.469	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.531	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of thigh
I70.532	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of calf
I70.533	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of ankle
I70.534	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.535	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of foot
I70.538	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.539	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of unspecified site
I70.541	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of thigh
I70.542	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of calf
I70.543	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of ankle
I70.544	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.545	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of foot



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Code	Description
I70.548	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.549	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of unspecified site
I70.55	Atherosclerosis of nonautologous biological bypass graft(s) of other extremity with ulceration
I70.561	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, right leg
I70.562	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, left leg
I70.563	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, bilateral legs
I70.568	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, other extremity
I70.569	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.631	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of thigh
I70.632	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of calf
I70.633	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of ankle
I70.634	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.635	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of foot
I70.638	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.639	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of unspecified site
I70.641	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of thigh
I70.642	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of calf
I70.643	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of ankle
I70.644	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.645	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of foot



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Code	Description
I70.648	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.649	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of unspecified site
I70.65	Atherosclerosis of nonbiological bypass graft(s) of other extremity with ulceration
I70.661	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, right leg
I70.662	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, left leg
I70.663	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, bilateral legs
I70.668	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, other extremity
I70.669	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.731	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of thigh
I70.732	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of calf
I70.733	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of ankle
I70.734	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.735	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of foot
I70.738	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.739	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of unspecified site
I70.741	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of thigh
I70.742	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of calf
I70.743	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of ankle
I70.744	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.745	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of foot
I70.748	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.749	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of unspecified site

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Code	Description
I70.75	Atherosclerosis of other type of bypass graft(s) of other extremity with ulceration
I70.761	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, right leg
I70.762	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, left leg
I70.763	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, bilateral legs
I70.768	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, other extremity
I70.769	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.90	Unspecified atherosclerosis
I70.91	Generalized atherosclerosis
I73.01	Raynaud's syndrome with gangrene
I95.1	Orthostatic hypotension
I96	Gangrene, not elsewhere classified
J02.8	Acute pharyngitis due to other specified organisms
J02.9	Acute pharyngitis, unspecified
J12.0	Adenoviral pneumonia
J12.1	Respiratory syncytial virus pneumonia
J12.2	Parainfluenza virus pneumonia
J12.3	Human metapneumovirus pneumonia
J12.81	Pneumonia due to SARS-associated coronavirus
J12.89	Other viral pneumonia
J12.9	Viral pneumonia, unspecified
J13	Pneumonia due to Streptococcus pneumoniae
J14	Pneumonia due to Hemophilus influenzae
J15.0	Pneumonia due to Klebsiella pneumoniae
J15.1	Pneumonia due to Pseudomonas
J15.20	Pneumonia due to staphylococcus, unspecified
J15.211	Pneumonia due to Methicillin susceptible Staphylococcus aureus
J15.212	Pneumonia due to Methicillin resistant Staphylococcus aureus
J15.29	Pneumonia due to other staphylococcus

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Code	Description
J15.3	Pneumonia due to streptococcus, group B
J15.4	Pneumonia due to other streptococci
J15.5	Pneumonia due to Escherichia coli
J15.6	Pneumonia due to other aerobic Gram-negative bacteria
J15.7	Pneumonia due to Mycoplasma pneumoniae
J15.8	Pneumonia due to other specified bacteria
J15.9	Unspecified bacterial pneumonia
J16.0	Chlamydial pneumonia
J16.8	Pneumonia due to other specified infectious organisms
J17	Pneumonia in diseases classified elsewhere
J18.0	Bronchopneumonia, unspecified organism
J18.1	Lobar pneumonia, unspecified organism
J18.8	Other pneumonia, unspecified organism
J18.9	Pneumonia, unspecified organism
J20.0	Acute bronchitis due to Mycoplasma pneumoniae
J20.1	Acute bronchitis due to Hemophilus influenzae
J20.2	Acute bronchitis due to streptococcus
J20.3	Acute bronchitis due to coxsackievirus
J20.4	Acute bronchitis due to parainfluenza virus
J20.5	Acute bronchitis due to respiratory syncytial virus
J20.6	Acute bronchitis due to rhinovirus
J20.7	Acute bronchitis due to echovirus
J20.8	Acute bronchitis due to other specified organisms
J20.9	Acute bronchitis, unspecified
J40	Bronchitis, not specified as acute or chronic
J41.0	Simple chronic bronchitis
J41.1	Mucopurulent chronic bronchitis
J41.8	Mixed simple and mucopurulent chronic bronchitis
J42	Unspecified chronic bronchitis
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection

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Code	Description
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation
J44.9	Chronic obstructive pulmonary disease, unspecified
K11.7	Disturbances of salivary secretion
K12.1	Other forms of stomatitis
K12.2	Cellulitis and abscess of mouth
K12.30	Oral mucositis (ulcerative), unspecified
K12.39	Other oral mucositis (ulcerative)
K29.70	Gastritis, unspecified, without bleeding
K29.71	Gastritis, unspecified, with bleeding
K29.90	Gastroduodenitis, unspecified, without bleeding
K29.91	Gastroduodenitis, unspecified, with bleeding
K30	Functional dyspepsia
K52.21	Food protein-induced enterocolitis syndrome
K52.22	Food protein-induced enteropathy
K52.29	Other allergic and dietetic gastroenteritis and colitis
K52.89	Other specified noninfective gastroenteritis and colitis
*K59.31 <i>*Covered only for procedure code 82947.</i>	*Toxic megacolon
K70.41	Alcoholic hepatic failure with coma
K71.11	Toxic liver disease with hepatic necrosis, with coma
K72.01	Acute and subacute hepatic failure with coma
K72.10	Chronic hepatic failure without coma
K72.11	Chronic hepatic failure with coma
K72.90	Hepatic failure, unspecified without coma
K72.91	Hepatic failure, unspecified with coma
K75.0	Abscess of liver
K75.1	Phlebitis of portal vein
K75.81	Nonalcoholic steatohepatitis (NASH)
K76.0	Fatty (change of) liver, not elsewhere classified
K76.6	Portal hypertension

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Code	Description
K76.7	Hepatorenal syndrome
K76.89	Other specified diseases of liver
K80.30	Calculus of bile duct with cholangitis, unspecified, without obstruction
K80.31	Calculus of bile duct with cholangitis, unspecified, with obstruction
K80.32	Calculus of bile duct with acute cholangitis without obstruction
K80.33	Calculus of bile duct with acute cholangitis with obstruction
K80.34	Calculus of bile duct with chronic cholangitis without obstruction
K80.35	Calculus of bile duct with chronic cholangitis with obstruction
K80.36	Calculus of bile duct with acute and chronic cholangitis without obstruction
K80.37	Calculus of bile duct with acute and chronic cholangitis with obstruction
K80.50	Calculus of bile duct without cholangitis or cholecystitis without obstruction
K80.51	Calculus of bile duct without cholangitis or cholecystitis with obstruction
K81.0	Acute cholecystitis
K81.1	Chronic cholecystitis
K81.2	Acute cholecystitis with chronic cholecystitis
K81.9	Cholecystitis, unspecified
K83.0	Cholangitis
K85.00	Idiopathic acute pancreatitis without necrosis or infection
K85.01	Idiopathic acute pancreatitis with uninfected necrosis
K85.02	Idiopathic acute pancreatitis with infected necrosis
K85.10	Biliary acute pancreatitis without necrosis or infection
K85.11	Biliary acute pancreatitis with uninfected necrosis
K85.12	Biliary acute pancreatitis with infected necrosis
K85.20	Alcohol induced acute pancreatitis without necrosis or infection
K85.21	Alcohol induced acute pancreatitis with uninfected necrosis
K85.22	Alcohol induced acute pancreatitis with infected necrosis
K85.30	Drug induced acute pancreatitis without necrosis or infection
K85.31	Drug induced acute pancreatitis with uninfected necrosis
K85.32	Drug induced acute pancreatitis with infected necrosis
K85.80	Other acute pancreatitis without necrosis or infection



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Code	Description
K85.81	Other acute pancreatitis with uninfected necrosis
K85.82	Other acute pancreatitis with infected necrosis
K85.90	Acute pancreatitis without necrosis or infection, unspecified
K85.91	Acute pancreatitis with uninfected necrosis, unspecified
K85.92	Acute pancreatitis with infected necrosis, unspecified
K86.0	Alcohol-induced chronic pancreatitis
K86.1	Other chronic pancreatitis
K86.81	Exocrine pancreatic insufficiency
K86.89	Other specified diseases of pancreas
K87	Disorders of gallbladder, biliary tract and pancreas in diseases classified elsewhere
L02.02	Furuncle of face
L02.03	Carbuncle of face
L02.12	Furuncle of neck
L02.13	Carbuncle of neck
L02.221	Furuncle of abdominal wall
L02.222	Furuncle of back [any part, except buttock]
L02.223	Furuncle of chest wall
L02.224	Furuncle of groin
L02.225	Furuncle of perineum
L02.226	Furuncle of umbilicus
L02.229	Furuncle of trunk, unspecified
L02.231	Carbuncle of abdominal wall
L02.232	Carbuncle of back [any part, except buttock]
L02.233	Carbuncle of chest wall
L02.234	Carbuncle of groin
L02.235	Carbuncle of perineum
L02.236	Carbuncle of umbilicus
L02.239	Carbuncle of trunk, unspecified
L02.32	Furuncle of buttock
L02.33	Carbuncle of buttock

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Code	Description
L02.421	Furuncle of right axilla
L02.422	Furuncle of left axilla
L02.423	Furuncle of right upper limb
L02.424	Furuncle of left upper limb
L02.425	Furuncle of right lower limb
L02.426	Furuncle of left lower limb
L02.429	Furuncle of limb, unspecified
L02.431	Carbuncle of right axilla
L02.432	Carbuncle of left axilla
L02.433	Carbuncle of right upper limb
L02.434	Carbuncle of left upper limb
L02.435	Carbuncle of right lower limb
L02.436	Carbuncle of left lower limb
L02.439	Carbuncle of limb, unspecified
L02.521	Furuncle right hand
L02.522	Furuncle left hand
L02.529	Furuncle unspecified hand
L02.531	Carbuncle of right hand
L02.532	Carbuncle of left hand
L02.539	Carbuncle of unspecified hand
L02.621	Furuncle of right foot
L02.622	Furuncle of left foot
L02.629	Furuncle of unspecified foot
L02.631	Carbuncle of right foot
L02.632	Carbuncle of left foot
L02.639	Carbuncle of unspecified foot
L02.821	Furuncle of head [any part, except face]
L02.828	Furuncle of other sites
L02.831	Carbuncle of head [any part, except face]
L02.838	Carbuncle of other sites



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Code	Description
L02.92	Furuncle, unspecified
L02.93	Carbuncle, unspecified
L08.0	Pyoderma
L08.81	Pyoderma vegetans
L08.82	Omphalitis not of newborn
L08.89	Other specified local infections of the skin and subcutaneous tissue
L08.9	Local infection of the skin and subcutaneous tissue, unspecified
L29.0	Pruritus ani
L29.1	Pruritus scroti
L29.2	Pruritus vulvae
L29.3	Anogenital pruritus, unspecified
L68.0	Hirsutism
L68.1	Acquired hypertrichosis lanuginosa
L68.2	Localized hypertrichosis
L68.3	Polytrichia
L68.8	Other hypertrichosis
L68.9	Hypertrichosis, unspecified
L74.4	Anhidrosis
L88	Pyoderma gangrenosum
L89.000	Pressure ulcer of unspecified elbow, unstageable
L89.001	Pressure ulcer of unspecified elbow, stage 1
L89.002	Pressure ulcer of unspecified elbow, stage 2
L89.003	Pressure ulcer of unspecified elbow, stage 3
L89.004	Pressure ulcer of unspecified elbow, stage 4
L89.009	Pressure ulcer of unspecified elbow, unspecified stage
L89.010	Pressure ulcer of right elbow, unstageable
L89.011	Pressure ulcer of right elbow, stage 1
L89.012	Pressure ulcer of right elbow, stage 2
L89.013	Pressure ulcer of right elbow, stage 3
L89.014	Pressure ulcer of right elbow, stage 4

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Code	Description
L89.019	Pressure ulcer of right elbow, unspecified stage
L89.020	Pressure ulcer of left elbow, unstageable
L89.021	Pressure ulcer of left elbow, stage 1
L89.022	Pressure ulcer of left elbow, stage 2
L89.023	Pressure ulcer of left elbow, stage 3
L89.024	Pressure ulcer of left elbow, stage 4
L89.029	Pressure ulcer of left elbow, unspecified stage
L89.100	Pressure ulcer of unspecified part of back, unstageable
L89.101	Pressure ulcer of unspecified part of back, stage 1
L89.102	Pressure ulcer of unspecified part of back, stage 2
L89.103	Pressure ulcer of unspecified part of back, stage 3
L89.104	Pressure ulcer of unspecified part of back, stage 4
L89.109	Pressure ulcer of unspecified part of back, unspecified stage
L89.110	Pressure ulcer of right upper back, unstageable
L89.111	Pressure ulcer of right upper back, stage 1
L89.112	Pressure ulcer of right upper back, stage 2
L89.113	Pressure ulcer of right upper back, stage 3
L89.114	Pressure ulcer of right upper back, stage 4
L89.119	Pressure ulcer of right upper back, unspecified stage
L89.120	Pressure ulcer of left upper back, unstageable
L89.121	Pressure ulcer of left upper back, stage 1
L89.122	Pressure ulcer of left upper back, stage 2
L89.123	Pressure ulcer of left upper back, stage 3
L89.124	Pressure ulcer of left upper back, stage 4
L89.129	Pressure ulcer of left upper back, unspecified stage
L89.130	Pressure ulcer of right lower back, unstageable
L89.131	Pressure ulcer of right lower back, stage 1
L89.132	Pressure ulcer of right lower back, stage 2
L89.133	Pressure ulcer of right lower back, stage 3
L89.134	Pressure ulcer of right lower back, stage 4

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Code	Description
L89.139	Pressure ulcer of right lower back, unspecified stage
L89.140	Pressure ulcer of left lower back, unstageable
L89.141	Pressure ulcer of left lower back, stage 1
L89.142	Pressure ulcer of left lower back, stage 2
L89.143	Pressure ulcer of left lower back, stage 3
L89.144	Pressure ulcer of left lower back, stage 4
L89.149	Pressure ulcer of left lower back, unspecified stage
L89.150	Pressure ulcer of sacral region, unstageable
L89.151	Pressure ulcer of sacral region, stage 1
L89.152	Pressure ulcer of sacral region, stage 2
L89.153	Pressure ulcer of sacral region, stage 3
L89.154	Pressure ulcer of sacral region, stage 4
L89.159	Pressure ulcer of sacral region, unspecified stage
L89.200	Pressure ulcer of unspecified hip, unstageable
L89.201	Pressure ulcer of unspecified hip, stage 1
L89.202	Pressure ulcer of unspecified hip, stage 2
L89.203	Pressure ulcer of unspecified hip, stage 3
L89.204	Pressure ulcer of unspecified hip, stage 4
L89.209	Pressure ulcer of unspecified hip, unspecified stage
L89.210	Pressure ulcer of right hip, unstageable
L89.211	Pressure ulcer of right hip, stage 1
L89.212	Pressure ulcer of right hip, stage 2
L89.213	Pressure ulcer of right hip, stage 3
L89.214	Pressure ulcer of right hip, stage 4
L89.219	Pressure ulcer of right hip, unspecified stage
L89.220	Pressure ulcer of left hip, unstageable
L89.221	Pressure ulcer of left hip, stage 1
L89.222	Pressure ulcer of left hip, stage 2
L89.223	Pressure ulcer of left hip, stage 3
L89.224	Pressure ulcer of left hip, stage 4

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Code	Description
L89.229	Pressure ulcer of left hip, unspecified stage
L89.300	Pressure ulcer of unspecified buttock, unstageable
L89.301	Pressure ulcer of unspecified buttock, stage 1
L89.302	Pressure ulcer of unspecified buttock, stage 2
L89.303	Pressure ulcer of unspecified buttock, stage 3
L89.304	Pressure ulcer of unspecified buttock, stage 4
L89.309	Pressure ulcer of unspecified buttock, unspecified stage
L89.310	Pressure ulcer of right buttock, unstageable
L89.311	Pressure ulcer of right buttock, stage 1
L89.312	Pressure ulcer of right buttock, stage 2
L89.313	Pressure ulcer of right buttock, stage 3
L89.314	Pressure ulcer of right buttock, stage 4
L89.319	Pressure ulcer of right buttock, unspecified stage
L89.320	Pressure ulcer of left buttock, unstageable
L89.321	Pressure ulcer of left buttock, stage 1
L89.322	Pressure ulcer of left buttock, stage 2
L89.323	Pressure ulcer of left buttock, stage 3
L89.324	Pressure ulcer of left buttock, stage 4
L89.329	Pressure ulcer of left buttock, unspecified stage
L89.40	Pressure ulcer of contiguous site of back, buttock and hip, unspecified stage
L89.41	Pressure ulcer of contiguous site of back, buttock and hip, stage 1
L89.42	Pressure ulcer of contiguous site of back, buttock and hip, stage 2
L89.43	Pressure ulcer of contiguous site of back, buttock and hip, stage 3
L89.44	Pressure ulcer of contiguous site of back, buttock and hip, stage 4
L89.45	Pressure ulcer of contiguous site of back, buttock and hip, unstageable
L89.500	Pressure ulcer of unspecified ankle, unstageable
L89.501	Pressure ulcer of unspecified ankle, stage 1
L89.502	Pressure ulcer of unspecified ankle, stage 2
L89.503	Pressure ulcer of unspecified ankle, stage 3
L89.504	Pressure ulcer of unspecified ankle, stage 4

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Code	Description
L89.509	Pressure ulcer of unspecified ankle, unspecified stage
L89.510	Pressure ulcer of right ankle, unstageable
L89.511	Pressure ulcer of right ankle, stage 1
L89.512	Pressure ulcer of right ankle, stage 2
L89.513	Pressure ulcer of right ankle, stage 3
L89.514	Pressure ulcer of right ankle, stage 4
L89.519	Pressure ulcer of right ankle, unspecified stage
L89.520	Pressure ulcer of left ankle, unstageable
L89.521	Pressure ulcer of left ankle, stage 1
L89.522	Pressure ulcer of left ankle, stage 2
L89.523	Pressure ulcer of left ankle, stage 3
L89.524	Pressure ulcer of left ankle, stage 4
L89.529	Pressure ulcer of left ankle, unspecified stage
L89.600	Pressure ulcer of unspecified heel, unstageable
L89.601	Pressure ulcer of unspecified heel, stage 1
L89.602	Pressure ulcer of unspecified heel, stage 2
L89.603	Pressure ulcer of unspecified heel, stage 3
L89.604	Pressure ulcer of unspecified heel, stage 4
L89.609	Pressure ulcer of unspecified heel, unspecified stage
L89.610	Pressure ulcer of right heel, unstageable
L89.611	Pressure ulcer of right heel, stage 1
L89.612	Pressure ulcer of right heel, stage 2
L89.613	Pressure ulcer of right heel, stage 3
L89.614	Pressure ulcer of right heel, stage 4
L89.619	Pressure ulcer of right heel, unspecified stage
L89.620	Pressure ulcer of left heel, unstageable
L89.621	Pressure ulcer of left heel, stage 1
L89.622	Pressure ulcer of left heel, stage 2
L89.623	Pressure ulcer of left heel, stage 3
L89.624	Pressure ulcer of left heel, stage 4



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Code	Description
L89.629	Pressure ulcer of left heel, unspecified stage
L89.810	Pressure ulcer of head, unstageable
L89.811	Pressure ulcer of head, stage 1
L89.812	Pressure ulcer of head, stage 2
L89.813	Pressure ulcer of head, stage 3
L89.814	Pressure ulcer of head, stage 4
L89.819	Pressure ulcer of head, unspecified stage
L89.890	Pressure ulcer of other site, unstageable
L89.891	Pressure ulcer of other site, stage 1
L89.892	Pressure ulcer of other site, stage 2
L89.893	Pressure ulcer of other site, stage 3
L89.894	Pressure ulcer of other site, stage 4
L89.899	Pressure ulcer of other site, unspecified stage
L89.90	Pressure ulcer of unspecified site, unspecified stage
L89.91	Pressure ulcer of unspecified site, stage 1
L89.92	Pressure ulcer of unspecified site, stage 2
L89.93	Pressure ulcer of unspecified site, stage 3
L89.94	Pressure ulcer of unspecified site, stage 4
L89.95	Pressure ulcer of unspecified site, unstageable
L92.1	Necrobiosis lipoidica, not elsewhere classified
L92.8	Other granulomatous disorders of the skin and subcutaneous tissue
L94.2	Calcinosis cutis
L97.101	Non-pressure chronic ulcer of unspecified thigh limited to breakdown of skin
L97.102	Non-pressure chronic ulcer of unspecified thigh with fat layer exposed
L97.103	Non-pressure chronic ulcer of unspecified thigh with necrosis of muscle
L97.104	Non-pressure chronic ulcer of unspecified thigh with necrosis of bone
L97.109	Non-pressure chronic ulcer of unspecified thigh with unspecified severity
L97.111	Non-pressure chronic ulcer of right thigh limited to breakdown of skin
L97.112	Non-pressure chronic ulcer of right thigh with fat layer exposed
L97.113	Non-pressure chronic ulcer of right thigh with necrosis of muscle

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Code	Description
L97.114	Non-pressure chronic ulcer of right thigh with necrosis of bone
L97.119	Non-pressure chronic ulcer of right thigh with unspecified severity
L97.121	Non-pressure chronic ulcer of left thigh limited to breakdown of skin
L97.122	Non-pressure chronic ulcer of left thigh with fat layer exposed
L97.123	Non-pressure chronic ulcer of left thigh with necrosis of muscle
L97.124	Non-pressure chronic ulcer of left thigh with necrosis of bone
L97.129	Non-pressure chronic ulcer of left thigh with unspecified severity
L97.201	Non-pressure chronic ulcer of unspecified calf limited to breakdown of skin
L97.202	Non-pressure chronic ulcer of unspecified calf with fat layer exposed
L97.203	Non-pressure chronic ulcer of unspecified calf with necrosis of muscle
L97.204	Non-pressure chronic ulcer of unspecified calf with necrosis of bone
L97.209	Non-pressure chronic ulcer of unspecified calf with unspecified severity
L97.211	Non-pressure chronic ulcer of right calf limited to breakdown of skin
L97.212	Non-pressure chronic ulcer of right calf with fat layer exposed
L97.213	Non-pressure chronic ulcer of right calf with necrosis of muscle
L97.214	Non-pressure chronic ulcer of right calf with necrosis of bone
L97.219	Non-pressure chronic ulcer of right calf with unspecified severity
L97.221	Non-pressure chronic ulcer of left calf limited to breakdown of skin
L97.222	Non-pressure chronic ulcer of left calf with fat layer exposed
L97.223	Non-pressure chronic ulcer of left calf with necrosis of muscle
L97.224	Non-pressure chronic ulcer of left calf with necrosis of bone
L97.229	Non-pressure chronic ulcer of left calf with unspecified severity
L97.301	Non-pressure chronic ulcer of unspecified ankle limited to breakdown of skin
L97.302	Non-pressure chronic ulcer of unspecified ankle with fat layer exposed
L97.303	Non-pressure chronic ulcer of unspecified ankle with necrosis of muscle
L97.304	Non-pressure chronic ulcer of unspecified ankle with necrosis of bone
L97.309	Non-pressure chronic ulcer of unspecified ankle with unspecified severity
L97.311	Non-pressure chronic ulcer of right ankle limited to breakdown of skin
L97.312	Non-pressure chronic ulcer of right ankle with fat layer exposed
L97.313	Non-pressure chronic ulcer of right ankle with necrosis of muscle

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Code	Description
L97.314	Non-pressure chronic ulcer of right ankle with necrosis of bone
L97.319	Non-pressure chronic ulcer of right ankle with unspecified severity
L97.321	Non-pressure chronic ulcer of left ankle limited to breakdown of skin
L97.322	Non-pressure chronic ulcer of left ankle with fat layer exposed
L97.323	Non-pressure chronic ulcer of left ankle with necrosis of muscle
L97.324	Non-pressure chronic ulcer of left ankle with necrosis of bone
L97.329	Non-pressure chronic ulcer of left ankle with unspecified severity
L97.401	Non-pressure chronic ulcer of unspecified heel and midfoot limited to breakdown of skin
L97.402	Non-pressure chronic ulcer of unspecified heel and midfoot with fat layer exposed
L97.403	Non-pressure chronic ulcer of unspecified heel and midfoot with necrosis of muscle
L97.404	Non-pressure chronic ulcer of unspecified heel and midfoot with necrosis of bone
L97.409	Non-pressure chronic ulcer of unspecified heel and midfoot with unspecified severity
L97.411	Non-pressure chronic ulcer of right heel and midfoot limited to breakdown of skin
L97.412	Non-pressure chronic ulcer of right heel and midfoot with fat layer exposed
L97.413	Non-pressure chronic ulcer of right heel and midfoot with necrosis of muscle
L97.414	Non-pressure chronic ulcer of right heel and midfoot with necrosis of bone
L97.419	Non-pressure chronic ulcer of right heel and midfoot with unspecified severity
L97.421	Non-pressure chronic ulcer of left heel and midfoot limited to breakdown of skin
L97.422	Non-pressure chronic ulcer of left heel and midfoot with fat layer exposed
L97.423	Non-pressure chronic ulcer of left heel and midfoot with necrosis of muscle
L97.424	Non-pressure chronic ulcer of left heel and midfoot with necrosis of bone
L97.429	Non-pressure chronic ulcer of left heel and midfoot with unspecified severity
L97.501	Non-pressure chronic ulcer of other part of unspecified foot limited to breakdown of skin
L97.502	Non-pressure chronic ulcer of other part of unspecified foot with fat layer exposed
L97.503	Non-pressure chronic ulcer of other part of unspecified foot with necrosis of muscle
L97.504	Non-pressure chronic ulcer of other part of unspecified foot with necrosis of bone
L97.509	Non-pressure chronic ulcer of other part of unspecified foot with unspecified severity
L97.511	Non-pressure chronic ulcer of other part of right foot limited to breakdown of skin
L97.512	Non-pressure chronic ulcer of other part of right foot with fat layer exposed
L97.513	Non-pressure chronic ulcer of other part of right foot with necrosis of muscle



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Code	Description
L97.514	Non-pressure chronic ulcer of other part of right foot with necrosis of bone
L97.519	Non-pressure chronic ulcer of other part of right foot with unspecified severity
L97.521	Non-pressure chronic ulcer of other part of left foot limited to breakdown of skin
L97.522	Non-pressure chronic ulcer of other part of left foot with fat layer exposed
L97.523	Non-pressure chronic ulcer of other part of left foot with necrosis of muscle
L97.524	Non-pressure chronic ulcer of other part of left foot with necrosis of bone
L97.529	Non-pressure chronic ulcer of other part of left foot with unspecified severity
L97.801	Non-pressure chronic ulcer of other part of unspecified lower leg limited to breakdown of skin
L97.802	Non-pressure chronic ulcer of other part of unspecified lower leg with fat layer exposed
L97.803	Non-pressure chronic ulcer of other part of unspecified lower leg with necrosis of muscle
L97.804	Non-pressure chronic ulcer of other part of unspecified lower leg with necrosis of bone
L97.809	Non-pressure chronic ulcer of other part of unspecified lower leg with unspecified severity
L97.811	Non-pressure chronic ulcer of other part of right lower leg limited to breakdown of skin
L97.812	Non-pressure chronic ulcer of other part of right lower leg with fat layer exposed
L97.813	Non-pressure chronic ulcer of other part of right lower leg with necrosis of muscle
L97.814	Non-pressure chronic ulcer of other part of right lower leg with necrosis of bone
L97.819	Non-pressure chronic ulcer of other part of right lower leg with unspecified severity
L97.821	Non-pressure chronic ulcer of other part of left lower leg limited to breakdown of skin
L97.822	Non-pressure chronic ulcer of other part of left lower leg with fat layer exposed
L97.823	Non-pressure chronic ulcer of other part of left lower leg with necrosis of muscle
L97.824	Non-pressure chronic ulcer of other part of left lower leg with necrosis of bone
L97.829	Non-pressure chronic ulcer of other part of left lower leg with unspecified severity
L97.901	Non-pressure chronic ulcer of unspecified part of unspecified lower leg limited to breakdown of skin
L97.902	Non-pressure chronic ulcer of unspecified part of unspecified lower leg with fat layer exposed
L97.903	Non-pressure chronic ulcer of unspecified part of unspecified lower leg with necrosis of muscle
L97.904	Non-pressure chronic ulcer of unspecified part of unspecified lower leg with necrosis of bone



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Code	Description
L97.909	Non-pressure chronic ulcer of unspecified part of unspecified lower leg with unspecified severity
L97.911	Non-pressure chronic ulcer of unspecified part of right lower leg limited to breakdown of skin
L97.912	Non-pressure chronic ulcer of unspecified part of right lower leg with fat layer exposed
L97.913	Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of muscle
L97.914	Non-pressure chronic ulcer of unspecified part of right lower leg with necrosis of bone
L97.919	Non-pressure chronic ulcer of unspecified part of right lower leg with unspecified severity
L97.921	Non-pressure chronic ulcer of unspecified part of left lower leg limited to breakdown of skin
L97.922	Non-pressure chronic ulcer of unspecified part of left lower leg with fat layer exposed
L97.923	Non-pressure chronic ulcer of unspecified part of left lower leg with necrosis of muscle
L97.924	Non-pressure chronic ulcer of unspecified part of left lower leg with necrosis of bone
L97.929	Non-pressure chronic ulcer of unspecified part of left lower leg with unspecified severity
L98.0	Pyogenic granuloma
L98.411	Non-pressure chronic ulcer of buttock limited to breakdown of skin
L98.412	Non-pressure chronic ulcer of buttock with fat layer exposed
L98.413	Non-pressure chronic ulcer of buttock with necrosis of muscle
L98.414	Non-pressure chronic ulcer of buttock with necrosis of bone
L98.419	Non-pressure chronic ulcer of buttock with unspecified severity
L98.421	Non-pressure chronic ulcer of back limited to breakdown of skin
L98.422	Non-pressure chronic ulcer of back with fat layer exposed
L98.423	Non-pressure chronic ulcer of back with necrosis of muscle
L98.424	Non-pressure chronic ulcer of back with necrosis of bone
L98.429	Non-pressure chronic ulcer of back with unspecified severity
L98.491	Non-pressure chronic ulcer of skin of other sites limited to breakdown of skin
L98.492	Non-pressure chronic ulcer of skin of other sites with fat layer exposed
L98.493	Non-pressure chronic ulcer of skin of other sites with necrosis of muscle
L98.494	Non-pressure chronic ulcer of skin of other sites with necrosis of bone
L98.499	Non-pressure chronic ulcer of skin of other sites with unspecified severity
L98.8	Other specified disorders of the skin and subcutaneous tissue



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Code	Description
*M04.1 <i>*Covered only for procedure code 82947.</i>	*Periodic fever syndromes
M60.80	Other myositis, unspecified site
M60.811	Other myositis, right shoulder
M60.812	Other myositis, left shoulder
M60.819	Other myositis, unspecified shoulder
M60.821	Other myositis, right upper arm
M60.822	Other myositis, left upper arm
M60.829	Other myositis, unspecified upper arm
M60.831	Other myositis, right forearm
M60.832	Other myositis, left forearm
M60.839	Other myositis, unspecified forearm
M60.841	Other myositis, right hand
M60.842	Other myositis, left hand
M60.849	Other myositis, unspecified hand
M60.851	Other myositis, right thigh
M60.852	Other myositis, left thigh
M60.859	Other myositis, unspecified thigh
M60.861	Other myositis, right lower leg
M60.862	Other myositis, left lower leg
M60.869	Other myositis, unspecified lower leg
M60.871	Other myositis, right ankle and foot
M60.872	Other myositis, left ankle and foot
M60.879	Other myositis, unspecified ankle and foot
M60.88	Other myositis, other site
M60.89	Other myositis, multiple sites
M60.9	Myositis, unspecified
M79.1	Myalgia
M79.7	Fibromyalgia
M86.071	Acute hematogenous osteomyelitis, right ankle and foot

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Code	Description
M86.072	Acute hematogenous osteomyelitis, left ankle and foot
M86.079	Acute hematogenous osteomyelitis, unspecified ankle and foot
M86.171	Other acute osteomyelitis, right ankle and foot
M86.172	Other acute osteomyelitis, left ankle and foot
M86.179	Other acute osteomyelitis, unspecified ankle and foot
M86.271	Subacute osteomyelitis, right ankle and foot
M86.272	Subacute osteomyelitis, left ankle and foot
M86.279	Subacute osteomyelitis, unspecified ankle and foot
M86.371	Chronic multifocal osteomyelitis, right ankle and foot
M86.372	Chronic multifocal osteomyelitis, left ankle and foot
M86.379	Chronic multifocal osteomyelitis, unspecified ankle and foot
M86.471	Chronic osteomyelitis with draining sinus, right ankle and foot
M86.472	Chronic osteomyelitis with draining sinus, left ankle and foot
M86.479	Chronic osteomyelitis with draining sinus, unspecified ankle and foot
M86.571	Other chronic hematogenous osteomyelitis, right ankle and foot
M86.572	Other chronic hematogenous osteomyelitis, left ankle and foot
M86.579	Other chronic hematogenous osteomyelitis, unspecified ankle and foot
M86.671	Other chronic osteomyelitis, right ankle and foot
M86.672	Other chronic osteomyelitis, left ankle and foot
M86.679	Other chronic osteomyelitis, unspecified ankle and foot
M86.8X7	Other osteomyelitis, ankle and foot
M86.9	Osteomyelitis, unspecified
N10	Acute pyelonephritis
N11.0	Nonobstructive reflux-associated chronic pyelonephritis
N11.1	Chronic obstructive pyelonephritis
N11.8	Other chronic tubulo-interstitial nephritis
N11.9	Chronic tubulo-interstitial nephritis, unspecified
N12	Tubulo-interstitial nephritis, not specified as acute or chronic
N13.6	Pyonephrosis
N15.1	Renal and perinephric abscess

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Code	Description
N15.9	Renal tubulo-interstitial disease, unspecified
N16	Renal tubulo-interstitial disorders in diseases classified elsewhere
N28.84	Pyelitis cystica
N28.85	Pyeloureteritis cystica
N28.86	Ureteritis cystica
N30.90	Cystitis, unspecified without hematuria
N30.91	Cystitis, unspecified with hematuria
N31.2	Flaccid neuropathic bladder, not elsewhere classified
N39.0	Urinary tract infection, site not specified
N44.1	Cyst of tunica albuginea testis
N44.2	Benign cyst of testis
N44.8	Other noninflammatory disorders of the testis
N50.3	Cyst of epididymis
N50.811	Right testicular pain
N50.812	Left testicular pain
N50.819	Testicular pain, unspecified
N50.82	Scrotal pain
N50.89	Other specified disorders of the male genital organs
N52.01	Erectile dysfunction due to arterial insufficiency
N52.02	Corporo-venous occlusive erectile dysfunction
N52.03	Combined arterial insufficiency and corporo-venous occlusive erectile dysfunction
N52.1	Erectile dysfunction due to diseases classified elsewhere
N52.2	Drug-induced erectile dysfunction
N52.31	Erectile dysfunction following radical prostatectomy
N52.32	Erectile dysfunction following radical cystectomy
N52.33	Erectile dysfunction following urethral surgery
N52.34	Erectile dysfunction following simple prostatectomy
*N52.35	*Erectile dysfunction following radiation therapy
*N52.36	*Erectile dysfunction following interstitial seed therapy
*N52.37	*Erectile dysfunction following prostate ablative therapy



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Code	Description
N52.39	Other and unspecified postprocedural erectile dysfunction
N52.8	Other male erectile dysfunction
N52.9	Male erectile dysfunction, unspecified
N53.12	Painful ejaculation
N53.8	Other male sexual dysfunction
N53.9	Unspecified male sexual dysfunction
N76.0	Acute vaginitis
N76.1	Subacute and chronic vaginitis
N76.2	Acute vulvitis
N76.3	Subacute and chronic vulvitis
N91.0	Primary amenorrhea
N91.1	Secondary amenorrhea
N91.2	Amenorrhea, unspecified
N92.5	Other specified irregular menstruation
N92.6	Irregular menstruation, unspecified
N97.9	Female infertility, unspecified
O09.00	Supervision of pregnancy with history of infertility, unspecified trimester
O09.01	Supervision of pregnancy with history of infertility, first trimester
O09.02	Supervision of pregnancy with history of infertility, second trimester
O09.03	Supervision of pregnancy with history of infertility, third trimester
O09.10	Supervision of pregnancy with history of ectopic pregnancy, unspecified trimester
O09.11	Supervision of pregnancy with history of ectopic pregnancy, first trimester
O09.12	Supervision of pregnancy with history of ectopic pregnancy, second trimester
O09.13	Supervision of pregnancy with history of ectopic pregnancy, third trimester
O09.211	Supervision of pregnancy with history of pre-term labor, first trimester
O09.212	Supervision of pregnancy with history of pre-term labor, second trimester
O09.213	Supervision of pregnancy with history of pre-term labor, third trimester
O09.219	Supervision of pregnancy with history of pre-term labor, unspecified trimester
O09.291	Supervision of pregnancy with other poor reproductive or obstetric history, first trimester
O09.292	Supervision of pregnancy with other poor reproductive or obstetric history, second trimester



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Code	Description
O09.293	Supervision of pregnancy with other poor reproductive or obstetric history, third trimester
O09.299	Supervision of pregnancy with other poor reproductive or obstetric history, unspecified trimester
O09.30	Supervision of pregnancy with insufficient antenatal care, unspecified trimester
O09.31	Supervision of pregnancy with insufficient antenatal care, first trimester
O09.32	Supervision of pregnancy with insufficient antenatal care, second trimester
O09.33	Supervision of pregnancy with insufficient antenatal care, third trimester
O09.40	Supervision of pregnancy with grand multiparity, unspecified trimester
O09.41	Supervision of pregnancy with grand multiparity, first trimester
O09.42	Supervision of pregnancy with grand multiparity, second trimester
O09.43	Supervision of pregnancy with grand multiparity, third trimester
O09.511	Supervision of elderly primigravida, first trimester
O09.512	Supervision of elderly primigravida, second trimester
O09.513	Supervision of elderly primigravida, third trimester
O09.519	Supervision of elderly primigravida, unspecified trimester
O09.521	Supervision of elderly multigravida, first trimester
O09.522	Supervision of elderly multigravida, second trimester
O09.523	Supervision of elderly multigravida, third trimester
O09.529	Supervision of elderly multigravida, unspecified trimester
O09.611	Supervision of young primigravida, first trimester
O09.612	Supervision of young primigravida, second trimester
O09.613	Supervision of young primigravida, third trimester
O09.619	Supervision of young primigravida, unspecified trimester
O09.621	Supervision of young multigravida, first trimester
O09.622	Supervision of young multigravida, second trimester
O09.623	Supervision of young multigravida, third trimester
O09.629	Supervision of young multigravida, unspecified trimester
O09.70	Supervision of high risk pregnancy due to social problems, unspecified trimester
O09.71	Supervision of high risk pregnancy due to social problems, first trimester
O09.72	Supervision of high risk pregnancy due to social problems, second trimester
O09.73	Supervision of high risk pregnancy due to social problems, third trimester

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Code	Description
O09.811	Supervision of pregnancy resulting from assisted reproductive technology, first trimester
O09.812	Supervision of pregnancy resulting from assisted reproductive technology, second trimester
O09.813	Supervision of pregnancy resulting from assisted reproductive technology, third trimester
O09.819	Supervision of pregnancy resulting from assisted reproductive technology, unspecified trimester
O09.821	Supervision of pregnancy with history of in utero procedure during previous pregnancy, first trimester
O09.822	Supervision of pregnancy with history of in utero procedure during previous pregnancy, second trimester
O09.823	Supervision of pregnancy with history of in utero procedure during previous pregnancy, third trimester
O09.829	Supervision of pregnancy with history of in utero procedure during previous pregnancy, unspecified trimester
O09.891	Supervision of other high risk pregnancies, first trimester
O09.892	Supervision of other high risk pregnancies, second trimester
O09.893	Supervision of other high risk pregnancies, third trimester
O09.899	Supervision of other high risk pregnancies, unspecified trimester
O09.90	Supervision of high risk pregnancy, unspecified, unspecified trimester
O09.91	Supervision of high risk pregnancy, unspecified, first trimester
O09.92	Supervision of high risk pregnancy, unspecified, second trimester
O09.93	Supervision of high risk pregnancy, unspecified, third trimester
*O09.A0 <i>*Covered only for procedure code 82947.</i>	*Supervision of pregnancy with history of molar pregnancy, unspecified trimester
*O09.A1 <i>*Covered only for procedure code 82947.</i>	*Supervision of pregnancy with history of molar pregnancy, first trimester
*O09.A2 <i>*Covered only for procedure code 82947.</i>	*Supervision of pregnancy with history of molar pregnancy, second trimester
*O09.A3 <i>*Covered only for procedure code 82947.</i>	*Supervision of pregnancy with history of molar pregnancy, third trimester



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Code	Description
*O11.4	*Pre-existing hypertension with pre-eclampsia, complicating childbirth
*O11.5	*Pre-existing hypertension with pre-eclampsia, complicating the puerperium
*O12.04 <i>*Covered only for procedure code 82947.</i>	*Gestational edema, complicating childbirth
*O12.05 <i>*Covered only for procedure code 82947.</i>	*Gestational edema, complicating the puerperium
*O12.14 <i>*Covered only for procedure code 82947.</i>	*Gestational proteinuria, complicating childbirth
*O12.15 <i>*Covered only for procedure code 82947.</i>	*Gestational proteinuria, complicating the puerperium
*O12.24 <i>*Covered only for procedure code 82947.</i>	*Gestational edema with proteinuria, complicating childbirth
*O12.25 <i>*Covered only for procedure code 82947.</i>	*Gestational edema with proteinuria, complicating the puerperium
*O13.4 <i>*Covered only for procedure code 82947.</i>	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth
*O13.5 <i>*Covered only for procedure code 82947.</i>	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating the puerperium
*O14.04 <i>*Covered only for procedure code 82947.</i>	*Mild to moderate pre-eclampsia, complicating childbirth
*O14.05 <i>*Covered only for procedure code 82947.</i>	*Mild to moderate pre-eclampsia, complicating the puerperium



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Code	Description
*O14.14 <i>*Covered only for procedure code 82947.</i>	*Severe pre-eclampsia complicating childbirth
*O14.15 <i>*Covered only for procedure code 82947.</i>	*Severe pre-eclampsia, complicating the puerperium
*O14.24 <i>*Covered only for procedure code 82947.</i>	*HELLP syndrome, complicating childbirth
*O14.25 <i>*Covered only for procedure code 82947.</i>	*HELLP syndrome, complicating the puerperium
*O14.94 <i>*Covered only for procedure code 82947.</i>	*Unspecified pre-eclampsia, complicating childbirth
*O14.95 <i>*Covered only for procedure code 82947.</i>	*Unspecified pre-eclampsia, complicating the puerperium
*O16.4 <i>*Covered only for procedure code 82947.</i>	*Unspecified maternal hypertension, complicating childbirth
*O16.5	*Unspecified maternal hypertension, complicating the puerperium
O24.011	Pre-existing type 1 diabetes mellitus, in pregnancy, first trimester
O24.012	Pre-existing type 1 diabetes mellitus, in pregnancy, second trimester
O24.013	Pre-existing type 1 diabetes mellitus, in pregnancy, third trimester
O24.019	Pre-existing type 1 diabetes mellitus, in pregnancy, unspecified trimester
O24.03	Pre-existing type 1 diabetes mellitus, in the puerperium
O24.111	Pre-existing type 2 diabetes mellitus, in pregnancy, first trimester
O24.112	Pre-existing type 2 diabetes mellitus, in pregnancy, second trimester
O24.113	Pre-existing type 2 diabetes mellitus, in pregnancy, third trimester
O24.119	Pre-existing type 2 diabetes mellitus, in pregnancy, unspecified trimester
O24.13	Pre-existing type 2 diabetes mellitus, in the puerperium
O24.311	Unspecified pre-existing diabetes mellitus in pregnancy, first trimester

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Code	Description
O24.312	Unspecified pre-existing diabetes mellitus in pregnancy, second trimester
O24.313	Unspecified pre-existing diabetes mellitus in pregnancy, third trimester
O24.319	Unspecified pre-existing diabetes mellitus in pregnancy, unspecified trimester
O24.33	Unspecified pre-existing diabetes mellitus in the puerperium
O24.410	Gestational diabetes mellitus in pregnancy, diet controlled
O24.414	Gestational diabetes mellitus in pregnancy, insulin controlled
*O24.415	*Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs
O24.419	Gestational diabetes mellitus in pregnancy, unspecified control
*O24.425	*Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs
O24.430	Gestational diabetes mellitus in the puerperium, diet controlled
O24.434	Gestational diabetes mellitus in the puerperium, insulin controlled
*O24.435	*Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs
O24.439	Gestational diabetes mellitus in the puerperium, unspecified control
O24.811	Other pre-existing diabetes mellitus in pregnancy, first trimester
O24.812	Other pre-existing diabetes mellitus in pregnancy, second trimester
O24.813	Other pre-existing diabetes mellitus in pregnancy, third trimester
O24.819	Other pre-existing diabetes mellitus in pregnancy, unspecified trimester
O24.83	Other pre-existing diabetes mellitus in the puerperium
O24.911	Unspecified diabetes mellitus in pregnancy, first trimester
O24.912	Unspecified diabetes mellitus in pregnancy, second trimester
O24.913	Unspecified diabetes mellitus in pregnancy, third trimester
O24.919	Unspecified diabetes mellitus in pregnancy, unspecified trimester
O24.93	Unspecified diabetes mellitus in the puerperium
*O33.7XX0 <i>*Covered only for procedure code 82947.</i>	*Maternal care for disproportion due to other fetal deformities, not applicable or unspecified
*O33.7XX1 <i>*Covered only for procedure code 82947.</i>	*Maternal care for disproportion due to other fetal deformities, fetus 1
*O33.7XX2 <i>*Covered only for procedure code 82947.</i>	*Maternal care for disproportion due to other fetal deformities, fetus 2

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Code	Description
*O33.7XX3 <i>*Covered only for procedure code 82947.</i>	*Maternal care for disproportion due to other fetal deformities, fetus 3
*O33.7XX4 <i>*Covered only for procedure code 82947.</i>	*Maternal care for disproportion due to other fetal deformities, fetus 4
*O33.7XX5 <i>*Covered only for procedure code 82947.</i>	*Maternal care for disproportion due to other fetal deformities, fetus 5
*O33.7XX9 <i>*Covered only for procedure code 82947.</i>	*Maternal care for disproportion due to other fetal deformities, other fetus
O36.60X0	Maternal care for excessive fetal growth, unspecified trimester, not applicable or unspecified
O36.60X1	Maternal care for excessive fetal growth, unspecified trimester, fetus 1
O36.60X2	Maternal care for excessive fetal growth, unspecified trimester, fetus 2
O36.60X3	Maternal care for excessive fetal growth, unspecified trimester, fetus 3
O36.60X4	Maternal care for excessive fetal growth, unspecified trimester, fetus 4
O36.60X5	Maternal care for excessive fetal growth, unspecified trimester, fetus 5
O36.60X9	Maternal care for excessive fetal growth, unspecified trimester, other fetus
O36.61X0	Maternal care for excessive fetal growth, first trimester, not applicable or unspecified
O36.61X1	Maternal care for excessive fetal growth, first trimester, fetus 1
O36.61X2	Maternal care for excessive fetal growth, first trimester, fetus 2
O36.61X3	Maternal care for excessive fetal growth, first trimester, fetus 3
O36.61X4	Maternal care for excessive fetal growth, first trimester, fetus 4
O36.61X5	Maternal care for excessive fetal growth, first trimester, fetus 5
O36.61X9	Maternal care for excessive fetal growth, first trimester, other fetus
O36.62X0	Maternal care for excessive fetal growth, second trimester, not applicable or unspecified
O36.62X1	Maternal care for excessive fetal growth, second trimester, fetus 1
O36.62X2	Maternal care for excessive fetal growth, second trimester, fetus 2
O36.62X3	Maternal care for excessive fetal growth, second trimester, fetus 3
O36.62X4	Maternal care for excessive fetal growth, second trimester, fetus 4



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Code	Description
O36.62X5	Maternal care for excessive fetal growth, second trimester, fetus 5
O36.62X9	Maternal care for excessive fetal growth, second trimester, other fetus
O36.63X0	Maternal care for excessive fetal growth, third trimester, not applicable or unspecified
O36.63X1	Maternal care for excessive fetal growth, third trimester, fetus 1
O36.63X2	Maternal care for excessive fetal growth, third trimester, fetus 2
O36.63X3	Maternal care for excessive fetal growth, third trimester, fetus 3
O36.63X4	Maternal care for excessive fetal growth, third trimester, fetus 4
O36.63X5	Maternal care for excessive fetal growth, third trimester, fetus 5
O36.63X9	Maternal care for excessive fetal growth, third trimester, other fetus
O36.80X0	Pregnancy with inconclusive fetal viability, not applicable or unspecified
O36.80X1	Pregnancy with inconclusive fetal viability, fetus 1
O36.80X2	Pregnancy with inconclusive fetal viability, fetus 2
O36.80X3	Pregnancy with inconclusive fetal viability, fetus 3
O36.80X4	Pregnancy with inconclusive fetal viability, fetus 4
O36.80X5	Pregnancy with inconclusive fetal viability, fetus 5
O36.80X9	Pregnancy with inconclusive fetal viability, other fetus
O40.1XX0	Polyhydramnios, first trimester, not applicable or unspecified
O40.1XX1	Polyhydramnios, first trimester, fetus 1
O40.1XX2	Polyhydramnios, first trimester, fetus 2
O40.1XX3	Polyhydramnios, first trimester, fetus 3
O40.1XX4	Polyhydramnios, first trimester, fetus 4
O40.1XX5	Polyhydramnios, first trimester, fetus 5
O40.1XX9	Polyhydramnios, first trimester, other fetus
O40.2XX0	Polyhydramnios, second trimester, not applicable or unspecified
O40.2XX1	Polyhydramnios, second trimester, fetus 1
O40.2XX2	Polyhydramnios, second trimester, fetus 2
O40.2XX3	Polyhydramnios, second trimester, fetus 3
O40.2XX4	Polyhydramnios, second trimester, fetus 4
O40.2XX5	Polyhydramnios, second trimester, fetus 5
O40.2XX9	Polyhydramnios, second trimester, other fetus

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Code	Description
O40.3XX0	Polyhydramnios, third trimester, not applicable or unspecified
O40.3XX1	Polyhydramnios, third trimester, fetus 1
O40.3XX2	Polyhydramnios, third trimester, fetus 2
O40.3XX3	Polyhydramnios, third trimester, fetus 3
O40.3XX4	Polyhydramnios, third trimester, fetus 4
O40.3XX5	Polyhydramnios, third trimester, fetus 5
O40.3XX9	Polyhydramnios, third trimester, other fetus
O40.9XX0	Polyhydramnios, unspecified trimester, not applicable or unspecified
O40.9XX1	Polyhydramnios, unspecified trimester, fetus 1
O40.9XX2	Polyhydramnios, unspecified trimester, fetus 2
O40.9XX3	Polyhydramnios, unspecified trimester, fetus 3
O40.9XX4	Polyhydramnios, unspecified trimester, fetus 4
O40.9XX5	Polyhydramnios, unspecified trimester, fetus 5
O40.9XX9	Polyhydramnios, unspecified trimester, other fetus
*O44.20 <i>*Covered only for procedure code 82947.</i>	*Partial placenta previa NOS or without hemorrhage, unspecified trimester
*O44.21 <i>*Covered only for procedure code 82947.</i>	*Partial placenta previa NOS or without hemorrhage, first trimester
*O44.22 <i>*Covered only for procedure code 82947.</i>	*Partial placenta previa NOS or without hemorrhage, second trimester
*O44.23 <i>*Covered only for procedure code 82947.</i>	*Partial placenta previa NOS or without hemorrhage, third trimester
*O44.30 <i>*Covered only for procedure code 82947.</i>	*Partial placenta previa with hemorrhage, unspecified trimester
*O44.31 <i>*Covered only for procedure code 82947.</i>	*Partial placenta previa with hemorrhage, first trimester



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Code	Description
*O44.32 <i>*Covered only for procedure code 82947.</i>	*Partial placenta previa with hemorrhage, second trimester
*O44.33 <i>*Covered only for procedure code 82947.</i>	*Partial placenta previa with hemorrhage, third trimester
*O44.40 <i>*Covered only for procedure code 82947.</i>	*Low lying placenta NOS or without hemorrhage, unspecified trimester
*O44.41 <i>*Covered only for procedure code 82947.</i>	*Low lying placenta NOS or without hemorrhage, first trimester
*O44.42 <i>*Covered only for procedure code 82947.</i>	*Low lying placenta NOS or without hemorrhage, second trimester
*O44.43 <i>*Covered only for procedure code 82947.</i>	*Low lying placenta NOS or without hemorrhage, third trimester
*O44.50 <i>*Covered only for procedure code 82947.</i>	*Low lying placenta with hemorrhage, unspecified trimester
*O44.51 <i>*Covered only for procedure code 82947.</i>	*Low lying placenta with hemorrhage, first trimester
*O44.52 <i>*Covered only for procedure code 82947.</i>	*Low lying placenta with hemorrhage, second trimester
*O44.53 <i>*Covered only for procedure code 82947.</i>	*Low lying placenta with hemorrhage, third trimester
O99.810	Abnormal glucose complicating pregnancy
O99.815	Abnormal glucose complicating the puerperium
O99.840	Bariatric surgery status complicating pregnancy, unspecified trimester
O99.841	Bariatric surgery status complicating pregnancy, first trimester

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Code	Description
O99.842	Bariatric surgery status complicating pregnancy, second trimester
O99.843	Bariatric surgery status complicating pregnancy, third trimester
O99.844	Bariatric surgery status complicating childbirth
O99.845	Bariatric surgery status complicating the puerperium
R00.0	Tachycardia, unspecified
R06.00	Dyspnea, unspecified
R06.09	Other forms of dyspnea
R06.3	Periodic breathing
R06.4	Hyperventilation
R06.83	Snoring
R06.89	Other abnormalities of breathing
R07.9	Chest pain, unspecified
R15.0	Incomplete defecation
R15.1	Fecal smearing
R15.2	Fecal urgency
R15.9	Full incontinence of feces
R16.0	Hepatomegaly, not elsewhere classified
R16.2	Hepatomegaly with splenomegaly, not elsewhere classified
R19.7	Diarrhea, unspecified
R20.0	Anesthesia of skin
R20.1	Hypoesthesia of skin
R20.2	Paresthesia of skin
R20.3	Hyperesthesia
R20.8	Other disturbances of skin sensation
R20.9	Unspecified disturbances of skin sensation
R25.0	Abnormal head movements
R25.1	Tremor, unspecified
R25.2	Cramp and spasm
R25.3	Fasciculation
R25.8	Other abnormal involuntary movements

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Code	Description
R25.9	Unspecified abnormal involuntary movements
R29.2	Abnormal reflex
*R29.700 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 0
*R29.701 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 1
*R29.702 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 2
*R29.703 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 3
*R29.704 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 4
*R29.705 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 5
*R29.706 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 6
*R29.707 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 7
*R29.708 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 8
*R29.709 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 9



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Code	Description
*R29.710 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 10
*R29.711 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 11
*R29.712 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 12
*R29.713 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 13
*R29.714 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 14
*R29.715 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 15
*R29.716 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 16
*R29.717 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 17
*R29.718 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 18
*R29.719 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 19
*R29.720 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 20



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Code	Description
*R29.721 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 21
*R29.722 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 22
*R29.723 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 23
*R29.724 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 24
*R29.725 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 25
*R29.726 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 26
*R29.727 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 27
*R29.728 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 28
*R29.729 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 29
*R29.730 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 30
*R29.731 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 31



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Code	Description
*R29.732 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 32
*R29.733 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 33
*R29.734 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 34
*R29.735 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 35
*R29.736 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 36
*R29.737 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 37
*R29.738 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 38
*R29.739 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 39
*R29.740 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 40
*R29.741 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 41
*R29.742 <i>*Covered only for procedure code 82947.</i>	*NIHSS score 42
R35.0	Frequency of micturition



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Code	Description
R35.1	Nocturia
R35.8	Other polyuria
R40.0	Somnolence
R40.1	Stupor
R40.20	Unspecified coma
R40.2110	Coma scale, eyes open, never, unspecified time
R40.2111	Coma scale, eyes open, never, in the field [EMT or ambulance]
R40.2112	Coma scale, eyes open, never, at arrival to emergency department
R40.2113	Coma scale, eyes open, never, at hospital admission
R40.2114	Coma scale, eyes open, never, 24 hours or more after hospital admission
R40.2120	Coma scale, eyes open, to pain, unspecified time
R40.2121	Coma scale, eyes open, to pain, in the field [EMT or ambulance]
R40.2122	Coma scale, eyes open, to pain, at arrival to emergency department
R40.2123	Coma scale, eyes open, to pain, at hospital admission
R40.2124	Coma scale, eyes open, to pain, 24 hours or more after hospital admission
R40.2210	Coma scale, best verbal response, none, unspecified time
R40.2211	Coma scale, best verbal response, none, in the field [EMT or ambulance]
R40.2212	Coma scale, best verbal response, none, at arrival to emergency department
R40.2213	Coma scale, best verbal response, none, at hospital admission
R40.2214	Coma scale, best verbal response, none, 24 hours or more after hospital admission
R40.2220	Coma scale, best verbal response, incomprehensible words, unspecified time
R40.2221	Coma scale, best verbal response, incomprehensible words, in the field [EMT or ambulance]
R40.2222	Coma scale, best verbal response, incomprehensible words, at arrival to emergency department
R40.2223	Coma scale, best verbal response, incomprehensible words, at hospital admission
R40.2224	Coma scale, best verbal response, incomprehensible words, 24 hours or more after hospital admission
R40.2310	Coma scale, best motor response, none, unspecified time
R40.2311	Coma scale, best motor response, none, in the field [EMT or ambulance]
R40.2312	Coma scale, best motor response, none, at arrival to emergency department



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Code	Description
R40.2313	Coma scale, best motor response, none, at hospital admission
R40.2314	Coma scale, best motor response, none, 24 hours or more after hospital admission
R40.2320	Coma scale, best motor response, extension, unspecified time
R40.2321	Coma scale, best motor response, extension, in the field [EMT or ambulance]
R40.2322	Coma scale, best motor response, extension, at arrival to emergency department
R40.2323	Coma scale, best motor response, extension, at hospital admission
R40.2324	Coma scale, best motor response, extension, 24 hours or more after hospital admission
R40.2340	Coma scale, best motor response, flexion withdrawal, unspecified time
R40.2341	Coma scale, best motor response, flexion withdrawal, in the field [EMT or ambulance]
R40.2342	Coma scale, best motor response, flexion withdrawal, at arrival to emergency department
R40.2343	Coma scale, best motor response, flexion withdrawal, at hospital admission
R40.2344	Coma scale, best motor response, flexion withdrawal, 24 hours or more after hospital admission
*R40.2410 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 13-15, unspecified time
*R40.2411 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 13-15, in the field [EMT or ambulance]
*R40.2412 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 13-15, at arrival to emergency department
*R40.2413 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 13-15, at hospital admission
*R40.2414 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 13-15, 24 hours or more after hospital admission
*R40.2420 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 9-12, unspecified time



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Code	Description
*R40.2421 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 9-12, in the field [EMT or ambulance]
*R40.2422 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 9-12, at arrival to emergency department
*R40.2423 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 9-12, at hospital admission
*R40.2424 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 9-12, 24 hours or more after hospital admission
*R40.2430 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 3-8, unspecified time
*R40.2431 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 3-8, in the field [EMT or ambulance]
*R40.2432 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 3-8, at arrival to emergency department
*R40.2433 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 3-8, at hospital admission
*R40.2434 <i>*Covered only for procedure code 82947.</i>	*Glasgow coma scale score 3-8, 24 hours or more after hospital admission
*R40.2440 <i>*Covered only for procedure code 82947.</i>	*Other coma, without documented Glasgow coma scale score, or with partial score reported, unspecified time
*R40.2441 <i>*Covered only for procedure code 82947.</i>	*Other coma, without documented Glasgow coma scale score, or with partial score reported, in the field [EMT or ambulance]



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Code	Description
*R40.2442 <i>*Covered only for procedure code 82947.</i>	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at arrival to emergency department
*R40.2443 <i>*Covered only for procedure code 82947.</i>	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at hospital admission
*R40.2444 <i>*Covered only for procedure code 82947.</i>	*Other coma, without documented Glasgow coma scale score, or with partial score reported, 24 hours or more after hospital admission
R40.4	Transient alteration of awareness
R42	Dizziness and giddiness
R45.2	Unhappiness
R45.5	Hostility
R45.6	Violent behavior
R53.0	Neoplastic (malignant) related fatigue
R53.1	Weakness
R53.2	Functional quadriplegia
R53.81	Other malaise
R53.82	Chronic fatigue, unspecified
R53.83	Other fatigue
R55	Syncope and collapse
R56.00	Simple febrile convulsions
R56.01	Complex febrile convulsions
R56.1	Post traumatic seizures
R56.9	Unspecified convulsions
R61	Generalized hyperhidrosis
R63.1	Polydipsia
R63.2	Polyphagia
R63.4	Abnormal weight loss
R63.5	Abnormal weight gain
R64	Cachexia
R68.2	Dry mouth, unspecified

NCD 190.20

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
R73.01	Impaired fasting glucose
R73.02	Impaired glucose tolerance (oral)
*R73.03	*Prediabetes
R73.09	Other abnormal glucose
R73.9	Hyperglycemia, unspecified
R78.71	Abnormal lead level in blood
R78.79	Finding of abnormal level of heavy metals in blood
R78.89	Finding of other specified substances, not normally found in blood
R79.0	Abnormal level of blood mineral
R79.89	Other specified abnormal findings of blood chemistry
R79.9	Abnormal finding of blood chemistry, unspecified
R80.0	Isolated proteinuria
R80.1	Persistent proteinuria, unspecified
R80.3	Bence Jones proteinuria
R80.8	Other proteinuria
R80.9	Proteinuria, unspecified
R81	Glycosuria
*S02.101A <i>*Covered only for procedure code 82947.</i>	*Fracture of base of skull, right side, initial encounter for closed fracture
*S02.101B <i>*Covered only for procedure code 82947.</i>	*Fracture of base of skull, right side, initial encounter for open fracture
*S02.102A <i>*Covered only for procedure code 82947.</i>	*Fracture of base of skull, left side, initial encounter for closed fracture
*S02.102B <i>*Covered only for procedure code 82947.</i>	*Fracture of base of skull, left side, initial encounter for open fracture
*S02.109A <i>*Covered only for procedure code 82947.</i>	*Fracture of base of skull, unspecified side, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S02.109B <i>*Covered only for procedure code 82947.</i>	*Fracture of base of skull, unspecified side, initial encounter for open fracture
*S02.11AA <i>*Covered only for procedure code 82947.</i>	*Type I occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11AB <i>*Covered only for procedure code 82947.</i>	*Type I occipital condyle fracture, right side, initial encounter for open fracture
*S02.11BA <i>*Covered only for procedure code 82947.</i>	*Type I occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11BB <i>*Covered only for procedure code 82947.</i>	*Type I occipital condyle fracture, left side, initial encounter for open fracture
*S02.11CA <i>*Covered only for procedure code 82947.</i>	*Type II occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11CB <i>*Covered only for procedure code 82947.</i>	*Type II occipital condyle fracture, right side, initial encounter for open fracture
*S02.11DA <i>*Covered only for procedure code 82947.</i>	*Type II occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11DB <i>*Covered only for procedure code 82947.</i>	*Type II occipital condyle fracture, left side, initial encounter for open fracture
*S02.11EA <i>*Covered only for procedure code 82947.</i>	*Type III occipital condyle fracture, right side, initial encounter for closed fracture
*S02.11EB <i>*Covered only for procedure code 82947.</i>	*Type III occipital condyle fracture, right side, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S02.11FA <i>*Covered only for procedure code 82947.</i>	*Type III occipital condyle fracture, left side, initial encounter for closed fracture
*S02.11FB <i>*Covered only for procedure code 82947.</i>	*Type III occipital condyle fracture, left side, initial encounter for open fracture
*S02.11GA <i>*Covered only for procedure code 82947.</i>	*Other fracture of occiput, right side, initial encounter for closed fracture
*S02.11GB <i>*Covered only for procedure code 82947.</i>	*Other fracture of occiput, right side, initial encounter for open fracture
*S02.11HA <i>*Covered only for procedure code 82947.</i>	*Other fracture of occiput, left side, initial encounter for closed fracture
*S02.11HB <i>*Covered only for procedure code 82947.</i>	*Other fracture of occiput, left side, initial encounter for open fracture
*S02.30XA <i>*Covered only for procedure code 82947.</i>	*Fracture of orbital floor, unspecified side, initial encounter for closed fracture
*S02.30XB <i>*Covered only for procedure code 82947.</i>	*Fracture of orbital floor, unspecified side, initial encounter for open fracture
*S02.31XA <i>*Covered only for procedure code 82947.</i>	*Fracture of orbital floor, right side, initial encounter for closed fracture
*S02.31XB <i>*Covered only for procedure code 82947.</i>	*Fracture of orbital floor, right side, initial encounter for open fracture
*S02.32XA <i>*Covered only for procedure code 82947.</i>	*Fracture of orbital floor, left side, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S02.32XB <i>*Covered only for procedure code 82947.</i>	*Fracture of orbital floor, left side, initial encounter for open fracture
*S02.40AA <i>*Covered only for procedure code 82947.</i>	*Malar fracture, right side, initial encounter for closed fracture
*S02.40AB <i>*Covered only for procedure code 82947.</i>	*Malar fracture, right side, initial encounter for open fracture
*S02.40BA <i>*Covered only for procedure code 82947.</i>	*Malar fracture, left side, initial encounter for closed fracture
*S02.40BB <i>*Covered only for procedure code 82947.</i>	*Malar fracture, left side, initial encounter for open fracture
*S02.40CA <i>*Covered only for procedure code 82947.</i>	*Maxillary fracture, right side, initial encounter for closed fracture
*S02.40CB <i>*Covered only for procedure code 82947.</i>	*Maxillary fracture, right side, initial encounter for open fracture
*S02.40DA <i>*Covered only for procedure code 82947.</i>	*Maxillary fracture, left side, initial encounter for closed fracture
*S02.40DB <i>*Covered only for procedure code 82947.</i>	*Maxillary fracture, left side, initial encounter for open fracture
*S02.40EA <i>*Covered only for procedure code 82947.</i>	*Zygomatic fracture, right side, initial encounter for closed fracture
*S02.40EB <i>*Covered only for procedure code 82947.</i>	*Zygomatic fracture, right side, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S02.40FA <i>*Covered only for procedure code 82947.</i>	*Zygomatic fracture, left side, initial encounter for closed fracture
*S02.40FB <i>*Covered only for procedure code 82947.</i>	*Zygomatic fracture, left side, initial encounter for open fracture
*S02.601A <i>*Covered only for procedure code 82947.</i>	*Fracture of unspecified part of body of right mandible, initial encounter for closed fracture
*S02.601B <i>*Covered only for procedure code 82947.</i>	*Fracture of unspecified part of body of right mandible, initial encounter for open fracture
*S02.602A <i>*Covered only for procedure code 82947.</i>	*Fracture of unspecified part of body of left mandible, initial encounter for closed fracture
*S02.602B <i>*Covered only for procedure code 82947.</i>	*Fracture of unspecified part of body of left mandible, initial encounter for open fracture
*S02.610A <i>*Covered only for procedure code 82947.</i>	*Fracture of condylar process of mandible, unspecified side, initial encounter for closed fracture
*S02.610B <i>*Covered only for procedure code 82947.</i>	*Fracture of condylar process of mandible, unspecified side, initial encounter for open fracture
*S02.611A <i>*Covered only for procedure code 82947.</i>	*Fracture of condylar process of right mandible, initial encounter for closed fracture
*S02.611B <i>*Covered only for procedure code 82947.</i>	*Fracture of condylar process of right mandible, initial encounter for open fracture
*S02.612A <i>*Covered only for procedure code 82947.</i>	*Fracture of condylar process of left mandible, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S02.612B <i>*Covered only for procedure code 82947.</i>	*Fracture of condylar process of left mandible, initial encounter for open fracture
*S02.620A <i>*Covered only for procedure code 82947.</i>	*Fracture of subcondylar process of mandible, unspecified side, initial encounter for closed fracture
*S02.620B <i>*Covered only for procedure code 82947.</i>	*Fracture of subcondylar process of mandible, unspecified side, initial encounter for open fracture
*S02.621A <i>*Covered only for procedure code 82947.</i>	*Fracture of subcondylar process of right mandible, initial encounter for closed fracture
*S02.621B <i>*Covered only for procedure code 82947.</i>	*Fracture of subcondylar process of right mandible, initial encounter for open fracture
*S02.622A <i>*Covered only for procedure code 82947.</i>	*Fracture of subcondylar process of left mandible, initial encounter for closed fracture
*S02.622B <i>*Covered only for procedure code 82947.</i>	*Fracture of subcondylar process of left mandible, initial encounter for open fracture
*S02.630A <i>*Covered only for procedure code 82947.</i>	*Fracture of coronoid process of mandible, unspecified side, initial encounter for closed fracture
*S02.630B <i>*Covered only for procedure code 82947.</i>	*Fracture of coronoid process of mandible, unspecified side, initial encounter for open fracture
*S02.631A <i>*Covered only for procedure code 82947.</i>	*Fracture of coronoid process of right mandible, initial encounter for closed fracture
*S02.631B <i>*Covered only for procedure code 82947.</i>	*Fracture of coronoid process of right mandible, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
*S02.632A <i>*Covered only for procedure code 82947.</i>	*Fracture of coronoid process of left mandible, initial encounter for closed fracture
*S02.632B <i>*Covered only for procedure code 82947.</i>	*Fracture of coronoid process of left mandible, initial encounter for open fracture
*S02.640A <i>*Covered only for procedure code 82947.</i>	*Fracture of ramus of mandible, unspecified side, initial encounter for closed fracture
*S02.640B <i>*Covered only for procedure code 82947.</i>	*Fracture of ramus of mandible, unspecified side, initial encounter for open fracture
*S02.641A <i>*Covered only for procedure code 82947.</i>	*Fracture of ramus of right mandible, initial encounter for closed fracture
*S02.641B <i>*Covered only for procedure code 82947.</i>	*Fracture of ramus of right mandible, initial encounter for open fracture
*S02.642A <i>*Covered only for procedure code 82947.</i>	*Fracture of ramus of left mandible, initial encounter for closed fracture
*S02.642B <i>*Covered only for procedure code 82947.</i>	*Fracture of ramus of left mandible, initial encounter for open fracture
*S02.650A <i>*Covered only for procedure code 82947.</i>	*Fracture of angle of mandible, unspecified side, initial encounter for closed fracture
*S02.650B <i>*Covered only for procedure code 82947.</i>	*Fracture of angle of mandible, unspecified side, initial encounter for open fracture
*S02.651A <i>*Covered only for procedure code 82947.</i>	*Fracture of angle of right mandible, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S02.651B <i>*Covered only for procedure code 82947.</i>	*Fracture of angle of right mandible, initial encounter for open fracture
*S02.652A <i>*Covered only for procedure code 82947.</i>	*Fracture of angle of left mandible, initial encounter for closed fracture
*S02.652B <i>*Covered only for procedure code 82947.</i>	*Fracture of angle of left mandible, initial encounter for open fracture
*S02.670A <i>*Covered only for procedure code 82947.</i>	*Fracture of alveolus of mandible, unspecified side, initial encounter for closed fracture
*S02.670B <i>*Covered only for procedure code 82947.</i>	*Fracture of alveolus of mandible, unspecified side, initial encounter for open fracture
*S02.671A <i>*Covered only for procedure code 82947.</i>	*Fracture of alveolus of right mandible, initial encounter for closed fracture
*S02.671B <i>*Covered only for procedure code 82947.</i>	*Fracture of alveolus of right mandible, initial encounter for open fracture
*S02.672A <i>*Covered only for procedure code 82947.</i>	*Fracture of alveolus of left mandible, initial encounter for closed fracture
*S02.672B <i>*Covered only for procedure code 82947.</i>	*Fracture of alveolus of left mandible, initial encounter for open fracture
*S02.80XA <i>*Covered only for procedure code 82947.</i>	*Fracture of other specified skull and facial bones, unspecified side, initial encounter for closed fracture
*S02.80XB <i>*Covered only for procedure code 82947.</i>	*Fracture of other specified skull and facial bones, unspecified side, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
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Code	Description
*S02.81XA <i>*Covered only for procedure code 82947.</i>	*Fracture of other specified skull and facial bones, right side, initial encounter for closed fracture
*S02.81XB <i>*Covered only for procedure code 82947.</i>	*Fracture of other specified skull and facial bones, right side, initial encounter for open fracture
*S02.82XA <i>*Covered only for procedure code 82947.</i>	*Fracture of other specified skull and facial bones, left side, initial encounter for closed fracture
*S02.82XB <i>*Covered only for procedure code 82947.</i>	*Fracture of other specified skull and facial bones, left side, initial encounter for open fracture
*S92.812A <i>*Covered only for procedure code 82947.</i>	*Other fracture of left foot, initial encounter for closed fracture
*S92.812B <i>*Covered only for procedure code 82947.</i>	*Other fracture of left foot, initial encounter for open fracture
*S92.819A <i>*Covered only for procedure code 82947.</i>	*Other fracture of unspecified foot, initial encounter for closed fracture
*S92.819B <i>*Covered only for procedure code 82947.</i>	*Other fracture of unspecified foot, initial encounter for open fracture
*S99.001A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.002A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.002B <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of left calcaneus, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.009A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.009B <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.011B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of right calcaneus, initial encounter for open fracture
*S99.011D <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of right calcaneus, subsequent encounter for fracture with routine healing
*S99.012A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.012B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for open fracture
*S99.019A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.019B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.021A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.021B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for open fracture
*S99.022A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.022B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for open fracture
*S99.029A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.029B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.031B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of right calcaneus, initial encounter for open fracture
*S99.031D <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of right calcaneus, subsequent encounter for fracture with routine healing
*S99.032A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.032B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for open fracture
*S99.039A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.039B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.041A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.041B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of right calcaneus, initial encounter for open fracture



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Code	Description
*S99.042A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.042B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of left calcaneus, initial encounter for open fracture
*S99.049A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.049B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of unspecified calcaneus, initial encounter for open fracture
*S99.091A <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of right calcaneus, initial encounter for closed fracture
*S99.091B <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of right calcaneus, initial encounter for open fracture
*S99.092A <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of left calcaneus, initial encounter for closed fracture
*S99.092B <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of left calcaneus, initial encounter for open fracture
*S99.099A <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of unspecified calcaneus, initial encounter for closed fracture
*S99.101A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.102A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of left metatarsal, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.102B <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of left metatarsal, initial encounter for open fracture
*S99.109A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.109B <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.111A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.111B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of right metatarsal, initial encounter for open fracture
*S99.112A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.112B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of left metatarsal, initial encounter for open fracture
*S99.119A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.119B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.121A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.121B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of right metatarsal, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.122A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.122B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of left metatarsal, initial encounter for open fracture
*S99.129A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.129B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.131A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of right metatarsal, initial encounter for closed fracture
*S99.131B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of right metatarsal, initial encounter for open fracture
*S99.132A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.132B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of left metatarsal, initial encounter for open fracture
*S99.139A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.139B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.141A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of right metatarsal, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.141B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of right metatarsal, initial encounter for open fracture
*S99.142A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.142B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of left metatarsal, initial encounter for open fracture
*S99.149A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.149B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.192A <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of left metatarsal, initial encounter for closed fracture
*S99.192B <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of left metatarsal, initial encounter for open fracture
*S99.199A <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of unspecified metatarsal, initial encounter for closed fracture
*S99.199B <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of unspecified metatarsal, initial encounter for open fracture
*S99.201A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.201B <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of phalanx of right toe, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.202A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.202B <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.209A <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.209B <i>*Covered only for procedure code 82947.</i>	*Unspecified physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.211A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.211B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.212A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.212B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.219A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.219B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type I physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.221A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of phalanx of right toe, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.221B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.222A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.222B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.229A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.229B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type II physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.231A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.231B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.232A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.232B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.239A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.239B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type III physeal fracture of phalanx of unspecified toe, initial encounter for open fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.241A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.241B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.242A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.242B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.249A <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture
*S99.249B <i>*Covered only for procedure code 82947.</i>	*Salter-Harris Type IV physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*S99.291A <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of phalanx of right toe, initial encounter for closed fracture
*S99.291B <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of phalanx of right toe, initial encounter for open fracture
*S99.292A <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of phalanx of left toe, initial encounter for closed fracture
*S99.292B <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of phalanx of left toe, initial encounter for open fracture
*S99.299A <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of phalanx of unspecified toe, initial encounter for closed fracture



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*S99.299B <i>*Covered only for procedure code 82947.</i>	*Other physeal fracture of phalanx of unspecified toe, initial encounter for open fracture
*T82.855A <i>*Covered only for procedure code 82947.</i>	*Stenosis of coronary artery stent, initial encounter
*T82.855D <i>*Covered only for procedure code 82947.</i>	*Stenosis of coronary artery stent, subsequent encounter
*T82.855S <i>*Covered only for procedure code 82947.</i>	*Stenosis of coronary artery stent, sequela
*T82.856A <i>*Covered only for procedure code 82947.</i>	*Stenosis of peripheral vascular stent, initial encounter
*T82.856D <i>*Covered only for procedure code 82947.</i>	*Stenosis of peripheral vascular stent, subsequent encounter
*T82.856S <i>*Covered only for procedure code 82947.</i>	*Stenosis of peripheral vascular stent, sequela
*V47.0XXA <i>*Covered only for procedure code 82947.</i>	*Car driver injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.1XXA <i>*Covered only for procedure code 82947.</i>	*Car passenger injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.3XXA <i>*Covered only for procedure code 82947.</i>	*Unspecified car occupant injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.5XXA <i>*Covered only for procedure code 82947.</i>	*Car driver injured in collision with fixed or stationary object in traffic accident, initial encounter



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*V47.6XXA <i>*Covered only for procedure code 82947.</i>	*Car passenger injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.9XXA <i>*Covered only for procedure code 82947.</i>	*Unspecified car occupant injured in collision with fixed or stationary object in traffic accident, initial encounter
*Z05.0 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected infectious condition ruled out
*Z05.2 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected neurological condition ruled out
*Z05.3 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected genetic condition ruled out
*Z05.42 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected metabolic condition ruled out
*Z05.43 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
*Z05.6 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected genitourinary condition ruled out



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*Z05.71 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
*Z05.73 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9 <i>*Covered only for procedure code 82947.</i>	*Observation and evaluation of newborn for unspecified suspected condition ruled out
Z08	Encounter for follow-up examination after completed treatment for malignant neoplasm
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z13.1 <i>Covered only for procedure code 82947.</i>	Encounter for screening for diabetes mellitus
*Z19.1 <i>*Covered only for procedure code 82947.</i>	*Hormone sensitive malignancy status
*Z19.2 <i>*Covered only for procedure code 82947.</i>	*Hormone resistant malignancy status
Z79.02	Long term (current) use of antithrombotics/antiplatelets
Z79.1	Long term (current) use of non-steroidal anti-inflammatories (NSAID)
Z79.3	Long term (current) use of hormonal contraceptives
Z79.4	Long term (current) use of insulin
Z79.51	Long term (current) use of inhaled steroids
Z79.52	Long term (current) use of systemic steroids
*Z79.84	*Long term (current) use of oral hypoglycemic drugs



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
*Z84.82	*Family history of sudden infant death syndrome

Indications

Blood glucose values are often necessary for the management of patients with diabetes mellitus, where hyperglycemia and hypoglycemia are often present. They are also critical in the determination of control of blood glucose levels in patient with impaired fasting glucose (FPG 110-125 mg/dL), patient with insulin resistance syndrome and/or carbohydrate intolerance (excessive rise in glucose following ingestion of glucose/glucose sources of food), in patient with a hypoglycemia disorder such as nesidioblastosis or insulinoma, and in patients with a catabolic or malnutrition state. In addition to conditions listed, glucose testing may be medically necessary in patients with tuberculosis, unexplained chronic or recurrent infections, alcoholism, coronary artery disease (especially in women), or unexplained skin conditions (i.e.: pruritis, skin infections, ulceration and gangrene without cause). Many medical conditions may be a consequence of a sustained elevated or depressed glucose level, including comas, seizures or epilepsy, confusion, abnormal hunger, abnormal weight loss or gain, and loss of sensation. Evaluation of glucose may be indicated in patients on medications known to affect carbohydrate metabolism.

Effective January 1, 2005, the Medicare law expanded coverage to diabetic screening services. Some forms of blood glucose testing covered under this NCD may be covered for screening purposes subject to specified frequencies. See 42 CFR410.18, sec. 90 ch.18 Claims Processing Manual for screening benefit description.

Limitations

Frequent home blood glucose testing by diabetic patients should be encouraged. In stable, non-hospitalized patients unable or unwilling to do home monitoring, it may necessary to measure quantitative blood glucose up to 4 times a year. Depending upon patient's age, type of diabetes, complications, degree of control, and other co-morbid conditions, more frequent testing than 4 times a year may be reasonable and necessary. In patients presenting nonspecific signs, symptoms, or diseases not normally associated with disturbances in glucose metabolism, a single blood glucose test may be medically necessary. Repeat testing may not be indicated unless abnormal results are found or there is a change in clinical condition. If repeat testing is performed, a diagnosis code (e.g., diabetes) should be reported to support medical necessity. However, repeat testing may be indicated where results are normal in patients with conditions of a continuing risk of glucose metabolism abnormality (e.g., monitoring glucocorticoid therapy).

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Documentation Requirements

The ordering physician must include evidence in the patient's clinical record that an evaluation of history and physical preceded the ordering of glucose testing and that manifestations of abnormal glucose levels were present to warrant the testing.

Sources of Information

AACE Guidelines for Management of Diabetes Mellitus, *Endocrine Practice* (1995)1:149-157.

Bower, Bruce F. & Robert E. Moore, *Endocrine Function and Carbohydrates*.

Clinical Laboratory Medicine, K. D. McClatchy, Baltimore/Williams & Wilkins, 1994. pp 321-323.

Report of the Expert Committee on the Diagnosis and Classification of Diabetes Mellitus, *Diabetes Care*, Volume 20, Number 7, July 1997, pages 1183 et seq.

Roberts, H. J., *Difficulté Diagnoses*. W. B. Saunders Co., pp 69-70.



190.21 - Glycated Hemoglobin/Glycated Protein

Description

The management of diabetes mellitus requires regular determinations of blood glucose levels. Glycated hemoglobin/protein levels are used to assess long-term glucose control in diabetes. Alternative names for these tests include glycated or glycosylated hemoglobin or Hgb, hemoglobin glycated or glycosylated protein, and fructosamine.

Glycated hemoglobin (equivalent to hemoglobin A1) refers to total glycosylated hemoglobin present in erythrocytes, usually determined by affinity or ion-exchange chromatographic methodology. Hemoglobin A1c refers to the major component of hemoglobin A1, usually determined by ion-exchange affinity chromatography, immunoassay or agar gel electrophoresis. Fructosamine or glycated protein refers to glycosylated protein present in a serum or plasma sample. Glycated protein refers to measurement of the component of the specific protein that is glycated usually by colorimetric method or affinity chromatography.

Glycated hemoglobin in whole blood assesses glycemic control over a period of 4-8 weeks and appears to be the more appropriate test for monitoring a patient who is capable of maintaining long-term, stable control. Measurement may be medically necessary every 3 months to determine whether a patient's metabolic control has been on average within the target range. More frequent assessments, every 1-2 months, may be appropriate in the patient whose diabetes regimen has been altered to improve control or in whom evidence is present that intercurrent events may have altered a previously satisfactory level of control (for example, post-major surgery or as a result of glucocorticoid therapy). Glycated protein in serum/plasma assesses glycemic control over a period of 1-2 weeks. It may be reasonable and necessary to monitor glycated protein monthly in pregnant diabetic women. Glycated hemoglobin/protein test results may be low, indicating significant, persistent hypoglycemia, in nesidioblastosis or insulinoma, conditions which are accompanied by inappropriate hyperinsulinemia. A below normal test value is helpful in establishing the patient's hypoglycemic state in those conditions.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
82985	Glycated protein
83036	Hemoglobin; glycated

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
D13.7	Benign neoplasm of endocrine pancreas
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye
*E08.3521	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E08.3522	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E08.3523	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E08.3529	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E08.3531	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E08.3532	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E08.3533	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E08.3539	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E08.3541	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E08.3542	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E08.3543	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E08.3549	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E08.3551	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye
*E08.3552	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye
*E08.3553	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral
*E08.3559	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract
*E08.37X1	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye
*E08.37X2	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye
*E08.37X3	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral
*E08.37X9	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis
E08.621	Diabetes mellitus due to underlying condition with foot ulcer
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer
E08.628	Diabetes mellitus due to underlying condition with other skin complications



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E08.630	Diabetes mellitus due to underlying condition with periodontal disease
E08.638	Diabetes mellitus due to underlying condition with other oral complications
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia
E08.69	Diabetes mellitus due to underlying condition with other specified complication
E08.8	Diabetes mellitus due to underlying condition with unspecified complications
E08.9	Diabetes mellitus due to underlying condition without complications
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral

NCD 190.21

***April 2017 Changes
ICD-10-CM Version – Red**



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye

NCD 190.21

***April 2017 Changes
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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E09.3521	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E09.3522	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E09.3523	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E09.3529	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E09.3531	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E09.3532	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E09.3533	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E09.3539	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E09.3541	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E09.3542	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E09.3543	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E09.3549	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E09.3551	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E09.3552	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E09.3553	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E09.3559	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract
*E09.37X1	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E09.37X2	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E09.37X3	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E09.37X9	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication



**Medicare National Coverage Determinations (NCD)
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Code	Description
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer
E09.628	Drug or chemical induced diabetes mellitus with other skin complications
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease
E09.638	Drug or chemical induced diabetes mellitus with other oral complications
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia
E09.69	Drug or chemical induced diabetes mellitus with other specified complication
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications
E09.9	Drug or chemical induced diabetes mellitus without complications
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma
E10.21	Type 1 diabetes mellitus with diabetic nephropathy
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E10.3521	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E10.3522	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E10.3523	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E10.3529	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E10.3531	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E10.3532	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E10.3533	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E10.3539	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E10.3541	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E10.3542	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E10.3543	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral



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Code	Description
*E10.3549	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E10.3551	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E10.3552	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E10.3553	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E10.3559	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E10.36	Type 1 diabetes mellitus with diabetic cataract
*E10.37X1	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E10.37X2	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E10.37X3	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E10.37X9	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E10.59	Type 1 diabetes mellitus with other circulatory complications
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy
E10.620	Type 1 diabetes mellitus with diabetic dermatitis
E10.621	Type 1 diabetes mellitus with foot ulcer
E10.622	Type 1 diabetes mellitus with other skin ulcer
E10.628	Type 1 diabetes mellitus with other skin complications
E10.630	Type 1 diabetes mellitus with periodontal disease
E10.638	Type 1 diabetes mellitus with other oral complications
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma
E10.65	Type 1 diabetes mellitus with hyperglycemia
E10.69	Type 1 diabetes mellitus with other specified complication
E10.8	Type 1 diabetes mellitus with unspecified complications
E10.9	Type 1 diabetes mellitus without complications
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E11.3521	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E11.3522	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E11.3523	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E11.3529	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E11.3531	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E11.3532	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E11.3533	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E11.3539	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E11.3541	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E11.3542	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E11.3543	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E11.3549	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye

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**Medicare National Coverage Determinations (NCD)
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Code	Description
*E11.3551	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E11.3552	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E11.3553	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E11.3559	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E11.36	Type 2 diabetes mellitus with diabetic cataract
*E11.37X1	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E11.37X2	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E11.37X3	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E11.37X9	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.59	Type 2 diabetes mellitus with other circulatory complications
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy



**Medicare National Coverage Determinations (NCD)
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Code	Description
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy
E11.620	Type 2 diabetes mellitus with diabetic dermatitis
E11.621	Type 2 diabetes mellitus with foot ulcer
E11.622	Type 2 diabetes mellitus with other skin ulcer
E11.628	Type 2 diabetes mellitus with other skin complications
E11.630	Type 2 diabetes mellitus with periodontal disease
E11.638	Type 2 diabetes mellitus with other oral complications
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma
E11.65	Type 2 diabetes mellitus with hyperglycemia
E11.69	Type 2 diabetes mellitus with other specified complication
E11.8	Type 2 diabetes mellitus with unspecified complications
E11.9	Type 2 diabetes mellitus without complications
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma
E13.10	Other specified diabetes mellitus with ketoacidosis without coma
E13.11	Other specified diabetes mellitus with ketoacidosis with coma
E13.21	Other specified diabetes mellitus with diabetic nephropathy
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
E13.29	Other specified diabetes mellitus with other diabetic kidney complication
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye

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Code	Description
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye



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Code	Description
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E13.3521	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E13.3522	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E13.3523	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E13.3529	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E13.3531	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E13.3532	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E13.3533	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E13.3539	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E13.3541	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E13.3542	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E13.3543	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral



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Code	Description
*E13.3549	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E13.3551	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E13.3552	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E13.3553	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E13.3559	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E13.36	Other specified diabetes mellitus with diabetic cataract
*E13.37X1	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E13.37X2	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E13.37X3	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E13.37X9	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy
E13.44	Other specified diabetes mellitus with diabetic amyotrophy
E13.49	Other specified diabetes mellitus with other diabetic neurological complication



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Code	Description
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E13.59	Other specified diabetes mellitus with other circulatory complications
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy
E13.618	Other specified diabetes mellitus with other diabetic arthropathy
E13.620	Other specified diabetes mellitus with diabetic dermatitis
E13.621	Other specified diabetes mellitus with foot ulcer
E13.622	Other specified diabetes mellitus with other skin ulcer
E13.628	Other specified diabetes mellitus with other skin complications
E13.630	Other specified diabetes mellitus with periodontal disease
E13.638	Other specified diabetes mellitus with other oral complications
E13.641	Other specified diabetes mellitus with hypoglycemia with coma
E13.649	Other specified diabetes mellitus with hypoglycemia without coma
E13.65	Other specified diabetes mellitus with hyperglycemia
E13.69	Other specified diabetes mellitus with other specified complication
E13.8	Other specified diabetes mellitus with unspecified complications
E13.9	Other specified diabetes mellitus without complications
E15	Nondiabetic hypoglycemic coma
E16.0	Drug-induced hypoglycemia without coma
E16.1	Other hypoglycemia
E16.2	Hypoglycemia, unspecified
E16.3	Increased secretion of glucagon
E16.8	Other specified disorders of pancreatic internal secretion
E16.9	Disorder of pancreatic internal secretion, unspecified
E31.0	Autoimmune polyglandular failure
E31.1	Polyglandular hyperfunction
E31.20	Multiple endocrine neoplasia [MEN] syndrome, unspecified
E31.21	Multiple endocrine neoplasia [MEN] type I
E31.22	Multiple endocrine neoplasia [MEN] type IIA
E31.23	Multiple endocrine neoplasia [MEN] type IIB



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Code	Description
E31.8	Other polyglandular dysfunction
E31.9	Polyglandular dysfunction, unspecified
E74.8	Other specified disorders of carbohydrate metabolism
E79.0	Hyperuricemia without signs of inflammatory arthritis and tophaceous disease
E83.10	Disorder of iron metabolism, unspecified
E83.110	Hereditary hemochromatosis
E83.111	Hemochromatosis due to repeated red blood cell transfusions
E83.118	Other hemochromatosis
E83.119	Hemochromatosis, unspecified
E83.19	Other disorders of iron metabolism
E89.1	Postprocedural hypoinsulinemia
K86.0	Alcohol-induced chronic pancreatitis
K86.1	Other chronic pancreatitis
K91.2	Postsurgical malabsorption, not elsewhere classified
O24.011	Pre-existing type 1 diabetes mellitus, in pregnancy, first trimester
O24.012	Pre-existing type 1 diabetes mellitus, in pregnancy, second trimester
O24.013	Pre-existing type 1 diabetes mellitus, in pregnancy, third trimester
O24.019	Pre-existing type 1 diabetes mellitus, in pregnancy, unspecified trimester
O24.03	Pre-existing type 1 diabetes mellitus, in the puerperium
O24.111	Pre-existing type 2 diabetes mellitus, in pregnancy, first trimester
O24.112	Pre-existing type 2 diabetes mellitus, in pregnancy, second trimester
O24.113	Pre-existing type 2 diabetes mellitus, in pregnancy, third trimester
O24.119	Pre-existing type 2 diabetes mellitus, in pregnancy, unspecified trimester
O24.13	Pre-existing type 2 diabetes mellitus, in the puerperium
O24.311	Unspecified pre-existing diabetes mellitus in pregnancy, first trimester
O24.312	Unspecified pre-existing diabetes mellitus in pregnancy, second trimester
O24.313	Unspecified pre-existing diabetes mellitus in pregnancy, third trimester
O24.319	Unspecified pre-existing diabetes mellitus in pregnancy, unspecified trimester
O24.33	Unspecified pre-existing diabetes mellitus in the puerperium
O24.410	Gestational diabetes mellitus in pregnancy, diet controlled

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Code	Description
O24.414	Gestational diabetes mellitus in pregnancy, insulin controlled
O24.419	Gestational diabetes mellitus in pregnancy, unspecified control
O24.430	Gestational diabetes mellitus in the puerperium, diet controlled
O24.434	Gestational diabetes mellitus in the puerperium, insulin controlled
O24.439	Gestational diabetes mellitus in the puerperium, unspecified control
O24.811	Other pre-existing diabetes mellitus in pregnancy, first trimester
O24.812	Other pre-existing diabetes mellitus in pregnancy, second trimester
O24.813	Other pre-existing diabetes mellitus in pregnancy, third trimester
O24.819	Other pre-existing diabetes mellitus in pregnancy, unspecified trimester
O24.83	Other pre-existing diabetes mellitus in the puerperium
O24.911	Unspecified diabetes mellitus in pregnancy, first trimester
O24.912	Unspecified diabetes mellitus in pregnancy, second trimester
O24.913	Unspecified diabetes mellitus in pregnancy, third trimester
O24.919	Unspecified diabetes mellitus in pregnancy, unspecified trimester
O24.93	Unspecified diabetes mellitus in the puerperium
O99.810	Abnormal glucose complicating pregnancy
O99.815	Abnormal glucose complicating the puerperium
R73.01	Impaired fasting glucose
R73.02	Impaired glucose tolerance (oral)
R73.09	Other abnormal glucose
R73.9	Hyperglycemia, unspecified
R78.71	Abnormal lead level in blood
R78.79	Finding of abnormal level of heavy metals in blood
R78.89	Finding of other specified substances, not normally found in blood
R79.0	Abnormal level of blood mineral
R79.89	Other specified abnormal findings of blood chemistry
R79.9	Abnormal finding of blood chemistry, unspecified
T38.3X1A	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, accidental (unintentional), initial encounter
T38.3X2A	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, intentional self-harm, initial encounter

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Code	Description
T38.3X3A	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, assault, initial encounter
T38.3X4A	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, undetermined, initial encounter
Z79.3	Long term (current) use of hormonal contraceptives
Z79.4	Long term (current) use of insulin
*Z79.84	*Long term (current) use of oral hypoglycemic drugs
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
*Z84.82	*Family history of sudden infant death syndrome
Z86.2	Personal history of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
Z86.31	Personal history of diabetic foot ulcer
Z86.32	Personal history of gestational diabetes
Z86.39	Personal history of other endocrine, nutritional and metabolic disease

Indications

Glycated hemoglobin/protein testing is accepted as medically necessary for management and control of diabetes and to assess hyperglycemia, a history of hyperglycemia or dangerous hypoglycemia. Glycated protein testing may be used in place of glycated hemoglobin in the management of diabetic patients, and is useful in patients with abnormalities of erythrocytes such as hemolytic anemia or hemoglobinopathies.

Limitations

It is not reasonable and necessary to perform glycated hemoglobin tests more often than every three months on a controlled diabetic patient to determine if the patient’s metabolic control has been on average within the target range. It is not reasonable and necessary for these tests to be performed more frequently than once a month for diabetic pregnant women. Testing for uncontrolled type one or two diabetes mellitus may require testing more than four times a year. The above Description Section provides the clinical basis for those situations in which testing more frequently than four times per annum is indicated, and medical necessity documentation must support such testing in excess of the above guidelines.

Many analytical methods of glycated hemoglobin show interference from elevated levels of fetal hemoglobin or by variant hemoglobin molecules. When the glycated hemoglobin assay is initially performed in these patients, the laboratory may inform the ordering physician of a possible analytical interference. Alternative testing, including glycated protein, for example, fructosamine, may be indicated for monitoring the degree of glycemic control. It is therefore



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conceivable that a patient will have both a glycated hemoglobin and glycated protein ordered on the same day. This should be limited to the initial assay of glycated hemoglobin, with subsequent exclusive use of glycated protein. These tests are not considered to be medically necessary for the diagnosis of diabetes.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Bower, Bruce F. and Robert Moore, Endocrine Function and Carbohydrates. Clinical Laboratory Medicine, Kenneth D. McClatchy, editor. Baltimore/Williams & Wilkins, 1994. pp. 321-323.

Tests of Glycemia in Diabetes. Diabetes Care. 1/98, 21:Suppl. 1:S69-S71. American Association of Clinical Endocrinologists Guidelines for Management of Diabetes Mellitus

Dons, Robert F, Endocrine & Metabolic Testing Manual, 3rd Edition. Expert Committee on Glycated Hgb. Diabetes Care, 11/84, 7:6:602-606. Evaluation of Glycated Hgb in Diabetes, Diabetes. 7/91 30:613-617.

Foster, Daniel W., Diabetes Mellitus, Harrison's Principles of Internal Medicine. 13th ed., Kurt J. Isselbacher et al. Editors, New York/McGraw-Hill, 1994, pg. 1990.

Management of Diabetes in Older Patients. Practical Therapeutics. 1991, Drugs 41:4:548-565.

Koch, D. D, Fructosamine: How Useful Is It? Laboratory Medicine, V. 21, N. 8, August 1990, pp. 497-503.

Report of the Expert Committee on the Diagnosis and Classification of Diabetes Mellitus, Diabetes Care, Volume 20, Number 7, July 1997, pp. 1183 et seq.

Sacks, David B., Carbohydrates. In Tietz Textbook of Clinical Chemistry, 2nd Ed., Carl A. Burtis and Edward R. Ashwood, editors. Philadelphia, W.B. Saunders Co., 1994. pp. 980-988.

Tests of Glycemia in Diabetes, American Diabetes Association, Diabetes Care, Volume 20, Supplement I, January 1997, pp. 518-520.



190.22 - Thyroid Testing

Description

Thyroid function studies are used to delineate the presence or absence of hormonal abnormalities of the thyroid and pituitary glands. These abnormalities may be either primary or secondary and often but not always accompany clinically defined signs and symptoms indicative of thyroid dysfunction.

Laboratory evaluation of thyroid function has become more scientifically defined. Tests can be done with increased specificity, thereby reducing the number of tests needed to diagnose and follow treatment of most thyroid disease. Measurements of serum sensitive thyroid-stimulating hormone (TSH) levels, complemented by determination of thyroid hormone levels [free thyroxine (fT-4) or total thyroxine (T4) with Triiodothyronine (T3) uptake] are used for diagnosis and follow-up of patients with thyroid disorders. Additional tests may be necessary to evaluate certain complex diagnostic problems or on hospitalized patients, where many circumstances can skew tests results. When a test for total thyroxine (total T4 or T4 radioimmunoassay) or T3 uptake is performed, calculation of the free thyroxine index (FTI) is useful to correct for abnormal results for either total T4 or T3 uptake due to protein binding effects.

HCPCS Codes (Alphanumeric, CPT[®] AMA)

Code	Description
84436	Thyroxine; total
84439	Thyroxine; free
84443	Thyroid stimulating hormone (TSH)
84479	Thyroid hormone (T3 or T4) uptake or thyroid hormone binding ratio (THBR)

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A18.81	Tuberculosis of thyroid gland
C56.1	Malignant neoplasm of right ovary
C56.2	Malignant neoplasm of left ovary
C56.9	Malignant neoplasm of unspecified ovary
C73	Malignant neoplasm of thyroid gland
C75.8	Malignant neoplasm with pluriglandular involvement, unspecified

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Code	Description
C79.89	Secondary malignant neoplasm of other specified sites
C79.9	Secondary malignant neoplasm of unspecified site
D09.3	Carcinoma in situ of thyroid and other endocrine glands
D09.8	Carcinoma in situ of other specified sites
D27.0	Benign neoplasm of right ovary
D27.1	Benign neoplasm of left ovary
D27.9	Benign neoplasm of unspecified ovary
D34	Benign neoplasm of thyroid gland
D35.2	Benign neoplasm of pituitary gland
D35.3	Benign neoplasm of craniopharyngeal duct
D44.0	Neoplasm of uncertain behavior of thyroid gland
D44.2	Neoplasm of uncertain behavior of parathyroid gland
D44.9	Neoplasm of uncertain behavior of unspecified endocrine gland
D49.7	Neoplasm of unspecified behavior of endocrine glands and other parts of nervous system
D51.0	Vitamin B12 deficiency anemia due to intrinsic factor deficiency
D53.9	Nutritional anemia, unspecified
D59.0	Drug-induced autoimmune hemolytic anemia
D59.1	Other autoimmune hemolytic anemias
D64.89	Other specified anemias
D64.9	Anemia, unspecified
D89.82	Autoimmune lymphoproliferative syndrome [ALPS]
D89.89	Other specified disorders involving the immune mechanism, not elsewhere classified
E00.0	Congenital iodine-deficiency syndrome, neurological type
E00.1	Congenital iodine-deficiency syndrome, myxedematous type
E00.2	Congenital iodine-deficiency syndrome, mixed type
E00.9	Congenital iodine-deficiency syndrome, unspecified
E01.0	Iodine-deficiency related diffuse (endemic) goiter
E01.1	Iodine-deficiency related multinodular (endemic) goiter
E01.2	Iodine-deficiency related (endemic) goiter, unspecified
E01.8	Other iodine-deficiency related thyroid disorders and allied conditions



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Code	Description
E02	Subclinical iodine-deficiency hypothyroidism
E03.0	Congenital hypothyroidism with diffuse goiter
E03.1	Congenital hypothyroidism without goiter
E03.2	Hypothyroidism due to medicaments and other exogenous substances
E03.3	Postinfectious hypothyroidism
E03.4	Atrophy of thyroid (acquired)
E03.5	Myxedema coma
E03.8	Other specified hypothyroidism
E03.9	Hypothyroidism, unspecified
E04.0	Nontoxic diffuse goiter
E04.1	Nontoxic single thyroid nodule
E04.2	Nontoxic multinodular goiter
E04.8	Other specified nontoxic goiter
E04.9	Nontoxic goiter, unspecified
E05.00	Thyrotoxicosis with diffuse goiter without thyrotoxic crisis or storm
E05.01	Thyrotoxicosis with diffuse goiter with thyrotoxic crisis or storm
E05.10	Thyrotoxicosis with toxic single thyroid nodule without thyrotoxic crisis or storm
E05.11	Thyrotoxicosis with toxic single thyroid nodule with thyrotoxic crisis or storm
E05.20	Thyrotoxicosis with toxic multinodular goiter without thyrotoxic crisis or storm
E05.21	Thyrotoxicosis with toxic multinodular goiter with thyrotoxic crisis or storm
E05.30	Thyrotoxicosis from ectopic thyroid tissue without thyrotoxic crisis or storm
E05.31	Thyrotoxicosis from ectopic thyroid tissue with thyrotoxic crisis or storm
E05.40	Thyrotoxicosis factitia without thyrotoxic crisis or storm
E05.41	Thyrotoxicosis factitia with thyrotoxic crisis or storm
E05.80	Other thyrotoxicosis without thyrotoxic crisis or storm
E05.81	Other thyrotoxicosis with thyrotoxic crisis or storm
E05.90	Thyrotoxicosis, unspecified without thyrotoxic crisis or storm
E05.91	Thyrotoxicosis, unspecified with thyrotoxic crisis or storm
E06.0	Acute thyroiditis
E06.1	Subacute thyroiditis



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Code	Description
E06.2	Chronic thyroiditis with transient thyrotoxicosis
E06.3	Autoimmune thyroiditis
E06.4	Drug-induced thyroiditis
E06.5	Other chronic thyroiditis
E06.9	Thyroiditis, unspecified
E07.0	Hypersecretion of calcitonin
E07.1	Dyshormogenetic goiter
E07.89	Other specified disorders of thyroid
E07.9	Disorder of thyroid, unspecified
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye

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Code	Description
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye



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Code	Description
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye
*E08.3521	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E08.3522	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E08.3523	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E08.3529	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E08.3531	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E08.3532	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E08.3533	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E08.3539	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E08.3541	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E08.3542	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E08.3543	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E08.3549	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye



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Code	Description
*E08.3551	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye
*E08.3552	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye
*E08.3553	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral
*E08.3559	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract
*E08.37X1	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye
*E08.37X2	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye
*E08.37X3	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral
*E08.37X9	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene



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Code	Description
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis
E08.621	Diabetes mellitus due to underlying condition with foot ulcer
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer
E08.628	Diabetes mellitus due to underlying condition with other skin complications
E08.630	Diabetes mellitus due to underlying condition with periodontal disease
E08.638	Diabetes mellitus due to underlying condition with other oral complications
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia
E08.69	Diabetes mellitus due to underlying condition with other specified complication
E08.8	Diabetes mellitus due to underlying condition with unspecified complications
E08.9	Diabetes mellitus due to underlying condition without complications
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye



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Code	Description
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral

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Code	Description
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E09.3521	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E09.3522	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E09.3523	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E09.3529	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E09.3531	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E09.3532	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E09.3533	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E09.3539	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E09.3541	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye

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Code	Description
*E09.3542	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E09.3543	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E09.3549	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E09.3551	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E09.3552	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E09.3553	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E09.3559	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract
*E09.37X1	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E09.37X2	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E09.37X3	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E09.37X9	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer
E09.628	Drug or chemical induced diabetes mellitus with other skin complications
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease
E09.638	Drug or chemical induced diabetes mellitus with other oral complications
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia
E09.69	Drug or chemical induced diabetes mellitus with other specified complication
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications
E09.9	Drug or chemical induced diabetes mellitus without complications
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma
E10.21	Type 1 diabetes mellitus with diabetic nephropathy
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease

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***April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E10.3521	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E10.3522	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E10.3523	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E10.3529	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E10.3531	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E10.3532	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E10.3533	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E10.3539	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E10.3541	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E10.3542	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E10.3543	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E10.3549	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E10.3551	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E10.3552	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E10.3553	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E10.3559	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E10.36	Type 1 diabetes mellitus with diabetic cataract
*E10.37X1	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E10.37X2	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E10.37X3	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E10.37X9	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication

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*April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.59	Type 1 diabetes mellitus with other circulatory complications
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy
E10.620	Type 1 diabetes mellitus with diabetic dermatitis
E10.621	Type 1 diabetes mellitus with foot ulcer
E10.622	Type 1 diabetes mellitus with other skin ulcer
E10.628	Type 1 diabetes mellitus with other skin complications
E10.630	Type 1 diabetes mellitus with periodontal disease
E10.638	Type 1 diabetes mellitus with other oral complications
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma
E10.65	Type 1 diabetes mellitus with hyperglycemia
E10.69	Type 1 diabetes mellitus with other specified complication
E10.8	Type 1 diabetes mellitus with unspecified complications
E10.9	Type 1 diabetes mellitus without complications
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E11.3521	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E11.3522	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E11.3523	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E11.3529	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E11.3531	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E11.3532	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E11.3533	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E11.3539	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E11.3541	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E11.3542	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E11.3543	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E11.3549	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E11.3551	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E11.3552	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E11.3553	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E11.3559	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E11.36	Type 2 diabetes mellitus with diabetic cataract
*E11.37X1	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E11.37X2	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E11.37X3	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E11.37X9	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.59	Type 2 diabetes mellitus with other circulatory complications
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy
E11.620	Type 2 diabetes mellitus with diabetic dermatitis
E11.621	Type 2 diabetes mellitus with foot ulcer
E11.622	Type 2 diabetes mellitus with other skin ulcer
E11.628	Type 2 diabetes mellitus with other skin complications
E11.630	Type 2 diabetes mellitus with periodontal disease
E11.638	Type 2 diabetes mellitus with other oral complications
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma
E11.65	Type 2 diabetes mellitus with hyperglycemia
E11.69	Type 2 diabetes mellitus with other specified complication
E11.8	Type 2 diabetes mellitus with unspecified complications
E11.9	Type 2 diabetes mellitus without complications
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma
E13.10	Other specified diabetes mellitus with ketoacidosis without coma
E13.11	Other specified diabetes mellitus with ketoacidosis with coma
E13.21	Other specified diabetes mellitus with diabetic nephropathy
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
E13.29	Other specified diabetes mellitus with other diabetic kidney complication
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema

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Fu Associates, Ltd.

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E13.3521	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E13.3522	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E13.3523	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E13.3529	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E13.3531	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E13.3532	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E13.3533	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E13.3539	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E13.3541	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E13.3542	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E13.3543	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E13.3549	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E13.3551	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E13.3552	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E13.3553	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E13.3559	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E13.36	Other specified diabetes mellitus with diabetic cataract
*E13.37X1	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E13.37X2	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E13.37X3	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E13.37X9	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy
E13.44	Other specified diabetes mellitus with diabetic amyotrophy
E13.49	Other specified diabetes mellitus with other diabetic neurological complication
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E13.59	Other specified diabetes mellitus with other circulatory complications
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy
E13.618	Other specified diabetes mellitus with other diabetic arthropathy
E13.620	Other specified diabetes mellitus with diabetic dermatitis
E13.621	Other specified diabetes mellitus with foot ulcer
E13.622	Other specified diabetes mellitus with other skin ulcer
E13.628	Other specified diabetes mellitus with other skin complications
E13.630	Other specified diabetes mellitus with periodontal disease
E13.638	Other specified diabetes mellitus with other oral complications
E13.641	Other specified diabetes mellitus with hypoglycemia with coma
E13.649	Other specified diabetes mellitus with hypoglycemia without coma
E13.65	Other specified diabetes mellitus with hyperglycemia
E13.69	Other specified diabetes mellitus with other specified complication
E13.8	Other specified diabetes mellitus with unspecified complications
E13.9	Other specified diabetes mellitus without complications
E20.0	Idiopathic hypoparathyroidism
E20.1	Pseudohypoparathyroidism
E20.8	Other hypoparathyroidism
E20.9	Hypoparathyroidism, unspecified
E22.1	Hyperprolactinemia
E22.8	Other hyperfunction of pituitary gland



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E22.9	Hyperfunction of pituitary gland, unspecified
E23.0	Hypopituitarism
E23.1	Drug-induced hypopituitarism
E23.6	Other disorders of pituitary gland
E25.0	Congenital adrenogenital disorders associated with enzyme deficiency
E25.8	Other adrenogenital disorders
E25.9	Adrenogenital disorder, unspecified
E27.1	Primary adrenocortical insufficiency
E27.2	Addisonian crisis
E27.3	Drug-induced adrenocortical insufficiency
E27.40	Unspecified adrenocortical insufficiency
E27.49	Other adrenocortical insufficiency
E28.310	Symptomatic premature menopause
E28.319	Asymptomatic premature menopause
E28.39	Other primary ovarian failure
E29.1	Testicular hypofunction
E31.0	Autoimmune polyglandular failure
E31.1	Polyglandular hyperfunction
E31.20	Multiple endocrine neoplasia [MEN] syndrome, unspecified
E31.21	Multiple endocrine neoplasia [MEN] type I
E31.22	Multiple endocrine neoplasia [MEN] type IIA
E31.23	Multiple endocrine neoplasia [MEN] type IIB
E31.8	Other polyglandular dysfunction
E31.9	Polyglandular dysfunction, unspecified
E35	Disorders of endocrine glands in diseases classified elsewhere
E43	Unspecified severe protein-calorie malnutrition
E44.0	Moderate protein-calorie malnutrition
E44.1	Mild protein-calorie malnutrition
E45	Retarded development following protein-calorie malnutrition
E46	Unspecified protein-calorie malnutrition

NCD 190.22

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Fu Associates, Ltd.

April 2017



**Medicare National Coverage Determinations (NCD)
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Code	Description
E53.0	Riboflavin deficiency
E64.0	Sequelae of protein-calorie malnutrition
E67.1	Hypercarotinemias
E78.00	Pure hypercholesterolemia, unspecified
E78.01	Familial hypercholesterolemia
E78.2	Mixed hyperlipidemia
E78.4	Other hyperlipidemia
E78.5	Hyperlipidemia, unspecified
E83.50	Unspecified disorder of calcium metabolism
E83.51	Hypocalcemia
E83.52	Hypercalcemia
E83.59	Other disorders of calcium metabolism
E83.81	Hungry bone syndrome
E87.0	Hyperosmolality and hypernatremia
E87.1	Hypo-osmolality and hyponatremia
E89.0	Postprocedural hypothyroidism
E89.2	Postprocedural hypoparathyroidism
E89.3	Postprocedural hypopituitarism
E89.6	Postprocedural adrenocortical (-medullary) hypofunction
F03.90	Unspecified dementia without behavioral disturbance
F05	Delirium due to known physiological condition
F06.0	Psychotic disorder with hallucinations due to known physiological condition
F06.1	Catatonic disorder due to known physiological condition
F06.2	Psychotic disorder with delusions due to known physiological condition
F06.30	Mood disorder due to known physiological condition, unspecified
F06.31	Mood disorder due to known physiological condition with depressive features
F06.32	Mood disorder due to known physiological condition with major depressive-like episode
F06.33	Mood disorder due to known physiological condition with manic features
F06.34	Mood disorder due to known physiological condition with mixed features
F06.4	Anxiety disorder due to known physiological condition

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Code	Description
F06.8	Other specified mental disorders due to known physiological condition
F07.0	Personality change due to known physiological condition
F22	Delusional disorders
F23	Brief psychotic disorder
F30.10	Manic episode without psychotic symptoms, unspecified
F30.11	Manic episode without psychotic symptoms, mild
F30.12	Manic episode without psychotic symptoms, moderate
F30.13	Manic episode, severe, without psychotic symptoms
F30.2	Manic episode, severe with psychotic symptoms
F30.3	Manic episode in partial remission
F30.4	Manic episode in full remission
F30.8	Other manic episodes
F30.9	Manic episode, unspecified
F31.0	Bipolar disorder, current episode hypomanic
F31.10	Bipolar disorder, current episode manic without psychotic features, unspecified
F31.11	Bipolar disorder, current episode manic without psychotic features, mild
F31.12	Bipolar disorder, current episode manic without psychotic features, moderate
F31.13	Bipolar disorder, current episode manic without psychotic features, severe
F31.2	Bipolar disorder, current episode manic severe with psychotic features
F31.30	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified
F31.31	Bipolar disorder, current episode depressed, mild
F31.32	Bipolar disorder, current episode depressed, moderate
F31.4	Bipolar disorder, current episode depressed, severe, without psychotic features
F31.5	Bipolar disorder, current episode depressed, severe, with psychotic features
F31.60	Bipolar disorder, current episode mixed, unspecified
F31.61	Bipolar disorder, current episode mixed, mild
F31.62	Bipolar disorder, current episode mixed, moderate
F31.63	Bipolar disorder, current episode mixed, severe, without psychotic features
F31.64	Bipolar disorder, current episode mixed, severe, with psychotic features
F31.70	Bipolar disorder, currently in remission, most recent episode unspecified

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Code	Description
F31.71	Bipolar disorder, in partial remission, most recent episode hypomanic
F31.72	Bipolar disorder, in full remission, most recent episode hypomanic
F31.73	Bipolar disorder, in partial remission, most recent episode manic
F31.74	Bipolar disorder, in full remission, most recent episode manic
F31.75	Bipolar disorder, in partial remission, most recent episode depressed
F31.76	Bipolar disorder, in full remission, most recent episode depressed
F31.77	Bipolar disorder, in partial remission, most recent episode mixed
F31.78	Bipolar disorder, in full remission, most recent episode mixed
F31.81	Bipolar II disorder
F31.89	Other bipolar disorder
F31.9	Bipolar disorder, unspecified
F32.0	Major depressive disorder, single episode, mild
F32.1	Major depressive disorder, single episode, moderate
F32.2	Major depressive disorder, single episode, severe without psychotic features
F32.3	Major depressive disorder, single episode, severe with psychotic features
F32.4	Major depressive disorder, single episode, in partial remission
F32.5	Major depressive disorder, single episode, in full remission
*F32.81	*Premenstrual dysphoric disorder
F32.89	Other specified depressive episodes
F32.9	Major depressive disorder, single episode, unspecified
F33.0	Major depressive disorder, recurrent, mild
F33.1	Major depressive disorder, recurrent, moderate
F33.2	Major depressive disorder, recurrent severe without psychotic features
F33.3	Major depressive disorder, recurrent, severe with psychotic symptoms
F33.40	Major depressive disorder, recurrent, in remission, unspecified
F33.41	Major depressive disorder, recurrent, in partial remission
F33.42	Major depressive disorder, recurrent, in full remission
F33.8	Other recurrent depressive disorders
F33.9	Major depressive disorder, recurrent, unspecified
F34.81	Disruptive mood dysregulation disorder



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Code	Description
F34.89	Other specified persistent mood disorders
F34.9	Persistent mood [affective] disorder, unspecified
F39	Unspecified mood [affective] disorder
F41.0	Panic disorder [episodic paroxysmal anxiety] without agoraphobia
F41.1	Generalized anxiety disorder
F41.3	Other mixed anxiety disorders
F41.8	Other specified anxiety disorders
F41.9	Anxiety disorder, unspecified
F53	Puerperal psychosis
F63.3	Trichotillomania
G25.0	Essential tremor
G25.1	Drug-induced tremor
G25.2	Other specified forms of tremor
G25.70	Drug induced movement disorder, unspecified
G25.71	Drug induced akathisia
G25.79	Other drug induced movement disorders
G25.89	Other specified extrapyramidal and movement disorders
G25.9	Extrapyramidal and movement disorder, unspecified
G26	Extrapyramidal and movement disorders in diseases classified elsewhere
G30.0	Alzheimer's disease with early onset
G30.1	Alzheimer's disease with late onset
G30.8	Other Alzheimer's disease
G30.9	Alzheimer's disease, unspecified
G31.01	Pick's disease
G31.09	Other frontotemporal dementia
G31.1	Senile degeneration of brain, not elsewhere classified
G31.84	Mild cognitive impairment, so stated
G47.00	Insomnia, unspecified
G47.01	Insomnia due to medical condition
G47.09	Other insomnia

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Code	Description
G47.30	Sleep apnea, unspecified
G47.39	Other sleep apnea
G47.62	Sleep related leg cramps
G47.8	Other sleep disorders
G47.9	Sleep disorder, unspecified
G56.00	Carpal tunnel syndrome, unspecified upper limb
G56.01	Carpal tunnel syndrome, right upper limb
G56.02	Carpal tunnel syndrome, left upper limb
*G56.03	*Carpal tunnel syndrome, bilateral upper limbs
*G56.13	*Other lesions of median nerve, bilateral upper limbs
*G56.23	*Lesion of ulnar nerve, bilateral upper limbs
*G56.33	*Lesion of radial nerve, bilateral upper limbs
*G56.43	*Causalgia of bilateral upper limbs
*G56.83	*Other specified mononeuropathies of bilateral upper limbs
*G56.93	*Unspecified mononeuropathy of bilateral upper limbs
*G57.83	*Other specified mononeuropathies of bilateral lower limbs
*G57.93	*Unspecified mononeuropathy of bilateral lower limbs
G60.9	Hereditary and idiopathic neuropathy, unspecified
*G61.82	*Multifocal motor neuropathy
G71.9	Primary disorder of muscle, unspecified
G72.9	Myopathy, unspecified
G73.3	Myasthenic syndromes in other diseases classified elsewhere
G73.7	Myopathy in diseases classified elsewhere
G93.3	Postviral fatigue syndrome
H02.531	Eyelid retraction right upper eyelid
H02.532	Eyelid retraction right lower eyelid
H02.533	Eyelid retraction right eye, unspecified eyelid
H02.534	Eyelid retraction left upper eyelid
H02.535	Eyelid retraction left lower eyelid
H02.536	Eyelid retraction left eye, unspecified eyelid



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Code	Description
H02.539	Eyelid retraction unspecified eye, unspecified lid
H02.841	Edema of right upper eyelid
H02.842	Edema of right lower eyelid
H02.843	Edema of right eye, unspecified eyelid
H02.844	Edema of left upper eyelid
H02.845	Edema of left lower eyelid
H02.846	Edema of left eye, unspecified eyelid
H02.849	Edema of unspecified eye, unspecified eyelid
H05.20	Unspecified exophthalmos
H05.221	Edema of right orbit
H05.222	Edema of left orbit
H05.223	Edema of bilateral orbit
H05.229	Edema of unspecified orbit
H05.241	Constant exophthalmos, right eye
H05.242	Constant exophthalmos, left eye
H05.243	Constant exophthalmos, bilateral
H05.249	Constant exophthalmos, unspecified eye
H05.251	Intermittent exophthalmos, right eye
H05.252	Intermittent exophthalmos, left eye
H05.253	Intermittent exophthalmos, bilateral
H05.259	Intermittent exophthalmos, unspecified eye
H05.89	Other disorders of orbit
H11.421	Conjunctival edema, right eye
H11.422	Conjunctival edema, left eye
H11.423	Conjunctival edema, bilateral
H11.429	Conjunctival edema, unspecified eye
H11.431	Conjunctival hyperemia, right eye
H11.432	Conjunctival hyperemia, left eye
H11.433	Conjunctival hyperemia, bilateral
H11.439	Conjunctival hyperemia, unspecified eye



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Code	Description
H49.00	Third [oculomotor] nerve palsy, unspecified eye
H49.01	Third [oculomotor] nerve palsy, right eye
H49.02	Third [oculomotor] nerve palsy, left eye
H49.03	Third [oculomotor] nerve palsy, bilateral
H49.10	Fourth [trochlear] nerve palsy, unspecified eye
H49.11	Fourth [trochlear] nerve palsy, right eye
H49.12	Fourth [trochlear] nerve palsy, left eye
H49.13	Fourth [trochlear] nerve palsy, bilateral
H49.20	Sixth [abducent] nerve palsy, unspecified eye
H49.21	Sixth [abducent] nerve palsy, right eye
H49.22	Sixth [abducent] nerve palsy, left eye
H49.23	Sixth [abducent] nerve palsy, bilateral
H49.40	Progressive external ophthalmoplegia, unspecified eye
H49.41	Progressive external ophthalmoplegia, right eye
H49.42	Progressive external ophthalmoplegia, left eye
H49.43	Progressive external ophthalmoplegia, bilateral
H49.881	Other paralytic strabismus, right eye
H49.882	Other paralytic strabismus, left eye
H49.883	Other paralytic strabismus, bilateral
H49.889	Other paralytic strabismus, unspecified eye
H49.9	Unspecified paralytic strabismus
H53.2	Diplopia
I10	Essential (primary) hypertension
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease

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Code	Description
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease
*I16.0	*Hypertensive urgency
*I16.1	*Hypertensive emergency
*I16.9	*Hypertensive crisis, unspecified
I31.3	Pericardial effusion (noninflammatory)
I31.9	Disease of pericardium, unspecified
I43	Cardiomyopathy in diseases classified elsewhere
I47.1	Supraventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation
I48.2	Chronic atrial fibrillation
I48.91	Unspecified atrial fibrillation
I49.2	Junctional premature depolarization
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
I50.1	Left ventricular failure
I50.20	Unspecified systolic (congestive) heart failure
I50.21	Acute systolic (congestive) heart failure
I50.22	Chronic systolic (congestive) heart failure
I50.23	Acute on chronic systolic (congestive) heart failure
I50.30	Unspecified diastolic (congestive) heart failure
I50.31	Acute diastolic (congestive) heart failure
I50.32	Chronic diastolic (congestive) heart failure
I50.33	Acute on chronic diastolic (congestive) heart failure
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure

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Code	Description
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.9	Heart failure, unspecified
I51.7	Cardiomegaly
J91.8	Pleural effusion in other conditions classified elsewhere
J96.00	Acute respiratory failure, unspecified whether with hypoxia or hypercapnia
J96.01	Acute respiratory failure with hypoxia
J96.02	Acute respiratory failure with hypercapnia
J96.90	Respiratory failure, unspecified, unspecified whether with hypoxia or hypercapnia
J96.91	Respiratory failure, unspecified with hypoxia
J96.92	Respiratory failure, unspecified with hypercapnia
K14.8	Other diseases of tongue
K52.21	Food protein-induced enterocolitis syndrome
K52.22	Food protein-induced enteropathy
K52.29	Other allergic and dietetic gastroenteritis and colitis
K52.89	Other specified noninfective gastroenteritis and colitis
K56.0	Paralytic ileus
K56.7	Ileus, unspecified
*K58.1	*Irritable bowel syndrome with constipation
*K58.2	*Mixed irritable bowel syndrome
*K58.8	*Other irritable bowel syndrome
K59.00	Constipation, unspecified
K59.01	Slow transit constipation
K59.02	Outlet dysfunction constipation
*K59.04	*Chronic idiopathic constipation
K59.09	Other constipation
K59.39	Other megacolon
L11.0	Acquired keratosis follicularis
L29.9	Pruritus, unspecified
L60.1	Onycholysis
L60.2	Onychogryphosis

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Code	Description
L60.3	Nail dystrophy
L60.4	Beau's lines
L60.5	Yellow nail syndrome
L60.8	Other nail disorders
L62	Nail disorders in diseases classified elsewhere
L63.0	Alopecia (capitis) totalis
L63.1	Alopecia universalis
L63.2	Ophiasis
L63.8	Other alopecia areata
L63.9	Alopecia areata, unspecified
L64.0	Drug-induced androgenic alopecia
L64.8	Other androgenic alopecia
L64.9	Androgenic alopecia, unspecified
L65.0	Telogen effluvium
L65.1	Anagen effluvium
L65.2	Alopecia mucinosa
L65.8	Other specified nonscarring hair loss
L65.9	Nonscarring hair loss, unspecified
L66.0	Pseudopelade
L66.2	Folliculitis decalvans
L66.8	Other cicatricial alopecia
L66.9	Cicatricial alopecia, unspecified
L80	Vitiligo
L85.0	Acquired ichthyosis
L85.1	Acquired keratosis [keratoderma] palmaris et plantaris
L85.2	Keratosis punctata (palmaris et plantaris)
L86	Keratoderma in diseases classified elsewhere
L87.0	Keratosis follicularis et parafollicularis in cutem penetrans
L87.2	Elastosis perforans serpiginosa
*M04.1	*Periodic fever syndromes



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Code	Description
*M04.2	*Cryopyrin-associated periodic syndromes
*M04.8	*Other autoinflammatory syndromes
*M04.9	*Autoinflammatory syndrome, unspecified
M32.0	Drug-induced systemic lupus erythematosus
M32.10	Systemic lupus erythematosus, organ or system involvement unspecified
M32.11	Endocarditis in systemic lupus erythematosus
M32.12	Pericarditis in systemic lupus erythematosus
M32.13	Lung involvement in systemic lupus erythematosus
M32.14	Glomerular disease in systemic lupus erythematosus
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus
M32.19	Other organ or system involvement in systemic lupus erythematosus
M32.8	Other forms of systemic lupus erythematosus
M32.9	Systemic lupus erythematosus, unspecified
M33.00	Juvenile dermatomyositis, organ involvement unspecified
M33.01	Juvenile dermatomyositis with respiratory involvement
M33.02	Juvenile dermatomyositis with myopathy
M33.09	Juvenile dermatomyositis with other organ involvement
M33.10	Other dermatomyositis, organ involvement unspecified
M33.11	Other dermatomyositis with respiratory involvement
M33.12	Other dermatomyositis with myopathy
M33.19	Other dermatomyositis with other organ involvement
M33.20	Polymyositis, organ involvement unspecified
M33.21	Polymyositis with respiratory involvement
M33.22	Polymyositis with myopathy
M33.29	Polymyositis with other organ involvement
M33.90	Dermatomyositis, unspecified, organ involvement unspecified
M33.91	Dermatomyositis, unspecified with respiratory involvement
M33.92	Dermatomyositis, unspecified with myopathy
M33.99	Dermatomyositis, unspecified with other organ involvement
M34.0	Progressive systemic sclerosis

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Code	Description
M34.1	CR(E)ST syndrome
M34.2	Systemic sclerosis induced by drug and chemical
M34.81	Systemic sclerosis with lung involvement
M34.82	Systemic sclerosis with myopathy
M34.83	Systemic sclerosis with polyneuropathy
M34.89	Other systemic sclerosis
M34.9	Systemic sclerosis, unspecified
M35.00	Sicca syndrome, unspecified
M35.01	Sicca syndrome with keratoconjunctivitis
M35.02	Sicca syndrome with lung involvement
M35.03	Sicca syndrome with myopathy
M35.04	Sicca syndrome with tubulo-interstitial nephropathy
M35.09	Sicca syndrome with other organ involvement
M35.1	Other overlap syndromes
M35.5	Multifocal fibrosclerosis
M35.8	Other specified systemic involvement of connective tissue
M35.9	Systemic involvement of connective tissue, unspecified
M36.0	Dermato(poly)myositis in neoplastic disease
M36.8	Systemic disorders of connective tissue in other diseases classified elsewhere
M60.80	Other myositis, unspecified site
M60.811	Other myositis, right shoulder
M60.812	Other myositis, left shoulder
M60.819	Other myositis, unspecified shoulder
M60.821	Other myositis, right upper arm
M60.822	Other myositis, left upper arm
M60.829	Other myositis, unspecified upper arm
M60.831	Other myositis, right forearm
M60.832	Other myositis, left forearm
M60.839	Other myositis, unspecified forearm
M60.841	Other myositis, right hand

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Code	Description
M60.842	Other myositis, left hand
M60.849	Other myositis, unspecified hand
M60.851	Other myositis, right thigh
M60.852	Other myositis, left thigh
M60.859	Other myositis, unspecified thigh
M60.861	Other myositis, right lower leg
M60.862	Other myositis, left lower leg
M60.869	Other myositis, unspecified lower leg
M60.871	Other myositis, right ankle and foot
M60.872	Other myositis, left ankle and foot
M60.879	Other myositis, unspecified ankle and foot
M60.88	Other myositis, other site
M60.89	Other myositis, multiple sites
M60.9	Myositis, unspecified
M62.50	Muscle wasting and atrophy, not elsewhere classified, unspecified site
M62.511	Muscle wasting and atrophy, not elsewhere classified, right shoulder
M62.512	Muscle wasting and atrophy, not elsewhere classified, left shoulder
M62.519	Muscle wasting and atrophy, not elsewhere classified, unspecified shoulder
M62.521	Muscle wasting and atrophy, not elsewhere classified, right upper arm
M62.522	Muscle wasting and atrophy, not elsewhere classified, left upper arm
M62.529	Muscle wasting and atrophy, not elsewhere classified, unspecified upper arm
M62.531	Muscle wasting and atrophy, not elsewhere classified, right forearm
M62.532	Muscle wasting and atrophy, not elsewhere classified, left forearm
M62.539	Muscle wasting and atrophy, not elsewhere classified, unspecified forearm
M62.541	Muscle wasting and atrophy, not elsewhere classified, right hand
M62.542	Muscle wasting and atrophy, not elsewhere classified, left hand
M62.549	Muscle wasting and atrophy, not elsewhere classified, unspecified hand
M62.551	Muscle wasting and atrophy, not elsewhere classified, right thigh
M62.552	Muscle wasting and atrophy, not elsewhere classified, left thigh
M62.559	Muscle wasting and atrophy, not elsewhere classified, unspecified thigh

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Code	Description
M62.561	Muscle wasting and atrophy, not elsewhere classified, right lower leg
M62.562	Muscle wasting and atrophy, not elsewhere classified, left lower leg
M62.569	Muscle wasting and atrophy, not elsewhere classified, unspecified lower leg
M62.571	Muscle wasting and atrophy, not elsewhere classified, right ankle and foot
M62.572	Muscle wasting and atrophy, not elsewhere classified, left ankle and foot
M62.579	Muscle wasting and atrophy, not elsewhere classified, unspecified ankle and foot
M62.58	Muscle wasting and atrophy, not elsewhere classified, other site
M62.59	Muscle wasting and atrophy, not elsewhere classified, multiple sites
M62.81	Muscle weakness (generalized)
M62.9	Disorder of muscle, unspecified
M63.80	Disorders of muscle in diseases classified elsewhere, unspecified site
M63.811	Disorders of muscle in diseases classified elsewhere, right shoulder
M63.812	Disorders of muscle in diseases classified elsewhere, left shoulder
M63.819	Disorders of muscle in diseases classified elsewhere, unspecified shoulder
M63.821	Disorders of muscle in diseases classified elsewhere, right upper arm
M63.822	Disorders of muscle in diseases classified elsewhere, left upper arm
M63.829	Disorders of muscle in diseases classified elsewhere, unspecified upper arm
M63.831	Disorders of muscle in diseases classified elsewhere, right forearm
M63.832	Disorders of muscle in diseases classified elsewhere, left forearm
M63.839	Disorders of muscle in diseases classified elsewhere, unspecified forearm
M63.841	Disorders of muscle in diseases classified elsewhere, right hand
M63.842	Disorders of muscle in diseases classified elsewhere, left hand
M63.849	Disorders of muscle in diseases classified elsewhere, unspecified hand
M63.851	Disorders of muscle in diseases classified elsewhere, right thigh
M63.852	Disorders of muscle in diseases classified elsewhere, left thigh
M63.859	Disorders of muscle in diseases classified elsewhere, unspecified thigh
M63.861	Disorders of muscle in diseases classified elsewhere, right lower leg
M63.862	Disorders of muscle in diseases classified elsewhere, left lower leg
M63.869	Disorders of muscle in diseases classified elsewhere, unspecified lower leg
M63.871	Disorders of muscle in diseases classified elsewhere, right ankle and foot



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Code	Description
M63.872	Disorders of muscle in diseases classified elsewhere, left ankle and foot
M63.879	Disorders of muscle in diseases classified elsewhere, unspecified ankle and foot
M63.88	Disorders of muscle in diseases classified elsewhere, other site
M63.89	Disorders of muscle in diseases classified elsewhere, multiple sites
M79.1	Myalgia
M79.7	Fibromyalgia
M81.6	Localized osteoporosis [Lequesne]
M81.8	Other osteoporosis without current pathological fracture
M86.9	Osteomyelitis, unspecified
N91.0	Primary amenorrhea
N91.1	Secondary amenorrhea
N91.2	Amenorrhea, unspecified
N91.3	Primary oligomenorrhea
N91.4	Secondary oligomenorrhea
N91.5	Oligomenorrhea, unspecified
N92.0	Excessive and frequent menstruation with regular cycle
N92.5	Other specified irregular menstruation
N92.6	Irregular menstruation, unspecified
N94.4	Primary dysmenorrhea
N94.5	Secondary dysmenorrhea
N94.6	Dysmenorrhea, unspecified
*O12.04	*Gestational edema, complicating childbirth
*O12.05	*Gestational edema, complicating the puerperium
*O12.14	*Gestational proteinuria, complicating childbirth
*O12.15	*Gestational proteinuria, complicating the puerperium
*O12.24	*Gestational edema with proteinuria, complicating childbirth
*O12.25	*Gestational edema with proteinuria, complicating the puerperium
*O13.4	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth
*O13.5	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating the puerperium

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Code	Description
*O14.04	*Mild to moderate pre-eclampsia, complicating childbirth
*O14.05	*Mild to moderate pre-eclampsia, complicating the puerperium
*O14.14	*Severe pre-eclampsia complicating childbirth
*O14.15	*Severe pre-eclampsia, complicating the puerperium
*O14.24	*HELLP syndrome, complicating childbirth
*O14.25	*HELLP syndrome, complicating the puerperium
*O14.94	*Unspecified pre-eclampsia, complicating childbirth
*O14.95	*Unspecified pre-eclampsia, complicating the puerperium
*O16.4	*Unspecified maternal hypertension, complicating childbirth
*O16.5	*Unspecified maternal hypertension, complicating the puerperium
*O24.415	*Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs
*O24.425	*Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs
*O24.435	*Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs
*O44.20	*Partial placenta previa NOS or without hemorrhage, unspecified trimester
*O44.21	*Partial placenta previa NOS or without hemorrhage, first trimester
*O44.22	*Partial placenta previa NOS or without hemorrhage, second trimester
*O44.23	*Partial placenta previa NOS or without hemorrhage, third trimester
*O44.30	*Partial placenta previa with hemorrhage, unspecified trimester
*O44.31	*Partial placenta previa with hemorrhage, first trimester
*O44.32	*Partial placenta previa with hemorrhage, second trimester
*O44.33	*Partial placenta previa with hemorrhage, third trimester
*O44.40	*Low lying placenta NOS or without hemorrhage, unspecified trimester
*O44.41	*Low lying placenta NOS or without hemorrhage, first trimester
*O44.42	*Low lying placenta NOS or without hemorrhage, second trimester
*O44.43	*Low lying placenta NOS or without hemorrhage, third trimester
*O44.50	*Low lying placenta with hemorrhage, unspecified trimester
*O44.51	*Low lying placenta with hemorrhage, first trimester
*O44.52	*Low lying placenta with hemorrhage, second trimester
*O44.53	*Low lying placenta with hemorrhage, third trimester
O90.5	Postpartum thyroiditis



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Code	Description
O92.29	Other disorders of breast associated with pregnancy and the puerperium
O99.280	Endocrine, nutritional and metabolic diseases complicating pregnancy, unspecified trimester
O99.281	Endocrine, nutritional and metabolic diseases complicating pregnancy, first trimester
O99.282	Endocrine, nutritional and metabolic diseases complicating pregnancy, second trimester
O99.283	Endocrine, nutritional and metabolic diseases complicating pregnancy, third trimester
O99.284	Endocrine, nutritional and metabolic diseases complicating childbirth
O99.285	Endocrine, nutritional and metabolic diseases complicating the puerperium
*P05.09	*Newborn light for gestational age, 2500 grams and over
Q38.2	Macroglossia
Q89.2	Congenital malformations of other endocrine glands
R00.0	Tachycardia, unspecified
R00.1	Bradycardia, unspecified
R00.2	Palpitations
R06.00	Dyspnea, unspecified
R06.09	Other forms of dyspnea
R06.1	Stridor
R06.83	Snoring
R06.89	Other abnormalities of breathing
R07.0	Pain in throat
R09.89	Other specified symptoms and signs involving the circulatory and respiratory systems
R13.0	Aphagia
R13.10	Dysphagia, unspecified
R13.11	Dysphagia, oral phase
R13.12	Dysphagia, oropharyngeal phase
R13.13	Dysphagia, pharyngeal phase
R13.14	Dysphagia, pharyngoesophageal phase
R13.19	Other dysphagia
R18.0	Malignant ascites
R18.8	Other ascites
R19.4	Change in bowel habit

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Code	Description
R19.7	Diarrhea, unspecified
R19.8	Other specified symptoms and signs involving the digestive system and abdomen
R20.0	Anesthesia of skin
R20.1	Hypoesthesia of skin
R20.2	Paresthesia of skin
R20.3	Hyperesthesia
R20.8	Other disturbances of skin sensation
R20.9	Unspecified disturbances of skin sensation
R23.4	Changes in skin texture
R23.8	Other skin changes
R23.9	Unspecified skin changes
R25.0	Abnormal head movements
R25.1	Tremor, unspecified
R25.2	Cramp and spasm
R25.3	Fasciculation
R25.8	Other abnormal involuntary movements
R25.9	Unspecified abnormal involuntary movements
R27.0	Ataxia, unspecified
R27.8	Other lack of coordination
R27.9	Unspecified lack of coordination
R29.2	Abnormal reflex
*R29.700	*NIHSS score 0
*R29.701	*NIHSS score 1
*R29.702	*NIHSS score 2
*R29.703	*NIHSS score 3
*R29.704	*NIHSS score 4
*R29.705	*NIHSS score 5
*R29.706	*NIHSS score 6
*R29.707	*NIHSS score 7
*R29.708	*NIHSS score 8



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Code	Description
*R29.709	*NIHSS score 9
*R29.710	*NIHSS score 10
*R29.711	*NIHSS score 11
*R29.712	*NIHSS score 12
*R29.713	*NIHSS score 13
*R29.714	*NIHSS score 14
*R29.715	*NIHSS score 15
*R29.716	*NIHSS score 16
*R29.717	*NIHSS score 17
*R29.718	*NIHSS score 18
*R29.719	*NIHSS score 19
*R29.720	*NIHSS score 20
*R29.721	*NIHSS score 21
*R29.722	*NIHSS score 22
*R29.723	*NIHSS score 23
*R29.724	*NIHSS score 24
*R29.725	*NIHSS score 25
*R29.726	*NIHSS score 26
*R29.727	*NIHSS score 27
*R29.728	*NIHSS score 28
*R29.729	*NIHSS score 29
*R29.730	*NIHSS score 30
*R29.731	*NIHSS score 31
*R29.732	*NIHSS score 32
*R29.733	*NIHSS score 33
*R29.734	*NIHSS score 34
*R29.735	*NIHSS score 35
*R29.736	*NIHSS score 36
*R29.737	*NIHSS score 37
*R29.738	*NIHSS score 38



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Code	Description
*R29.739	*NIHSS score 39
*R29.740	*NIHSS score 40
*R29.741	*NIHSS score 41
*R29.742	*NIHSS score 42
R40.0	Somnolence
R40.1	Stupor
R40.20	Unspecified coma
R40.2110	Coma scale, eyes open, never, unspecified time
R40.2111	Coma scale, eyes open, never, in the field [EMT or ambulance]
R40.2112	Coma scale, eyes open, never, at arrival to emergency department
R40.2113	Coma scale, eyes open, never, at hospital admission
R40.2114	Coma scale, eyes open, never, 24 hours or more after hospital admission
R40.2120	Coma scale, eyes open, to pain, unspecified time
R40.2121	Coma scale, eyes open, to pain, in the field [EMT or ambulance]
R40.2122	Coma scale, eyes open, to pain, at arrival to emergency department
R40.2123	Coma scale, eyes open, to pain, at hospital admission
R40.2124	Coma scale, eyes open, to pain, 24 hours or more after hospital admission
R40.2210	Coma scale, best verbal response, none, unspecified time
R40.2211	Coma scale, best verbal response, none, in the field [EMT or ambulance]
R40.2212	Coma scale, best verbal response, none, at arrival to emergency department
R40.2213	Coma scale, best verbal response, none, at hospital admission
R40.2214	Coma scale, best verbal response, none, 24 hours or more after hospital admission
R40.2220	Coma scale, best verbal response, incomprehensible words, unspecified time
R40.2221	Coma scale, best verbal response, incomprehensible words, in the field [EMT or ambulance]
R40.2222	Coma scale, best verbal response, incomprehensible words, at arrival to emergency department
R40.2223	Coma scale, best verbal response, incomprehensible words, at hospital admission
R40.2224	Coma scale, best verbal response, incomprehensible words, 24 hours or more after hospital admission
R40.2310	Coma scale, best motor response, none, unspecified time

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Code	Description
R40.2311	Coma scale, best motor response, none, in the field [EMT or ambulance]
R40.2312	Coma scale, best motor response, none, at arrival to emergency department
R40.2313	Coma scale, best motor response, none, at hospital admission
R40.2314	Coma scale, best motor response, none, 24 hours or more after hospital admission
R40.2320	Coma scale, best motor response, extension, unspecified time
R40.2321	Coma scale, best motor response, extension, in the field [EMT or ambulance]
R40.2322	Coma scale, best motor response, extension, at arrival to emergency department
R40.2323	Coma scale, best motor response, extension, at hospital admission
R40.2324	Coma scale, best motor response, extension, 24 hours or more after hospital admission
R40.2340	Coma scale, best motor response, flexion withdrawal, unspecified time
R40.2341	Coma scale, best motor response, flexion withdrawal, in the field [EMT or ambulance]
R40.2342	Coma scale, best motor response, flexion withdrawal, at arrival to emergency department
R40.2343	Coma scale, best motor response, flexion withdrawal, at hospital admission
R40.2344	Coma scale, best motor response, flexion withdrawal, 24 hours or more after hospital admission
*R40.2410	*Glasgow coma scale score 13-15, unspecified time
*R40.2411	*Glasgow coma scale score 13-15, in the field [EMT or ambulance]
*R40.2412	*Glasgow coma scale score 13-15, at arrival to emergency department
*R40.2413	*Glasgow coma scale score 13-15, at hospital admission
*R40.2414	*Glasgow coma scale score 13-15, 24 hours or more after hospital admission
*R40.2420	*Glasgow coma scale score 9-12, unspecified time
*R40.2421	*Glasgow coma scale score 9-12, in the field [EMT or ambulance]
*R40.2422	*Glasgow coma scale score 9-12, at arrival to emergency department
*R40.2423	*Glasgow coma scale score 9-12, at hospital admission
*R40.2424	*Glasgow coma scale score 9-12, 24 hours or more after hospital admission
*R40.2430	*Glasgow coma scale score 3-8, unspecified time
*R40.2431	*Glasgow coma scale score 3-8, in the field [EMT or ambulance]
*R40.2432	*Glasgow coma scale score 3-8, at arrival to emergency department
*R40.2433	*Glasgow coma scale score 3-8, at hospital admission
*R40.2434	*Glasgow coma scale score 3-8, 24 hours or more after hospital admission



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Code	Description
*R40.2440	*Other coma, without documented Glasgow coma scale score, or with partial score reported, unspecified time
*R40.2441	*Other coma, without documented Glasgow coma scale score, or with partial score reported, in the field [EMT or ambulance]
*R40.2442	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at arrival to emergency department
*R40.2443	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at hospital admission
*R40.2444	*Other coma, without documented Glasgow coma scale score, or with partial score reported, 24 hours or more after hospital admission
R40.4	Transient alteration of awareness
R41.0	Disorientation, unspecified
R41.1	Anterograde amnesia
R41.2	Retrograde amnesia
R41.3	Other amnesia
R41.82	Altered mental status, unspecified
R41.9	Unspecified symptoms and signs involving cognitive functions and awareness
R45.0	Nervousness
R45.1	Restlessness and agitation
R45.3	Demoralization and apathy
R45.4	Irritability and anger
R45.81	Low self-esteem
R45.82	Worries
R45.84	Anhedonia
R45.86	Emotional lability
R45.87	Impulsiveness
R45.89	Other symptoms and signs involving emotional state
R47.02	Dysphasia
R47.1	Dysarthria and anarthria
R47.81	Slurred speech
R47.89	Other speech disturbances
R47.9	Unspecified speech disturbances

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Code	Description
R49.0	Dysphonia
R49.21	Hypernasality
R49.22	Hyponasality
R49.8	Other voice and resonance disorders
R50.2	Drug induced fever
R50.81	Fever presenting with conditions classified elsewhere
R50.82	Postprocedural fever
R50.83	Postvaccination fever
R50.84	Febrile nonhemolytic transfusion reaction
R50.9	Fever, unspecified
R52	Pain, unspecified
R53.0	Neoplastic (malignant) related fatigue
R53.1	Weakness
R53.2	Functional quadriplegia
R53.81	Other malaise
R53.82	Chronic fatigue, unspecified
R53.83	Other fatigue
R60.0	Localized edema
R60.1	Generalized edema
R60.9	Edema, unspecified
R61	Generalized hyperhidrosis
R63.0	Anorexia
R63.2	Polyphagia
R63.4	Abnormal weight loss
R63.5	Abnormal weight gain
R68.0	Hypothermia, not associated with low environmental temperature
R68.81	Early satiety
R68.83	Chills (without fever)
R68.89	Other general symptoms and signs
*R73.03	*Prediabetes



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Code	Description
R90.89	Other abnormal findings on diagnostic imaging of central nervous system
R93.8	Abnormal findings on diagnostic imaging of other specified body structures
R94.6	Abnormal results of thyroid function studies
T66.XXXA	Radiation sickness, unspecified, initial encounter
*Z05.0	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1	*Observation and evaluation of newborn for suspected infectious condition ruled out
*Z05.2	*Observation and evaluation of newborn for suspected neurological condition ruled out
*Z05.3	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41	*Observation and evaluation of newborn for suspected genetic condition ruled out
*Z05.42	*Observation and evaluation of newborn for suspected metabolic condition ruled out
*Z05.43	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
*Z05.6	*Observation and evaluation of newborn for suspected genitourinary condition ruled out
*Z05.71	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
*Z05.73	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9	*Observation and evaluation of newborn for unspecified suspected condition ruled out
Z08	Encounter for follow-up examination after completed treatment for malignant neoplasm
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
*Z19.1	*Hormone sensitive malignancy status
*Z19.2	*Hormone resistant malignancy status

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Code	Description
*Z31.7	*Encounter for procreative management and counseling for gestational carrier
Z79.3	Long term (current) use of hormonal contraceptives
*Z79.84	*Long term (current) use of oral hypoglycemic drugs
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
*Z84.82	*Family history of sudden infant death syndrome
Z85.020	Personal history of malignant carcinoid tumor of stomach
Z85.030	Personal history of malignant carcinoid tumor of large intestine
Z85.040	Personal history of malignant carcinoid tumor of rectum
Z85.060	Personal history of malignant carcinoid tumor of small intestine
Z85.110	Personal history of malignant carcinoid tumor of bronchus and lung
Z85.230	Personal history of malignant carcinoid tumor of thymus
Z85.520	Personal history of malignant carcinoid tumor of kidney
Z85.821	Personal history of Merkel cell carcinoma
Z85.850	Personal history of malignant neoplasm of thyroid
Z85.858	Personal history of malignant neoplasm of other endocrine glands
Z86.2	Personal history of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
Z86.32	Personal history of gestational diabetes
Z86.39	Personal history of other endocrine, nutritional and metabolic disease

Indications

Thyroid function tests are used to define hyper function, euthyroidism, or hypofunction of thyroid disease. Thyroid testing may be reasonable and necessary to:

- Distinguish between primary and secondary hypothyroidism
- Confirm or rule out primary hypothyroidism
- Monitor thyroid hormone levels (for example, patients with goiter, thyroid nodules, or thyroid cancer)
- Monitor drug therapy in patients with primary hypothyroidism
- Confirm or rule out primary hyperthyroidism
- Monitor therapy in patients with hyperthyroidism

Thyroid function testing may be medically necessary in patients with disease or neoplasm of the thyroid and other endocrine glands. Thyroid function testing may also be medically necessary in

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patients with metabolic disorders; malnutrition; hyperlipidemia; certain types of anemia; psychosis and non-psychotic personality disorders; unexplained depression; ophthalmologic disorders; various cardiac arrhythmias; disorders of menstruation; skin conditions; myalgias; and a wide array of signs and symptoms, including alterations in consciousness; malaise; hypothermia; symptoms of the nervous and musculoskeletal system; skin and integumentary system; nutrition and metabolism; cardiovascular; and gastrointestinal system.

It may be medically necessary to do follow-up thyroid testing in patients with a history of malignant neoplasm of the endocrine system and in patients on long-term thyroid drug therapy.

Limitations

Testing may be covered up to two times a year in clinically stable patients; more frequent testing may be reasonable and necessary for patients whose thyroid therapy has been altered or in whom symptoms or signs of hyperthyroidism or hypothyroidism are noted.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Documentation Requirements

When these tests are billed at a greater frequency than the norm (two per year), the ordering physician's documentation must support the medical necessity of this frequency.

Sources of Information

AACE Clinical Practice Guidelines for the Diagnosis and Management of Thyroid Nodules, Endocrine Practice (1996) 2:1, pp. 78-84.

AACE Clinical Practice Guidelines for Evaluation and Treatment of Hyperthyroidism and Hypothyroidism, Endocrine Practice (1995) 1:1, pp. 54-62.

AACE Clinical Practice Guidelines for Management of Thyroid Carcinoma, Endocrine Practice (1997) 3:1, pp. 60-71.

Cooper DS. Treatment of thyrotoxicosis. In Braverman LE, Utiger RD, eds. Werner and Ingbar's The Thyroid: A Fundamental and Clinical Text. 6th ed. Philadelphia, Pa: JB Lippincott Co; 1991:887-916.

Endocrinology. DeGroot LJ, et. al. Eds. 3rd ed. Philadelphia, Pa: W.B.Saunders Co.; 1995.

Endocrinology and Metabolism. Felig, P, Baxter, JD, Frohman, LA, eds.3rd ed. McGraw-Hill, Inc.: 1995.

Franklyn JA. The Management of Hyperthyroidism. N Engl J Med. 1994; 330(24):1731-1738.

Glenn GC and the Laboratory Testing Strategy Task Force of the College of American Pathologists. Practice parameter on laboratory panel testing for screening and case finding in asymptomatic adults. Arch Pathol LabMed. 1996:120:929-43.

Larsen PR, Ingbar SH. The Thyroid Gland. In: Wilson JD, Foster DW, eds. Williams Textbook of Endocrinology. 9th ed. Philadelphia, Pa: WB Saunders Co; 1992:357-487. The Merck Manual, 16th Edition, pp. 1072-1081.



190.23 - Lipids Testing

Description

Lipoproteins are a class of heterogeneous particles of varying sizes and densities containing lipid and protein. These lipoproteins include cholesterol esters and free cholesterol, triglycerides, phospholipids and A, C, and E apoproteins. Total cholesterol comprises all the cholesterol found in various lipoproteins.

Factors that affect blood cholesterol levels include age, sex, body weight, diet, alcohol and tobacco use, exercise, genetic factors, family history, medications, menopausal status, the use of hormone replacement therapy, and chronic disorders such as hypothyroidism, obstructive liver disease, pancreatic disease (including diabetes), and kidney disease.

In many individuals, an elevated blood cholesterol level constitutes an increased risk of developing coronary artery disease. Blood levels of total cholesterol and various fractions of cholesterol, especially low density lipoprotein cholesterol (LDL -C) and high density lipoprotein cholesterol (HDL-C) are useful in assessing and monitoring treatment for that risk in patients with cardiovascular and related diseases. Blood levels of the above cholesterol components including triglyceride have been separated into desirable, borderline and high-risk categories by the National Heart, Lung, and Blood Institute in their report in 1993. These categories form a useful basis for evaluation and treatment of patients with hyperlipidemia. Therapy to reduce these risk parameters includes diet, exercise and medication, and fat weight loss, which is particularly powerful when combined with diet and exercise.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
80061	Lipid panel
82465	Cholesterol, serum or whole blood, total
83700	Lipoprotein, blood; electrophoretic separation and quantitation
83701	Lipoprotein blood; high resolution fractionation and quantitation of lipoproteins including lipoprotein subclasses when performed (e.g., electrophoresis, ultracentrifugation)
83704	Lipoprotein, blood; quantitation of lipoprotein particle numbers and lipoprotein particle subclasses
83718	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)
83721	Lipoprotein, direct measurement, LDL cholesterol
84478	Triglycerides

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ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
B25.2	Cytomegaloviral pancreatitis
B52.0	Plasmodium malariae malaria with nephropathy
E00.0	Congenital iodine-deficiency syndrome, neurological type
E00.1	Congenital iodine-deficiency syndrome, myxedematous type
E00.2	Congenital iodine-deficiency syndrome, mixed type
E00.9	Congenital iodine-deficiency syndrome, unspecified
E01.8	Other iodine-deficiency related thyroid disorders and allied conditions
E02	Subclinical iodine-deficiency hypothyroidism
E03.0	Congenital hypothyroidism with diffuse goiter
E03.1	Congenital hypothyroidism without goiter
E03.2	Hypothyroidism due to medicaments and other exogenous substances
E03.3	Postinfectious hypothyroidism
E03.8	Other specified hypothyroidism
E03.9	Hypothyroidism, unspecified
E05.00	Thyrotoxicosis with diffuse goiter without thyrotoxic crisis or storm
E05.01	Thyrotoxicosis with diffuse goiter with thyrotoxic crisis or storm
E05.10	Thyrotoxicosis with toxic single thyroid nodule without thyrotoxic crisis or storm
E05.11	Thyrotoxicosis with toxic single thyroid nodule with thyrotoxic crisis or storm
E05.20	Thyrotoxicosis with toxic multinodular goiter without thyrotoxic crisis or storm
E05.21	Thyrotoxicosis with toxic multinodular goiter with thyrotoxic crisis or storm
E05.30	Thyrotoxicosis from ectopic thyroid tissue without thyrotoxic crisis or storm
E05.31	Thyrotoxicosis from ectopic thyroid tissue with thyrotoxic crisis or storm
E05.40	Thyrotoxicosis factitia without thyrotoxic crisis or storm
E05.41	Thyrotoxicosis factitia with thyrotoxic crisis or storm
E05.80	Other thyrotoxicosis without thyrotoxic crisis or storm



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Code	Description
E05.81	Other thyrotoxicosis with thyrotoxic crisis or storm
E05.90	Thyrotoxicosis, unspecified without thyrotoxic crisis or storm
E05.91	Thyrotoxicosis, unspecified with thyrotoxic crisis or storm
E06.0	Acute thyroiditis
E06.1	Subacute thyroiditis
E06.2	Chronic thyroiditis with transient thyrotoxicosis
E06.3	Autoimmune thyroiditis
E06.4	Drug-induced thyroiditis
E06.5	Other chronic thyroiditis
E06.9	Thyroiditis, unspecified
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye



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Code	Description
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral



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Code	Description
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye
*E08.3521	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E08.3522	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E08.3523	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E08.3529	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E08.3531	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E08.3532	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E08.3533	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E08.3539	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E08.3541	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E08.3542	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E08.3543	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E08.3549	*Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E08.3551	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye
*E08.3552	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye
*E08.3553	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral
*E08.3559	*Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract
*E08.37X1	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye
*E08.37X2	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye
*E08.37X3	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral
*E08.37X9	*Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis
E08.621	Diabetes mellitus due to underlying condition with foot ulcer
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer
E08.628	Diabetes mellitus due to underlying condition with other skin complications
E08.630	Diabetes mellitus due to underlying condition with periodontal disease
E08.638	Diabetes mellitus due to underlying condition with other oral complications
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia
E08.69	Diabetes mellitus due to underlying condition with other specified complication
E08.8	Diabetes mellitus due to underlying condition with unspecified complications
E08.9	Diabetes mellitus due to underlying condition without complications
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E09.3521	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E09.3522	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E09.3523	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E09.3529	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E09.3531	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E09.3532	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E09.3533	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E09.3539	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E09.3541	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E09.3542	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E09.3543	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E09.3549	*Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E09.3551	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E09.3552	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E09.3553	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E09.3559	*Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract
*E09.37X1	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E09.37X2	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E09.37X3	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E09.37X9	*Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer
E09.628	Drug or chemical induced diabetes mellitus with other skin complications
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease
E09.638	Drug or chemical induced diabetes mellitus with other oral complications
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia
E09.69	Drug or chemical induced diabetes mellitus with other specified complication
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications
E09.9	Drug or chemical induced diabetes mellitus without complications
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma

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Code	Description
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma
E10.21	Type 1 diabetes mellitus with diabetic nephropathy
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E10.3521	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E10.3522	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E10.3523	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E10.3529	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E10.3531	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E10.3532	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E10.3533	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E10.3539	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E10.3541	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E10.3542	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E10.3543	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E10.3549	*Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E10.3551	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E10.3552	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E10.3553	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E10.3559	*Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E10.36	Type 1 diabetes mellitus with diabetic cataract
*E10.37X1	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E10.37X2	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E10.37X3	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E10.37X9	*Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.59	Type 1 diabetes mellitus with other circulatory complications
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy
E10.620	Type 1 diabetes mellitus with diabetic dermatitis
E10.621	Type 1 diabetes mellitus with foot ulcer
E10.622	Type 1 diabetes mellitus with other skin ulcer
E10.628	Type 1 diabetes mellitus with other skin complications
E10.630	Type 1 diabetes mellitus with periodontal disease
E10.638	Type 1 diabetes mellitus with other oral complications
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma
E10.65	Type 1 diabetes mellitus with hyperglycemia
E10.69	Type 1 diabetes mellitus with other specified complication
E10.8	Type 1 diabetes mellitus with unspecified complications
E10.9	Type 1 diabetes mellitus without complications
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma

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Code	Description
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E11.3521	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E11.3522	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E11.3523	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E11.3529	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E11.3531	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
*E11.3532	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E11.3533	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E11.3539	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E11.3541	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E11.3542	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E11.3543	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E11.3549	*Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E11.3551	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E11.3552	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E11.3553	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E11.3559	*Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E11.36	Type 2 diabetes mellitus with diabetic cataract
*E11.37X1	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E11.37X2	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E11.37X3	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E11.37X9	*Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.59	Type 2 diabetes mellitus with other circulatory complications
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy
E11.620	Type 2 diabetes mellitus with diabetic dermatitis
E11.621	Type 2 diabetes mellitus with foot ulcer
E11.622	Type 2 diabetes mellitus with other skin ulcer
E11.628	Type 2 diabetes mellitus with other skin complications
E11.630	Type 2 diabetes mellitus with periodontal disease
E11.638	Type 2 diabetes mellitus with other oral complications
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma
E11.65	Type 2 diabetes mellitus with hyperglycemia
E11.69	Type 2 diabetes mellitus with other specified complication
E11.8	Type 2 diabetes mellitus with unspecified complications
E11.9	Type 2 diabetes mellitus without complications
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma
E13.10	Other specified diabetes mellitus with ketoacidosis without coma
E13.11	Other specified diabetes mellitus with ketoacidosis with coma

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Code	Description
E13.21	Other specified diabetes mellitus with diabetic nephropathy
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
E13.29	Other specified diabetes mellitus with other diabetic kidney complication
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral

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Code	Description
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E13.3521	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E13.3522	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E13.3523	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E13.3529	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E13.3531	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye



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Code	Description
*E13.3532	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E13.3533	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E13.3539	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E13.3541	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
*E13.3542	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E13.3543	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E13.3549	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E13.3551	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E13.3552	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E13.3553	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E13.3559	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E13.36	Other specified diabetes mellitus with diabetic cataract
*E13.37X1	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye



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Code	Description
*E13.37X2	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E13.37X3	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E13.37X9	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy
E13.44	Other specified diabetes mellitus with diabetic amyotrophy
E13.49	Other specified diabetes mellitus with other diabetic neurological complication
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E13.59	Other specified diabetes mellitus with other circulatory complications
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy
E13.618	Other specified diabetes mellitus with other diabetic arthropathy
E13.620	Other specified diabetes mellitus with diabetic dermatitis
E13.621	Other specified diabetes mellitus with foot ulcer
E13.622	Other specified diabetes mellitus with other skin ulcer
E13.628	Other specified diabetes mellitus with other skin complications
E13.630	Other specified diabetes mellitus with periodontal disease
E13.638	Other specified diabetes mellitus with other oral complications
E13.641	Other specified diabetes mellitus with hypoglycemia with coma
E13.649	Other specified diabetes mellitus with hypoglycemia without coma
E13.65	Other specified diabetes mellitus with hyperglycemia
E13.69	Other specified diabetes mellitus with other specified complication
E13.8	Other specified diabetes mellitus with unspecified complications
E13.9	Other specified diabetes mellitus without complications
E24.0	Pituitary-dependent Cushing's disease



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Code	Description
E24.2	Drug-induced Cushing's syndrome
E24.3	Ectopic ACTH syndrome
E24.4	Alcohol-induced pseudo-Cushing's syndrome
E24.8	Other Cushing's syndrome
E24.9	Cushing's syndrome, unspecified
E40	Kwashiorkor
E41	Nutritional marasmus
E42	Marasmic kwashiorkor
E43	Unspecified severe protein-calorie malnutrition
E44.0	Moderate protein-calorie malnutrition
E44.1	Mild protein-calorie malnutrition
E46	Unspecified protein-calorie malnutrition
E64.0	Sequelae of protein-calorie malnutrition
E66.01	Morbid (severe) obesity due to excess calories
E66.09	Other obesity due to excess calories
E66.1	Drug-induced obesity
E66.2	Morbid (severe) obesity with alveolar hypoventilation
E66.3	Overweight
E66.8	Other obesity
E66.9	Obesity, unspecified
E71.30	Disorder of fatty-acid metabolism, unspecified
E72.00	Disorders of amino-acid transport, unspecified
E72.01	Cystinuria
E72.02	Hartnup's disease
E72.04	Cystinosis
E72.09	Other disorders of amino-acid transport
E74.20	Disorders of galactose metabolism, unspecified
E74.21	Galactosemia
E74.29	Other disorders of galactose metabolism
E75.21	Fabry (-Anderson) disease

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Code	Description
E75.22	Gaucher disease
E75.240	Niemann-Pick disease type A
E75.241	Niemann-Pick disease type B
E75.242	Niemann-Pick disease type C
E75.243	Niemann-Pick disease type D
E75.248	Other Niemann-Pick disease
E75.249	Niemann-Pick disease, unspecified
E75.3	Sphingolipidosis, unspecified
E75.5	Other lipid storage disorders
E75.6	Lipid storage disorder, unspecified
E77.0	Defects in post-translational modification of lysosomal enzymes
E77.1	Defects in glycoprotein degradation
E77.8	Other disorders of glycoprotein metabolism
E77.9	Disorder of glycoprotein metabolism, unspecified
E78.00	Pure hypercholesterolemia, unspecified
E78.01	Familial hypercholesterolemia
E78.1	Pure hyperglyceridemia
E78.2	Mixed hyperlipidemia
E78.3	Hyperchylomicronemia
E78.4	Other hyperlipidemia
E78.5	Hyperlipidemia, unspecified
E78.6	Lipoprotein deficiency
E78.70	Disorder of bile acid and cholesterol metabolism, unspecified
E78.79	Other disorders of bile acid and cholesterol metabolism
E78.81	Lipoid dermatoarthritis
E78.89	Other lipoprotein metabolism disorders
E78.9	Disorder of lipoprotein metabolism, unspecified
E79.0	Hyperuricemia without signs of inflammatory arthritis and tophaceous disease
E85.0	Non-neuropathic hereditary amyloidosis
E85.1	Neuropathic hereditary amyloidosis



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Code	Description
E85.2	Heredofamilial amyloidosis, unspecified
E85.3	Secondary systemic amyloidosis
E85.4	Organ-limited amyloidosis
E85.8	Other amyloidosis
E85.9	Amyloidosis, unspecified
E88.1	Lipodystrophy, not elsewhere classified
E88.2	Lipomatosis, not elsewhere classified
E88.89	Other specified metabolic disorders
E89.0	Postprocedural hypothyroidism
F10.20	Alcohol dependence, uncomplicated
G45.0	Vertebro-basilar artery syndrome
G45.1	Carotid artery syndrome (hemispheric)
G45.2	Multiple and bilateral precerebral artery syndromes
G45.3	Amaurosis fugax
G45.8	Other transient cerebral ischemic attacks and related syndromes
G45.9	Transient cerebral ischemic attack, unspecified
G46.0	Middle cerebral artery syndrome
G46.1	Anterior cerebral artery syndrome
G46.2	Posterior cerebral artery syndrome
H02.60	Xanthelasma of unspecified eye, unspecified eyelid
H02.61	Xanthelasma of right upper eyelid
H02.62	Xanthelasma of right lower eyelid
H02.63	Xanthelasma of right eye, unspecified eyelid
H02.64	Xanthelasma of left upper eyelid
H02.65	Xanthelasma of left lower eyelid
H02.66	Xanthelasma of left eye, unspecified eyelid
H18.411	Arcus senilis, right eye
H18.412	Arcus senilis, left eye
H18.413	Arcus senilis, bilateral
H18.419	Arcus senilis, unspecified eye

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Code	Description
H34.00	Transient retinal artery occlusion, unspecified eye
H34.01	Transient retinal artery occlusion, right eye
H34.02	Transient retinal artery occlusion, left eye
H34.03	Transient retinal artery occlusion, bilateral
H34.10	Central retinal artery occlusion, unspecified eye
H34.11	Central retinal artery occlusion, right eye
H34.12	Central retinal artery occlusion, left eye
H34.13	Central retinal artery occlusion, bilateral
H34.211	Partial retinal artery occlusion, right eye
H34.212	Partial retinal artery occlusion, left eye
H34.213	Partial retinal artery occlusion, bilateral
H34.219	Partial retinal artery occlusion, unspecified eye
H34.231	Retinal artery branch occlusion, right eye
H34.232	Retinal artery branch occlusion, left eye
H34.233	Retinal artery branch occlusion, bilateral
H34.239	Retinal artery branch occlusion, unspecified eye
H34.9	Unspecified retinal vascular occlusion
H35.00	Unspecified background retinopathy
H35.011	Changes in retinal vascular appearance, right eye
H35.012	Changes in retinal vascular appearance, left eye
H35.013	Changes in retinal vascular appearance, bilateral
H35.019	Changes in retinal vascular appearance, unspecified eye
H35.021	Exudative retinopathy, right eye
H35.022	Exudative retinopathy, left eye
H35.023	Exudative retinopathy, bilateral
H35.029	Exudative retinopathy, unspecified eye
H35.031	Hypertensive retinopathy, right eye
H35.032	Hypertensive retinopathy, left eye
H35.033	Hypertensive retinopathy, bilateral
H35.039	Hypertensive retinopathy, unspecified eye

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Code	Description
H35.041	Retinal micro-aneurysms, unspecified, right eye
H35.042	Retinal micro-aneurysms, unspecified, left eye
H35.043	Retinal micro-aneurysms, unspecified, bilateral
H35.049	Retinal micro-aneurysms, unspecified, unspecified eye
H35.051	Retinal neovascularization, unspecified, right eye
H35.052	Retinal neovascularization, unspecified, left eye
H35.053	Retinal neovascularization, unspecified, bilateral
H35.059	Retinal neovascularization, unspecified, unspecified eye
H35.071	Retinal telangiectasis, right eye
H35.072	Retinal telangiectasis, left eye
H35.073	Retinal telangiectasis, bilateral
H35.079	Retinal telangiectasis, unspecified eye
H35.89	Other specified retinal disorders
H43.20	Crystalline deposits in vitreous body, unspecified eye
H43.21	Crystalline deposits in vitreous body, right eye
H43.22	Crystalline deposits in vitreous body, left eye
H43.23	Crystalline deposits in vitreous body, bilateral
H93.011	Transient ischemic deafness, right ear
H93.012	Transient ischemic deafness, left ear
H93.013	Transient ischemic deafness, bilateral
H93.019	Transient ischemic deafness, unspecified ear
H93.091	Unspecified degenerative and vascular disorders of right ear
H93.092	Unspecified degenerative and vascular disorders of left ear
H93.093	Unspecified degenerative and vascular disorders of ear, bilateral
H93.099	Unspecified degenerative and vascular disorders of unspecified ear
I10	Essential (primary) hypertension
I11.0	Hypertensive heart disease with heart failure
I11.9	Hypertensive heart disease without heart failure
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease

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Code	Description
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease
I15.0	Renovascular hypertension
I15.1	Hypertension secondary to other renal disorders
I15.2	Hypertension secondary to endocrine disorders
I15.8	Other secondary hypertension
I15.9	Secondary hypertension, unspecified
*I16.0	*Hypertensive urgency
*I16.1	*Hypertensive emergency
*I16.9	*Hypertensive crisis, unspecified
I20.0	Unstable angina
I20.1	Angina pectoris with documented spasm
I20.8	Other forms of angina pectoris
I20.9	Angina pectoris, unspecified
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site
I21.4	Non-ST elevation (NSTEMI) myocardial infarction

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Code	Description
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site
I24.0	Acute coronary thrombosis not resulting in myocardial infarction
I24.1	Dressler's syndrome
I24.8	Other forms of acute ischemic heart disease
I24.9	Acute ischemic heart disease, unspecified
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
I25.2	Old myocardial infarction
I25.3	Aneurysm of heart
I25.41	Coronary artery aneurysm
I25.42	Coronary artery dissection
I25.5	Ischemic cardiomyopathy
I25.6	Silent myocardial ischemia
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm

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Code	Description
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris



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Code	Description
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris
I25.810	Atherosclerosis of coronary artery bypass graft(s) without angina pectoris
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris
I25.83	Coronary atherosclerosis due to lipid rich plaque
I25.84	Coronary atherosclerosis due to calcified coronary lesion
I25.89	Other forms of chronic ischemic heart disease
I25.9	Chronic ischemic heart disease, unspecified
I50.1	Left ventricular failure
I50.20	Unspecified systolic (congestive) heart failure
I50.21	Acute systolic (congestive) heart failure
I50.22	Chronic systolic (congestive) heart failure
I50.23	Acute on chronic systolic (congestive) heart failure
I50.30	Unspecified diastolic (congestive) heart failure
I50.31	Acute diastolic (congestive) heart failure
I50.32	Chronic diastolic (congestive) heart failure
I50.33	Acute on chronic diastolic (congestive) heart failure
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.9	Heart failure, unspecified
I51.9	Heart disease, unspecified
I52	Other heart disorders in diseases classified elsewhere
I61.0	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical
I61.1	Nontraumatic intracerebral hemorrhage in hemisphere, cortical
I61.2	Nontraumatic intracerebral hemorrhage in hemisphere, unspecified

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Code	Description
I61.3	Nontraumatic intracerebral hemorrhage in brain stem
I61.4	Nontraumatic intracerebral hemorrhage in cerebellum
I61.5	Nontraumatic intracerebral hemorrhage, intraventricular
I61.6	Nontraumatic intracerebral hemorrhage, multiple localized
I61.8	Other nontraumatic intracerebral hemorrhage
I61.9	Nontraumatic intracerebral hemorrhage, unspecified
I63.00	Cerebral infarction due to thrombosis of unspecified precerebral artery
I63.011	Cerebral infarction due to thrombosis of right vertebral artery
I63.012	Cerebral infarction due to thrombosis of left vertebral artery
*I63.013	*Cerebral infarction due to thrombosis of bilateral vertebral arteries
I63.019	Cerebral infarction due to thrombosis of unspecified vertebral artery
I63.02	Cerebral infarction due to thrombosis of basilar artery
I63.031	Cerebral infarction due to thrombosis of right carotid artery
I63.032	Cerebral infarction due to thrombosis of left carotid artery
*I63.033	*Cerebral infarction due to thrombosis of bilateral carotid arteries
I63.039	Cerebral infarction due to thrombosis of unspecified carotid artery
I63.09	Cerebral infarction due to thrombosis of other precerebral artery
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery
I63.111	Cerebral infarction due to embolism of right vertebral artery
I63.112	Cerebral infarction due to embolism of left vertebral artery
*I63.113	*Cerebral infarction due to embolism of bilateral vertebral arteries
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery
I63.12	Cerebral infarction due to embolism of basilar artery
I63.131	Cerebral infarction due to embolism of right carotid artery
I63.132	Cerebral infarction due to embolism of left carotid artery
*I63.133	*Cerebral infarction due to embolism of bilateral carotid arteries
I63.139	Cerebral infarction due to embolism of unspecified carotid artery
I63.19	Cerebral infarction due to embolism of other precerebral artery
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries
I63.211	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral arteries

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Code	Description
I63.212	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral arteries
*I63.213	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries
I63.219	Cerebral infarction due to unspecified occlusion or stenosis of unspecified vertebral arteries
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar arteries
I63.231	Cerebral infarction due to unspecified occlusion or stenosis of right carotid arteries
I63.232	Cerebral infarction due to unspecified occlusion or stenosis of left carotid arteries
*I63.233	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid arteries
I63.239	Cerebral infarction due to unspecified occlusion or stenosis of unspecified carotid arteries
I63.29	Cerebral infarction due to unspecified occlusion or stenosis of other precerebral arteries
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery
I63.311	Cerebral infarction due to thrombosis of right middle cerebral artery
I63.312	Cerebral infarction due to thrombosis of left middle cerebral artery
*I63.313	*Cerebral infarction due to thrombosis of bilateral middle cerebral arteries
I63.319	Cerebral infarction due to thrombosis of unspecified middle cerebral artery
I63.321	Cerebral infarction due to thrombosis of right anterior cerebral artery
I63.322	Cerebral infarction due to thrombosis of left anterior cerebral artery
*I63.323	*Cerebral infarction due to thrombosis of bilateral anterior arteries
I63.329	Cerebral infarction due to thrombosis of unspecified anterior cerebral artery
I63.331	Cerebral infarction due to thrombosis of right posterior cerebral artery
I63.332	Cerebral infarction due to thrombosis of left posterior cerebral artery
*I63.333	*Cerebral infarction to thrombosis of bilateral posterior arteries
I63.339	Cerebral infarction due to thrombosis of unspecified posterior cerebral artery
I63.341	Cerebral infarction due to thrombosis of right cerebellar artery
I63.342	Cerebral infarction due to thrombosis of left cerebellar artery
*I63.343	*Cerebral infarction to thrombosis of bilateral cerebellar arteries
I63.349	Cerebral infarction due to thrombosis of unspecified cerebellar artery
I63.39	Cerebral infarction due to thrombosis of other cerebral artery
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery



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Code	Description
I63.411	Cerebral infarction due to embolism of right middle cerebral artery
I63.412	Cerebral infarction due to embolism of left middle cerebral artery
*I63.413	*Cerebral infarction due to embolism of bilateral middle cerebral arteries
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery
*I63.423	*Cerebral infarction due to embolism of bilateral anterior cerebral arteries
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery
*I63.433	*Cerebral infarction due to embolism of bilateral posterior cerebral arteries
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery
I63.441	Cerebral infarction due to embolism of right cerebellar artery
I63.442	Cerebral infarction due to embolism of left cerebellar artery
*I63.443	*Cerebral infarction due to embolism of bilateral cerebellar arteries
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery
I63.49	Cerebral infarction due to embolism of other cerebral artery
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery
I63.511	Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery
I63.512	Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery
*I63.513	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle arteries
I63.519	Cerebral infarction due to unspecified occlusion or stenosis of unspecified middle cerebral artery
I63.521	Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery
I63.522	Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery
*I63.523	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior arteries
I63.529	Cerebral infarction due to unspecified occlusion or stenosis of unspecified anterior cerebral artery
I63.531	Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery



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Code	Description
I63.532	Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery
*I63.533	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior arteries
I63.539	Cerebral infarction due to unspecified occlusion or stenosis of unspecified posterior cerebral artery
I63.541	Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery
I63.542	Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery
*I63.543	*Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries
I63.549	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebellar artery
I63.59	Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery
I63.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic
I63.8	Other cerebral infarction
I63.9	Cerebral infarction, unspecified
I65.01	Occlusion and stenosis of right vertebral artery
I65.02	Occlusion and stenosis of left vertebral artery
I65.03	Occlusion and stenosis of bilateral vertebral arteries
I65.09	Occlusion and stenosis of unspecified vertebral artery
I65.1	Occlusion and stenosis of basilar artery
I65.21	Occlusion and stenosis of right carotid artery
I65.22	Occlusion and stenosis of left carotid artery
I65.23	Occlusion and stenosis of bilateral carotid arteries
I65.29	Occlusion and stenosis of unspecified carotid artery
I65.8	Occlusion and stenosis of other precerebral arteries
I65.9	Occlusion and stenosis of unspecified precerebral artery
I66.01	Occlusion and stenosis of right middle cerebral artery
I66.02	Occlusion and stenosis of left middle cerebral artery
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries
I66.09	Occlusion and stenosis of unspecified middle cerebral artery
I66.11	Occlusion and stenosis of right anterior cerebral artery
I66.12	Occlusion and stenosis of left anterior cerebral artery

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Code	Description
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery
I66.21	Occlusion and stenosis of right posterior cerebral artery
I66.22	Occlusion and stenosis of left posterior cerebral artery
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery
I66.3	Occlusion and stenosis of cerebellar arteries
I66.8	Occlusion and stenosis of other cerebral arteries
I66.9	Occlusion and stenosis of unspecified cerebral artery
I67.2	Cerebral atherosclerosis
I67.5	Moyamoya disease
I67.81	Acute cerebrovascular insufficiency
I67.82	Cerebral ischemia
I67.841	Reversible cerebrovascular vasoconstriction syndrome
I67.848	Other cerebrovascular vasospasm and vasoconstriction
I67.89	Other cerebrovascular disease
I69.00	Unspecified sequelae of nontraumatic subarachnoid hemorrhage
I69.010	Attention and concentration deficit following nontraumatic subarachnoid hemorrhage
I69.011	Memory deficit following nontraumatic subarachnoid hemorrhage
I69.012	Visuospatial deficit and spatial neglect following nontraumatic subarachnoid hemorrhage
I69.013	Psychomotor deficit following nontraumatic subarachnoid hemorrhage
I69.014	Frontal lobe and executive function deficit following nontraumatic subarachnoid hemorrhage
I69.015	Cognitive social or emotional deficit following nontraumatic subarachnoid hemorrhage
I69.018	Other symptoms and signs involving cognitive functions following nontraumatic subarachnoid hemorrhage
I69.019	Unspecified symptoms and signs involving cognitive functions following nontraumatic subarachnoid hemorrhage
I69.020	Aphasia following nontraumatic subarachnoid hemorrhage
I69.021	Dysphasia following nontraumatic subarachnoid hemorrhage
I69.022	Dysarthria following nontraumatic subarachnoid hemorrhage

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Code	Description
I69.023	Fluency disorder following nontraumatic subarachnoid hemorrhage
I69.028	Other speech and language deficits following nontraumatic subarachnoid hemorrhage
I69.031	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting right dominant side
I69.032	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting left dominant side
I69.033	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting right non-dominant side
I69.034	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting left non-dominant side
I69.039	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting unspecified side
I69.041	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting right dominant side
I69.042	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting left dominant side
I69.043	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting right non-dominant side
I69.044	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting left non-dominant side
I69.049	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting unspecified side
I69.051	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting right dominant side
I69.052	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting left dominant side
I69.053	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting right non-dominant side
I69.054	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting left non-dominant side
I69.059	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting unspecified side
I69.061	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting right dominant side
I69.062	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting left dominant side

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Code	Description
I69.063	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting right non-dominant side
I69.064	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting left non-dominant side
I69.065	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage, bilateral
I69.069	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting unspecified side
I69.090	Apraxia following nontraumatic subarachnoid hemorrhage
I69.091	Dysphagia following nontraumatic subarachnoid hemorrhage
I69.092	Facial weakness following nontraumatic subarachnoid hemorrhage
I69.093	Ataxia following nontraumatic subarachnoid hemorrhage
I69.098	Other sequelae following nontraumatic subarachnoid hemorrhage
I69.10	Unspecified sequelae of nontraumatic intracerebral hemorrhage
I69.110	Attention and concentration deficit following nontraumatic intracerebral hemorrhage
I69.111	Memory deficit following nontraumatic intracerebral hemorrhage
I69.112	Visuospatial deficit and spatial neglect following nontraumatic intracerebral hemorrhage
I69.113	Psychomotor deficit following nontraumatic intracerebral hemorrhage
I69.114	Frontal lobe and executive function deficit following nontraumatic intracerebral hemorrhage
I69.115	Cognitive social or emotional deficit following nontraumatic intracerebral hemorrhage
I69.118	Other symptoms and signs involving cognitive functions following nontraumatic intracerebral hemorrhage
I69.119	Unspecified symptoms and signs involving cognitive functions following nontraumatic intracerebral hemorrhage
I69.120	Aphasia following nontraumatic intracerebral hemorrhage
I69.121	Dysphasia following nontraumatic intracerebral hemorrhage
I69.122	Dysarthria following nontraumatic intracerebral hemorrhage
I69.123	Fluency disorder following nontraumatic intracerebral hemorrhage
I69.128	Other speech and language deficits following nontraumatic intracerebral hemorrhage
I69.131	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting right dominant side
I69.132	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting left dominant side



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Code	Description
I69.133	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting right non-dominant side
I69.134	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting left non-dominant side
I69.139	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting unspecified side
I69.141	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting right dominant side
I69.142	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting left dominant side
I69.143	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting right non-dominant side
I69.144	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting left non-dominant side
I69.149	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting unspecified side
I69.151	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting right dominant side
I69.152	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting left dominant side
I69.153	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting right non-dominant side
I69.154	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting left non-dominant side
I69.159	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting unspecified side
I69.161	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting right dominant side
I69.162	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting left dominant side
I69.163	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting right non-dominant side
I69.164	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting left non-dominant side
I69.165	Other paralytic syndrome following nontraumatic intracerebral hemorrhage, bilateral



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Code	Description
I69.169	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting unspecified side
I69.190	Apraxia following nontraumatic intracerebral hemorrhage
I69.191	Dysphagia following nontraumatic intracerebral hemorrhage
I69.192	Facial weakness following nontraumatic intracerebral hemorrhage
I69.193	Ataxia following nontraumatic intracerebral hemorrhage
I69.198	Other sequelae of nontraumatic intracerebral hemorrhage
I69.20	Unspecified sequelae of other nontraumatic intracranial hemorrhage
I69.210	Attention and concentration deficit following other nontraumatic intracranial hemorrhage
I69.211	Memory deficit following other nontraumatic intracranial hemorrhage
I69.212	Visuospatial deficit and spatial neglect following other nontraumatic intracranial hemorrhage
I69.213	Psychomotor deficit following other nontraumatic intracranial hemorrhage
I69.214	Frontal lobe and executive function deficit following other nontraumatic intracranial hemorrhage
I69.215	Cognitive social or emotional deficit following other nontraumatic intracranial hemorrhage
I69.218	Other symptoms and signs involving cognitive functions following other nontraumatic intracranial hemorrhage
I69.219	Unspecified symptoms and signs involving cognitive functions following other nontraumatic intracranial hemorrhage
I69.220	Aphasia following other nontraumatic intracranial hemorrhage
I69.221	Dysphasia following other nontraumatic intracranial hemorrhage
I69.222	Dysarthria following other nontraumatic intracranial hemorrhage
I69.223	Fluency disorder following other nontraumatic intracranial hemorrhage
I69.228	Other speech and language deficits following other nontraumatic intracranial hemorrhage
I69.231	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting right dominant side
I69.232	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting left dominant side
I69.233	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting right non-dominant side
I69.234	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting left non-dominant side

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Code	Description
I69.239	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting unspecified side
I69.241	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting right dominant side
I69.242	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting left dominant side
I69.243	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting right non-dominant side
I69.244	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting left non-dominant side
I69.249	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting unspecified side
I69.251	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting right dominant side
I69.252	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting left dominant side
I69.253	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting right non-dominant side
I69.254	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting left non-dominant side
I69.259	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting unspecified side
I69.261	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting right dominant side
I69.262	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting left dominant side
I69.263	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting right non-dominant side
I69.264	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting left non-dominant side
I69.265	Other paralytic syndrome following other nontraumatic intracranial hemorrhage, bilateral
I69.269	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting unspecified side
I69.290	Apraxia following other nontraumatic intracranial hemorrhage
I69.291	Dysphagia following other nontraumatic intracranial hemorrhage
I69.292	Facial weakness following other nontraumatic intracranial hemorrhage

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Code	Description
I69.293	Ataxia following other nontraumatic intracranial hemorrhage
I69.298	Other sequelae of other nontraumatic intracranial hemorrhage
I69.30	Unspecified sequelae of cerebral infarction
I69.310	Attention and concentration deficit following cerebral infarction
I69.311	Memory deficit following cerebral infarction
I69.312	Visuospatial deficit and spatial neglect following cerebral infarction
I69.313	Psychomotor deficit following cerebral infarction
I69.314	Frontal lobe and executive function deficit following cerebral infarction
I69.315	Cognitive social or emotional deficit following cerebral infarction
I69.318	Other symptoms and signs involving cognitive functions following cerebral infarction
I69.319	Unspecified symptoms and signs involving cognitive functions following cerebral infarction
I69.320	Aphasia following cerebral infarction
I69.321	Dysphasia following cerebral infarction
I69.322	Dysarthria following cerebral infarction
I69.323	Fluency disorder following cerebral infarction
I69.328	Other speech and language deficits following cerebral infarction
I69.331	Monoplegia of upper limb following cerebral infarction affecting right dominant side
I69.332	Monoplegia of upper limb following cerebral infarction affecting left dominant side
I69.333	Monoplegia of upper limb following cerebral infarction affecting right non-dominant side
I69.334	Monoplegia of upper limb following cerebral infarction affecting left non-dominant side
I69.339	Monoplegia of upper limb following cerebral infarction affecting unspecified side
I69.341	Monoplegia of lower limb following cerebral infarction affecting right dominant side
I69.342	Monoplegia of lower limb following cerebral infarction affecting left dominant side
I69.343	Monoplegia of lower limb following cerebral infarction affecting right non-dominant side
I69.344	Monoplegia of lower limb following cerebral infarction affecting left non-dominant side
I69.349	Monoplegia of lower limb following cerebral infarction affecting unspecified side
I69.351	Hemiplegia and hemiparesis following cerebral infarction affecting right dominant side
I69.352	Hemiplegia and hemiparesis following cerebral infarction affecting left dominant side
I69.353	Hemiplegia and hemiparesis following cerebral infarction affecting right non-dominant side
I69.354	Hemiplegia and hemiparesis following cerebral infarction affecting left non-dominant side



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Code	Description
I69.359	Hemiplegia and hemiparesis following cerebral infarction affecting unspecified side
I69.361	Other paralytic syndrome following cerebral infarction affecting right dominant side
I69.362	Other paralytic syndrome following cerebral infarction affecting left dominant side
I69.363	Other paralytic syndrome following cerebral infarction affecting right non-dominant side
I69.364	Other paralytic syndrome following cerebral infarction affecting left non-dominant side
I69.365	Other paralytic syndrome following cerebral infarction, bilateral
I69.369	Other paralytic syndrome following cerebral infarction affecting unspecified side
I69.390	Apraxia following cerebral infarction
I69.391	Dysphagia following cerebral infarction
I69.392	Facial weakness following cerebral infarction
I69.393	Ataxia following cerebral infarction
I69.398	Other sequelae of cerebral infarction
I69.80	Unspecified sequelae of other cerebrovascular disease
I69.810	Attention and concentration deficit following other cerebrovascular disease
I69.811	Memory deficit following other cerebrovascular disease
I69.812	Visuospatial deficit and spatial neglect following other cerebrovascular disease
I69.813	Psychomotor deficit following other cerebrovascular disease
I69.814	Frontal lobe and executive function deficit following other cerebrovascular disease
I69.815	Cognitive social or emotional deficit following other cerebrovascular disease
I69.818	Other symptoms and signs involving cognitive functions following other cerebrovascular disease
I69.819	Unspecified symptoms and signs involving cognitive functions following other cerebrovascular disease
I69.820	Aphasia following other cerebrovascular disease
I69.821	Dysphasia following other cerebrovascular disease
I69.822	Dysarthria following other cerebrovascular disease
I69.823	Fluency disorder following other cerebrovascular disease
I69.828	Other speech and language deficits following other cerebrovascular disease
I69.831	Monoplegia of upper limb following other cerebrovascular disease affecting right dominant side
I69.832	Monoplegia of upper limb following other cerebrovascular disease affecting left dominant side

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Code	Description
I69.833	Monoplegia of upper limb following other cerebrovascular disease affecting right non-dominant side
I69.834	Monoplegia of upper limb following other cerebrovascular disease affecting left non-dominant side
I69.839	Monoplegia of upper limb following other cerebrovascular disease affecting unspecified side
I69.841	Monoplegia of lower limb following other cerebrovascular disease affecting right dominant side
I69.842	Monoplegia of lower limb following other cerebrovascular disease affecting left dominant side
I69.843	Monoplegia of lower limb following other cerebrovascular disease affecting right non-dominant side
I69.844	Monoplegia of lower limb following other cerebrovascular disease affecting left non-dominant side
I69.849	Monoplegia of lower limb following other cerebrovascular disease affecting unspecified side
I69.851	Hemiplegia and hemiparesis following other cerebrovascular disease affecting right dominant side
I69.852	Hemiplegia and hemiparesis following other cerebrovascular disease affecting left dominant side
I69.853	Hemiplegia and hemiparesis following other cerebrovascular disease affecting right non-dominant side
I69.854	Hemiplegia and hemiparesis following other cerebrovascular disease affecting left non-dominant side
I69.859	Hemiplegia and hemiparesis following other cerebrovascular disease affecting unspecified side
I69.861	Other paralytic syndrome following other cerebrovascular disease affecting right dominant side
I69.862	Other paralytic syndrome following other cerebrovascular disease affecting left dominant side
I69.863	Other paralytic syndrome following other cerebrovascular disease affecting right non-dominant side
I69.864	Other paralytic syndrome following other cerebrovascular disease affecting left non-dominant side
I69.865	Other paralytic syndrome following other cerebrovascular disease, bilateral



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Code	Description
I69.869	Other paralytic syndrome following other cerebrovascular disease affecting unspecified side
I69.890	Apraxia following other cerebrovascular disease
I69.891	Dysphagia following other cerebrovascular disease
I69.892	Facial weakness following other cerebrovascular disease
I69.893	Ataxia following other cerebrovascular disease
I69.898	Other sequelae of other cerebrovascular disease
I69.90	Unspecified sequelae of unspecified cerebrovascular disease
I69.910	Attention and concentration deficit following unspecified cerebrovascular disease
I69.911	Memory deficit following unspecified cerebrovascular disease
I69.912	Visuospatial deficit and spatial neglect following unspecified cerebrovascular disease
I69.913	Psychomotor deficit following unspecified cerebrovascular disease
I69.914	Frontal lobe and executive function deficit following unspecified cerebrovascular disease
I69.915	Cognitive social or emotional deficit following unspecified cerebrovascular disease
I69.918	Other symptoms and signs involving cognitive functions following unspecified cerebrovascular disease
I69.919	Unspecified symptoms and signs involving cognitive functions following unspecified cerebrovascular disease
I69.920	Aphasia following unspecified cerebrovascular disease
I69.921	Dysphasia following unspecified cerebrovascular disease
I69.922	Dysarthria following unspecified cerebrovascular disease
I69.923	Fluency disorder following unspecified cerebrovascular disease
I69.928	Other speech and language deficits following unspecified cerebrovascular disease
I69.931	Monoplegia of upper limb following unspecified cerebrovascular disease affecting right dominant side
I69.932	Monoplegia of upper limb following unspecified cerebrovascular disease affecting left dominant side
I69.933	Monoplegia of upper limb following unspecified cerebrovascular disease affecting right non-dominant side
I69.934	Monoplegia of upper limb following unspecified cerebrovascular disease affecting left non-dominant side
I69.939	Monoplegia of upper limb following unspecified cerebrovascular disease affecting unspecified side

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Code	Description
I69.941	Monoplegia of lower limb following unspecified cerebrovascular disease affecting right dominant side
I69.942	Monoplegia of lower limb following unspecified cerebrovascular disease affecting left dominant side
I69.943	Monoplegia of lower limb following unspecified cerebrovascular disease affecting right non-dominant side
I69.944	Monoplegia of lower limb following unspecified cerebrovascular disease affecting left non-dominant side
I69.949	Monoplegia of lower limb following unspecified cerebrovascular disease affecting unspecified side
I69.951	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting right dominant side
I69.952	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting left dominant side
I69.953	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting right non-dominant side
I69.954	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting left non-dominant side
I69.959	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting unspecified side
I69.961	Other paralytic syndrome following unspecified cerebrovascular disease affecting right dominant side
I69.962	Other paralytic syndrome following unspecified cerebrovascular disease affecting left dominant side
I69.963	Other paralytic syndrome following unspecified cerebrovascular disease affecting right non-dominant side
I69.964	Other paralytic syndrome following unspecified cerebrovascular disease affecting left non-dominant side
I69.965	Other paralytic syndrome following unspecified cerebrovascular disease, bilateral
I69.969	Other paralytic syndrome following unspecified cerebrovascular disease affecting unspecified side
I69.990	Apraxia following unspecified cerebrovascular disease
I69.991	Dysphagia following unspecified cerebrovascular disease
I69.992	Facial weakness following unspecified cerebrovascular disease
I69.993	Ataxia following unspecified cerebrovascular disease

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Code	Description
I69.998	Other sequelae following unspecified cerebrovascular disease
I70.0	Atherosclerosis of aorta
I70.1	Atherosclerosis of renal artery
I70.201	Unspecified atherosclerosis of native arteries of extremities, right leg
I70.202	Unspecified atherosclerosis of native arteries of extremities, left leg
I70.203	Unspecified atherosclerosis of native arteries of extremities, bilateral legs
I70.208	Unspecified atherosclerosis of native arteries of extremities, other extremity
I70.209	Unspecified atherosclerosis of native arteries of extremities, unspecified extremity
I70.211	Atherosclerosis of native arteries of extremities with intermittent claudication, right leg
I70.212	Atherosclerosis of native arteries of extremities with intermittent claudication, left leg
I70.213	Atherosclerosis of native arteries of extremities with intermittent claudication, bilateral legs
I70.218	Atherosclerosis of native arteries of extremities with intermittent claudication, other extremity
I70.219	Atherosclerosis of native arteries of extremities with intermittent claudication, unspecified extremity
I70.221	Atherosclerosis of native arteries of extremities with rest pain, right leg
I70.222	Atherosclerosis of native arteries of extremities with rest pain, left leg
I70.223	Atherosclerosis of native arteries of extremities with rest pain, bilateral legs
I70.228	Atherosclerosis of native arteries of extremities with rest pain, other extremity
I70.229	Atherosclerosis of native arteries of extremities with rest pain, unspecified extremity
I70.231	Atherosclerosis of native arteries of right leg with ulceration of thigh
I70.232	Atherosclerosis of native arteries of right leg with ulceration of calf
I70.233	Atherosclerosis of native arteries of right leg with ulceration of ankle
I70.234	Atherosclerosis of native arteries of right leg with ulceration of heel and midfoot
I70.235	Atherosclerosis of native arteries of right leg with ulceration of other part of foot
I70.238	Atherosclerosis of native arteries of right leg with ulceration of other part of lower right leg
I70.239	Atherosclerosis of native arteries of right leg with ulceration of unspecified site
I70.241	Atherosclerosis of native arteries of left leg with ulceration of thigh
I70.242	Atherosclerosis of native arteries of left leg with ulceration of calf
I70.243	Atherosclerosis of native arteries of left leg with ulceration of ankle
I70.244	Atherosclerosis of native arteries of left leg with ulceration of heel and midfoot

NCD 190.23

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.245	Atherosclerosis of native arteries of left leg with ulceration of other part of foot
I70.248	Atherosclerosis of native arteries of left leg with ulceration of other part of lower left leg
I70.249	Atherosclerosis of native arteries of left leg with ulceration of unspecified site
I70.25	Atherosclerosis of native arteries of other extremities with ulceration
I70.261	Atherosclerosis of native arteries of extremities with gangrene, right leg
I70.262	Atherosclerosis of native arteries of extremities with gangrene, left leg
I70.263	Atherosclerosis of native arteries of extremities with gangrene, bilateral legs
I70.268	Atherosclerosis of native arteries of extremities with gangrene, other extremity
I70.269	Atherosclerosis of native arteries of extremities with gangrene, unspecified extremity
I70.291	Other atherosclerosis of native arteries of extremities, right leg
I70.292	Other atherosclerosis of native arteries of extremities, left leg
I70.293	Other atherosclerosis of native arteries of extremities, bilateral legs
I70.298	Other atherosclerosis of native arteries of extremities, other extremity
I70.299	Other atherosclerosis of native arteries of extremities, unspecified extremity
I70.301	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg
I70.302	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg
I70.303	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs
I70.308	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity
I70.309	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, unspecified extremity
I70.311	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, right leg
I70.312	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, left leg
I70.313	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs
I70.318	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, other extremity
I70.319	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, unspecified extremity

NCD 190.23

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.321	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, right leg
I70.322	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, left leg
I70.323	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, bilateral legs
I70.328	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, other extremity
I70.329	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.331	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of thigh
I70.332	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of calf
I70.333	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of ankle
I70.334	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.335	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of foot
I70.338	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.339	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of unspecified site
I70.341	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of thigh
I70.342	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of calf
I70.343	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of ankle
I70.344	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.345	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of foot
I70.348	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.349	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of unspecified site
I70.35	Atherosclerosis of unspecified type of bypass graft(s) of other extremity with ulceration

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.361	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, right leg
I70.362	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, left leg
I70.363	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, bilateral legs
I70.368	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, other extremity
I70.369	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.391	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg
I70.392	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg
I70.393	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs
I70.398	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity
I70.399	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, unspecified extremity
I70.401	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, right leg
I70.402	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, left leg
I70.403	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs
I70.408	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, other extremity
I70.409	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, unspecified extremity
I70.411	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, right leg
I70.412	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, left leg
I70.413	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, bilateral legs
I70.418	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, other extremity
I70.419	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, unspecified extremity

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Code	Description
I70.421	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, right leg
I70.422	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, left leg
I70.423	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, bilateral legs
I70.428	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, other extremity
I70.429	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.431	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of thigh
I70.432	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of calf
I70.433	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of ankle
I70.434	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.435	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of foot
I70.438	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.439	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of unspecified site
I70.441	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of thigh
I70.442	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of calf
I70.443	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of ankle
I70.444	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.445	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of foot
I70.448	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.449	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of unspecified site
I70.45	Atherosclerosis of autologous vein bypass graft(s) of other extremity with ulceration
I70.461	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, right leg
I70.462	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, left leg

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Code	Description
I70.463	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, bilateral legs
I70.468	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, other extremity
I70.469	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.491	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, right leg
I70.492	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, left leg
I70.493	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs
I70.498	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, other extremity
I70.499	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, unspecified extremity
I70.501	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, right leg
I70.502	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, left leg
I70.503	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, bilateral legs
I70.508	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, other extremity
I70.509	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, unspecified extremity
I70.511	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, right leg
I70.512	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, left leg
I70.513	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, bilateral legs
I70.518	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, other extremity
I70.519	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, unspecified extremity
I70.521	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, right leg
I70.522	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, left leg

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.523	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, bilateral legs
I70.528	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, other extremity
I70.529	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.531	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of thigh
I70.532	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of calf
I70.533	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of ankle
I70.534	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.535	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of foot
I70.538	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.539	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of unspecified site
I70.541	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of thigh
I70.542	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of calf
I70.543	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of ankle
I70.544	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.545	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of foot
I70.548	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.549	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of unspecified site
I70.55	Atherosclerosis of nonautologous biological bypass graft(s) of other extremity with ulceration

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.561	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, right leg
I70.562	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, left leg
I70.563	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, bilateral legs
I70.568	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, other extremity
I70.569	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.591	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, right leg
I70.592	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, left leg
I70.593	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, bilateral legs
I70.598	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, other extremity
I70.599	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, unspecified extremity
I70.601	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, right leg
I70.602	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, left leg
I70.603	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, bilateral legs
I70.608	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, other extremity
I70.609	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, unspecified extremity
I70.611	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, right leg
I70.612	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, left leg
I70.613	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, bilateral legs
I70.618	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, other extremity



**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.619	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, unspecified extremity
I70.621	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, right leg
I70.622	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, left leg
I70.623	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, bilateral legs
I70.628	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, other extremity
I70.629	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.631	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of thigh
I70.632	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of calf
I70.633	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of ankle
I70.634	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.635	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of foot
I70.638	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.639	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of unspecified site
I70.641	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of thigh
I70.642	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of calf
I70.643	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of ankle
I70.644	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.645	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of foot
I70.648	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.649	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of unspecified site
I70.65	Atherosclerosis of nonbiological bypass graft(s) of other extremity with ulceration
I70.661	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, right leg

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Code	Description
I70.662	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, left leg
I70.663	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, bilateral legs
I70.668	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, other extremity
I70.669	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, unspecified extremity
I70.691	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, right leg
I70.692	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, left leg
I70.693	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, bilateral legs
I70.698	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, other extremity
I70.699	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, unspecified extremity
I70.701	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, right leg
I70.702	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, left leg
I70.703	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, bilateral legs
I70.708	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, other extremity
I70.709	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, unspecified extremity
I70.711	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, right leg
I70.712	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, left leg
I70.713	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs
I70.718	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, other extremity
I70.719	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, unspecified extremity
I70.721	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, right leg
I70.722	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, left leg
I70.723	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, bilateral legs



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Code	Description
I70.728	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, other extremity
I70.729	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, unspecified extremity
I70.731	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of thigh
I70.732	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of calf
I70.733	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of ankle
I70.734	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of heel and midfoot
I70.735	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of foot
I70.738	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of lower leg
I70.739	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of unspecified site
I70.741	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of thigh
I70.742	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of calf
I70.743	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of ankle
I70.744	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of heel and midfoot
I70.745	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of foot
I70.748	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of lower leg
I70.749	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of unspecified site
I70.75	Atherosclerosis of other type of bypass graft(s) of other extremity with ulceration
I70.761	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, right leg
I70.762	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, left leg
I70.763	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, bilateral legs
I70.768	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, other extremity
I70.769	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, unspecified extremity

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I70.791	Other atherosclerosis of other type of bypass graft(s) of the extremities, right leg
I70.792	Other atherosclerosis of other type of bypass graft(s) of the extremities, left leg
I70.793	Other atherosclerosis of other type of bypass graft(s) of the extremities, bilateral legs
I70.798	Other atherosclerosis of other type of bypass graft(s) of the extremities, other extremity
I70.799	Other atherosclerosis of other type of bypass graft(s) of the extremities, unspecified extremity
I70.8	Atherosclerosis of other arteries
I70.90	Unspecified atherosclerosis
I70.91	Generalized atherosclerosis
I70.92	Chronic total occlusion of artery of the extremities
I71.00	Dissection of unspecified site of aorta
I71.01	Dissection of thoracic aorta
I71.02	Dissection of abdominal aorta
I71.03	Dissection of thoracoabdominal aorta
I71.1	Thoracic aortic aneurysm, ruptured
I71.2	Thoracic aortic aneurysm, without rupture
I71.3	Abdominal aortic aneurysm, ruptured
I71.4	Abdominal aortic aneurysm, without rupture
I71.5	Thoracoabdominal aortic aneurysm, ruptured
I71.6	Thoracoabdominal aortic aneurysm, without rupture
I71.8	Aortic aneurysm of unspecified site, ruptured
I71.9	Aortic aneurysm of unspecified site, without rupture
I72.1	Aneurysm of artery of upper extremity
I72.2	Aneurysm of renal artery
I72.3	Aneurysm of iliac artery
*I72.5 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Aneurysm of other precerebral arteries



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Code	Description
*I72.6 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Aneurysm of vertebral artery
I74.01	Saddle embolus of abdominal aorta
I74.09	Other arterial embolism and thrombosis of abdominal aorta
I74.10	Embolism and thrombosis of unspecified parts of aorta
I74.11	Embolism and thrombosis of thoracic aorta
I74.19	Embolism and thrombosis of other parts of aorta
I74.2	Embolism and thrombosis of arteries of the upper extremities
I74.3	Embolism and thrombosis of arteries of the lower extremities
I74.4	Embolism and thrombosis of arteries of extremities, unspecified
I74.5	Embolism and thrombosis of iliac artery
I74.8	Embolism and thrombosis of other arteries
I74.9	Embolism and thrombosis of unspecified artery
*I77.70 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Dissection of unspecified artery
*I77.75 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Dissection of other precerebral arteries
*I77.76 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Dissection of artery of upper extremity
*I77.77 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Dissection of artery of lower extremity
I79.0	Aneurysm of aorta in diseases classified elsewhere



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Code	Description
K55.1	Chronic vascular disorders of intestine
K74.1	Hepatic sclerosis
K74.2	Hepatic fibrosis with hepatic sclerosis
K75.81	Nonalcoholic steatohepatitis (NASH)
K76.0	Fatty (change of) liver, not elsewhere classified
K76.1	Chronic passive congestion of liver
K76.5	Hepatic veno-occlusive disease
K76.81	Hepatopulmonary syndrome
K76.89	Other specified diseases of liver
K76.9	Liver disease, unspecified
K77	Liver disorders in diseases classified elsewhere
K85.00	Idiopathic acute pancreatitis without necrosis or infection
K85.01	Idiopathic acute pancreatitis with uninfected necrosis
K85.02	Idiopathic acute pancreatitis with infected necrosis
K85.10	Biliary acute pancreatitis without necrosis or infection
K85.11	Biliary acute pancreatitis with uninfected necrosis
K85.12	Biliary acute pancreatitis with infected necrosis
K85.20	Alcohol induced acute pancreatitis without necrosis or infection
K85.21	Alcohol induced acute pancreatitis with uninfected necrosis
K85.22	Alcohol induced acute pancreatitis with infected necrosis
K85.30	Drug induced acute pancreatitis without necrosis or infection
K85.31	Drug induced acute pancreatitis with uninfected necrosis
K85.32	Drug induced acute pancreatitis with infected necrosis
K85.80	Other acute pancreatitis without necrosis or infection
K85.81	Other acute pancreatitis with uninfected necrosis
K85.82	Other acute pancreatitis with infected necrosis
K85.90	Acute pancreatitis without necrosis or infection, unspecified
K85.91	Acute pancreatitis with uninfected necrosis, unspecified
K85.92	Acute pancreatitis with infected necrosis, unspecified
K86.0	Alcohol-induced chronic pancreatitis

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Code	Description
K86.1	Other chronic pancreatitis
K86.2	Cyst of pancreas
K86.3	Pseudocyst of pancreas
K86.81	Exocrine pancreatic insufficiency
K86.89	Other specified diseases of pancreas
K86.9	Disease of pancreas, unspecified
K87	Disorders of gallbladder, biliary tract and pancreas in diseases classified elsewhere
K90.41	Non-celiac gluten sensitivity
K90.49	Malabsorption due to intolerance, not elsewhere classified
K90.89	Other intestinal malabsorption
K91.2	Postsurgical malabsorption, not elsewhere classified
L40.0	Psoriasis vulgaris
L40.1	Generalized pustular psoriasis
L40.2	Acrodermatitis continua
L40.3	Pustulosis palmaris et plantaris
L40.4	Guttate psoriasis
L40.50	Arthropathic psoriasis, unspecified
L40.51	Distal interphalangeal psoriatic arthropathy
L40.52	Psoriatic arthritis mutilans
L40.53	Psoriatic spondylitis
L40.54	Psoriatic juvenile arthropathy
L40.59	Other psoriatic arthropathy
L40.8	Other psoriasis
L40.9	Psoriasis, unspecified
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis

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Code	Description
N02.6	Recurrent and persistent hematuria with dense deposit disease
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis
N02.8	Recurrent and persistent hematuria with other morphologic changes
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes
N04.0	Nephrotic syndrome with minor glomerular abnormality
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis
N04.6	Nephrotic syndrome with dense deposit disease
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis
N04.8	Nephrotic syndrome with other morphologic changes
N04.9	Nephrotic syndrome with unspecified morphologic changes
N17.0	Acute kidney failure with tubular necrosis
N18.4	Chronic kidney disease, stage 4 (severe)
N18.5	Chronic kidney disease, stage 5
N18.6	End stage renal disease
N18.9	Chronic kidney disease, unspecified
N25.0	Renal osteodystrophy
N25.1	Nephrogenic diabetes insipidus
N25.81	Secondary hyperparathyroidism of renal origin
N25.89	Other disorders resulting from impaired renal tubular function
N25.9	Disorder resulting from impaired renal tubular function, unspecified
N26.2	Page kidney
N52.01	Erectile dysfunction due to arterial insufficiency
N52.02	Corporo-venous occlusive erectile dysfunction
N52.03	Combined arterial insufficiency and corporo-venous occlusive erectile dysfunction
N52.1	Erectile dysfunction due to diseases classified elsewhere

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Code	Description
N52.2 Covered only for procedure codes 83700, 83701, 83704, & 83721.	Drug-induced erectile dysfunction
N52.31	Erectile dysfunction following radical prostatectomy
N52.32	Erectile dysfunction following radical cystectomy
N52.33	Erectile dysfunction following urethral surgery
N52.34	Erectile dysfunction following simple prostatectomy
*N52.35	*Erectile dysfunction following radiation therapy
*N52.36	*Erectile dysfunction following interstitial seed therapy
*N52.37	*Erectile dysfunction following prostate ablative therapy
N52.39	Other and unspecified postprocedural erectile dysfunction
N52.8	Other male erectile dysfunction
N52.9	Male erectile dysfunction, unspecified
O26.611	Liver and biliary tract disorders in pregnancy, first trimester
O26.612	Liver and biliary tract disorders in pregnancy, second trimester
O26.613	Liver and biliary tract disorders in pregnancy, third trimester
O26.619	Liver and biliary tract disorders in pregnancy, unspecified trimester
O26.62	Liver and biliary tract disorders in childbirth
O90.5	Postpartum thyroiditis
O99.280	Endocrine, nutritional and metabolic diseases complicating pregnancy, unspecified trimester
O99.281	Endocrine, nutritional and metabolic diseases complicating pregnancy, first trimester
O99.282	Endocrine, nutritional and metabolic diseases complicating pregnancy, second trimester
O99.283	Endocrine, nutritional and metabolic diseases complicating pregnancy, third trimester
O99.284	Endocrine, nutritional and metabolic diseases complicating childbirth
P05.10	Newborn small for gestational age, unspecified weight
P05.11	Newborn small for gestational age, less than 500 grams
P05.12	Newborn small for gestational age, 500-749 grams
P05.13	Newborn small for gestational age, 750-999 grams
P05.14	Newborn small for gestational age, 1000-1249 grams

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Code	Description
P05.15	Newborn small for gestational age, 1250-1499 grams
P05.16	Newborn small for gestational age, 1500-1749 grams
P05.17	Newborn small for gestational age, 1750-1999 grams
P05.18	Newborn small for gestational age, 2000-2499 grams
*Q25.21 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Interruption of aortic arch
*Q25.40 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Congenital malformation of aorta unspecified
*Q25.44 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Congenital dilation of aorta
*Q25.45 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Double aortic arch
*Q25.46 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Tortuous aortic arch
*Q25.47 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Right aortic arch
*Q25.48 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Anomalous origin of subclavian artery



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Code	Description
*Q25.49 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Other congenital malformations of aorta
Q44.2	Atresia of bile ducts
Q44.3	Congenital stenosis and stricture of bile ducts
R07.2	Precordial pain
R07.82	Intercostal pain
R07.89	Other chest pain
R07.9	Chest pain, unspecified
R16.0	Hepatomegaly, not elsewhere classified
R16.2	Hepatomegaly with splenomegaly, not elsewhere classified
*R29.700 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 0
*R29.701 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 1
*R29.702 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 2
*R29.703 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 3
*R29.704 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 4



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Code	Description
*R29.705 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 5
*R29.706 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 6
*R29.707 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 7
*R29.708 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 8
*R29.709 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 9
*R29.710 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 10
*R29.711 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 11
*R29.712 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 12



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Code	Description
*R29.713 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 13
*R29.714 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 14
*R29.715 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 15
*R29.716 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 16
*R29.717 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 17
*R29.718 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 18
*R29.719 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 19
*R29.720 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 20



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Code	Description
*R29.721 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 21
*R29.722 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 22
*R29.723 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 23
*R29.724 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 24
*R29.725 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 25
*R29.726 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 26
*R29.727 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 27
*R29.728 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 28



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Code	Description
*R29.729 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 29
*R29.730 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 30
*R29.731 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 31
*R29.732 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 32
*R29.733 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 33
*R29.734 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 34
*R29.735 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 35
*R29.736 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 36



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Code	Description
*R29.737 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 37
*R29.738 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 38
*R29.739 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 39
*R29.740 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 40
*R29.741 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 41
*R29.742 <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*NIHSS score 42
R74.0	Nonspecific elevation of levels of transaminase and lactic acid dehydrogenase [LDH]
R74.8	Abnormal levels of other serum enzymes
R74.9	Abnormal serum enzyme level, unspecified
R78.89	Finding of other specified substances, not normally found in blood
R79.0	Abnormal level of blood mineral
R79.89	Other specified abnormal findings of blood chemistry
R79.9	Abnormal finding of blood chemistry, unspecified
R93.3	Abnormal findings on diagnostic imaging of other parts of digestive tract

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Code	Description
T59.811A	Toxic effect of smoke, accidental (unintentional), initial encounter
T59.812A	Toxic effect of smoke, intentional self-harm, initial encounter
T59.813A	Toxic effect of smoke, assault, initial encounter
T59.814A	Toxic effect of smoke, undetermined, initial encounter
T59.891A	Toxic effect of other specified gases, fumes and vapors, accidental (unintentional), initial encounter
T59.892A	Toxic effect of other specified gases, fumes and vapors, intentional self-harm, initial encounter
T59.893A	Toxic effect of other specified gases, fumes and vapors, assault, initial encounter
T59.894A	Toxic effect of other specified gases, fumes and vapors, undetermined, initial encounter
T59.91XA	Toxic effect of unspecified gases, fumes and vapors, accidental (unintentional), initial encounter
T59.92XA	Toxic effect of unspecified gases, fumes and vapors, intentional self-harm, initial encounter
T59.93XA	Toxic effect of unspecified gases, fumes and vapors, assault, initial encounter
T59.94XA	Toxic effect of unspecified gases, fumes and vapors, undetermined, initial encounter
*T82.855A <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Stenosis of coronary artery stent, initial encounter
*T82.855D <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Stenosis of coronary artery stent, subsequent encounter
*T82.855S <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Stenosis of coronary artery stent, sequela
*T82.856A <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Stenosis of peripheral vascular stent, initial encounter



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Code	Description
*T82.856D <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Stenosis of peripheral vascular stent, subsequent encounter
*T82.856S <i>*Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	*Stenosis of peripheral vascular stent, sequela
T86.10	Unspecified complication of kidney transplant
T86.11	Kidney transplant rejection
T86.12	Kidney transplant failure
T86.13	Kidney transplant infection
T86.19	Other complication of kidney transplant
Z13.6 <i>Covered only for procedure codes 80061, 82465, 83718, & 84778.</i>	Encounter for screening for cardiovascular disorders
Z48.22	Encounter for aftercare following kidney transplant
Z48.23	Encounter for aftercare following liver transplant
Z79.02	Long term (current) use of antithrombotics/antiplatelets
Z79.1	Long term (current) use of non-steroidal anti-inflammatories (NSAID)
Z79.3	Long term (current) use of hormonal contraceptives
*Z79.84	*Long term (current) use of oral hypoglycemic drugs
Z79.899	Other long term (current) drug therapy
*Z83.42	*Family history of familial hypercholesterolemia
*Z84.82 <i>*Covered only for procedure code 83721.</i>	*Family history of sudden infant death syndrome
Z94.0	Kidney transplant status
Z94.4	Liver transplant status



Indications

The medical community recognizes lipid testing as appropriate for evaluating atherosclerotic cardiovascular disease. Conditions in which lipid testing may be indicated include:

- Assessment of patients with atherosclerotic cardiovascular disease
- Evaluation of primary dyslipidemia
- Any form of atherosclerotic disease, or any disease leading to the formation of atherosclerotic disease
- Diagnostic evaluation of diseases associated with altered lipid metabolism, such as: nephrotic syndrome, pancreatitis, hepatic disease, and hypo and hyperthyroidism
- Secondary dyslipidemia, including diabetes mellitus, disorders of gastrointestinal absorption, chronic renal failure
- Signs or symptoms of dyslipidemias, such as skin lesions
- As follow-up to the initial screen for coronary heart disease (total cholesterol + HDL cholesterol) when total cholesterol is determined to be high (>240 mg/dL), or borderline-high (200-240 mg/dL) plus two or more coronary heart disease risk factors, or an HDL cholesterol <35 mg/dL.

To monitor the progress of patients on anti-lipid dietary management and pharmacologic therapy for the treatment of elevated blood lipid disorders, total cholesterol, HDL cholesterol and LDL cholesterol may be used. Triglycerides may be obtained if this lipid fraction is also elevated or if the patient is put on drugs (for example, thiazide diuretics, beta blockers, estrogens, glucocorticoids, and tamoxifen) which may raise the triglyceride level.

When monitoring long-term anti-lipid dietary or pharmacologic therapy and when following patients with borderline high total or LDL cholesterol levels, it may be reasonable to perform the lipid panel annually. A lipid panel at a yearly interval will usually be adequate while measurement of the serum total cholesterol or a measured LDL should suffice for interim visits if the patient does not have hypertriglyceridemia.

Any one component of the panel or a measured LDL may be reasonable and necessary up to six times the first year for monitoring dietary or pharmacologic therapy. More frequent total cholesterol HDL cholesterol, LDL cholesterol and triglyceride testing may be indicated for marked elevations or for changes to anti-lipid therapy due to inadequate initial patient response to dietary or pharmacologic therapy. The LDL cholesterol or total cholesterol may be measured three times yearly after treatment goals have been achieved.

Electrophoretic or other quantitation of lipoproteins may be indicated if the patient has a primary disorder of lipid metabolism.

Effective January 1, 2005, the Medicare law expanded coverage to cardiovascular screening services. Several of the procedures included in this NCD may be covered for screening purposes subject to specified frequencies. See 42 CFR 410.17 and section 100, chapter 18, of the Claims Processing Manual, for a full description of this benefit.



Limitations

Lipid panel and hepatic panel testing may be used for patients with severe psoriasis which has not responded to conventional therapy and for which the retinoid etretinate has been prescribed and who have developed hyperlipidemia or hepatic toxicity. Specific examples include erythrodermia and generalized pustular type and psoriasis associated with arthritis. Routine screening and prophylactic testing for lipid disorder are not covered by Medicare. While lipid screening may be medically appropriate, Medicare by statute does not pay for it. Lipid testing in asymptomatic individuals is considered to be screening regardless of the presence of other risk factors such as family history, tobacco use, etc.

Once a diagnosis is established, one or several specific tests are usually adequate for monitoring the course of the disease. Less specific diagnoses (for example, other chest pain) alone do not support medical necessity of these tests.

When monitoring long-term anti-lipid dietary or pharmacologic therapy and when following patients with borderline high total or LDL cholesterol levels, it is reasonable to perform the lipid panel annually. A lipid panel at a yearly interval will usually be adequate while measurement of the serum total cholesterol or a measured LDL should suffice for interim visits if the patient does not have hypertriglyceridemia.

Any one component of the panel or a measured LDL may be medically necessary up to six times the first year for monitoring dietary or pharmacologic therapy. More frequent total cholesterol HDL cholesterol, LDL cholesterol and triglyceride testing may be indicated for marked elevations or for changes to anti-lipid therapy due to inadequate initial patient response to dietary or pharmacologic therapy. The LDL cholesterol or total cholesterol may be measured three times yearly after treatment goals have been achieved.

If no dietary or pharmacological therapy is advised, monitoring is not necessary.

When evaluating non-specific chronic abnormalities of the liver (for example, elevations of transaminase, alkaline phosphatase, abnormal imaging studies, etc.), a lipid panel would generally not be indicated more than twice per year.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

American Diabetes Association. Management of Dyslipidemia in Adults with Diabetes. J. Florida M.A. 1998, 85:2 30-34.

Jialal, I. Evolving lipoprotein risk factors: lipoprotein (a) and oxidizing low-density lipoprotein. Clin Chem 1998; 44:8(B) 1827-1832.

McMorrow, ME, Malarkey, L. Laboratory and Diagnostic Tests: A Pocket Guide. W.B. Saunders Company. 206-207.

U.S. Department of Health and Human Services. National Cholesterol Education Program. Recommendations for Improving Cholesterol Measurement. NIH Publication 90-2964. February 1990.



**Medicare National Coverage Determinations (NCD)
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National Institutes of Health. Second Report of the Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults. NIH Publication 93-3095. September 1993.

Bierman EL. Atherosclerosis and other forms of arteriosclerosis. Harrison's Principles of Internal Medicine. Eds. Isselbacher KJ, Braunwald E, Wilson JD, et al. McGraw-Hill. New York. 1994; 2058-2069.

Brown MS and Goldstein JL. The hyperlipoproteinemias and other disorders of lipid metabolism. Harrison's Principles of Internal Medicine. Eds. Isselbacher KJ, Braunwald E, Wilson JD, et al. McGraw-Hill. New York. 1994; 1106-1116.



190.24 - Digoxin Therapeutic Drug Assay

Description

A digoxin therapeutic drug assay is useful for diagnosis and prevention of digoxin toxicity, and/or prevention for under dosage of digoxin.

HCPCS Codes (Alphanumeric, CPT[®] AMA)

Code	Description
80162	Digoxin (Therapeutic Drug Assay)

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A18.84	Tuberculosis of heart
E00.0	Congenital iodine-deficiency syndrome, neurological type
E00.1	Congenital iodine-deficiency syndrome, myxedematous type
E00.2	Congenital iodine-deficiency syndrome, mixed type
E00.9	Congenital iodine-deficiency syndrome, unspecified
E01.8	Other iodine-deficiency related thyroid disorders and allied conditions
E02	Subclinical iodine-deficiency hypothyroidism
E03.0	Congenital hypothyroidism with diffuse goiter
E03.1	Congenital hypothyroidism without goiter
E03.2	Hypothyroidism due to medicaments and other exogenous substances
E03.3	Postinfectious hypothyroidism
E03.5	Myxedema coma
E03.8	Other specified hypothyroidism
E03.9	Hypothyroidism, unspecified
E05.00	Thyrotoxicosis with diffuse goiter without thyrotoxic crisis or storm
E05.01	Thyrotoxicosis with diffuse goiter with thyrotoxic crisis or storm
E05.10	Thyrotoxicosis with toxic single thyroid nodule without thyrotoxic crisis or storm
E05.11	Thyrotoxicosis with toxic single thyroid nodule with thyrotoxic crisis or storm



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Code	Description
E05.20	Thyrotoxicosis with toxic multinodular goiter without thyrotoxic crisis or storm
E05.21	Thyrotoxicosis with toxic multinodular goiter with thyrotoxic crisis or storm
E05.30	Thyrotoxicosis from ectopic thyroid tissue without thyrotoxic crisis or storm
E05.31	Thyrotoxicosis from ectopic thyroid tissue with thyrotoxic crisis or storm
E05.40	Thyrotoxicosis factitia without thyrotoxic crisis or storm
E05.41	Thyrotoxicosis factitia with thyrotoxic crisis or storm
E05.80	Other thyrotoxicosis without thyrotoxic crisis or storm
E05.81	Other thyrotoxicosis with thyrotoxic crisis or storm
E05.90	Thyrotoxicosis, unspecified without thyrotoxic crisis or storm
E05.91	Thyrotoxicosis, unspecified with thyrotoxic crisis or storm
E06.0	Acute thyroiditis
E06.1	Subacute thyroiditis
E06.2	Chronic thyroiditis with transient thyrotoxicosis
E06.3	Autoimmune thyroiditis
E06.4	Drug-induced thyroiditis
E06.5	Other chronic thyroiditis
E06.9	Thyroiditis, unspecified
E20.1	Pseudohypoparathyroidism
E83.40	Disorders of magnesium metabolism, unspecified
E83.41	Hypermagnesemia
E83.42	Hypomagnesemia
E83.49	Other disorders of magnesium metabolism
E83.50	Unspecified disorder of calcium metabolism
E83.51	Hypocalcemia
E83.52	Hypercalcemia
E83.59	Other disorders of calcium metabolism
E83.81	Hungry bone syndrome
E86.0	Dehydration
E86.1	Hypovolemia
E86.9	Volume depletion, unspecified



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Code	Description
E87.0	Hyperosmolality and hypernatremia
E87.1	Hypo-osmolality and hyponatremia
E87.2	Acidosis
E87.3	Alkalosis
E87.4	Mixed disorder of acid-base balance
E87.5	Hyperkalemia
E87.6	Hypokalemia
E87.70	Fluid overload, unspecified
E87.71	Transfusion associated circulatory overload
E87.79	Other fluid overload
E87.8	Other disorders of electrolyte and fluid balance, not elsewhere classified
E89.0	Postprocedural hypothyroidism
F05	Delirium due to known physiological condition
F51.5	Nightmare disorder
G44.1	Vascular headache, not elsewhere classified
G44.40	Drug-induced headache, not elsewhere classified, not intractable
G44.41	Drug-induced headache, not elsewhere classified, intractable
H53.16	Psychophysical visual disturbances
H53.71	Glare sensitivity
H53.72	Impaired contrast sensitivity
H53.8	Other visual disturbances
H53.9	Unspecified visual disturbance
I08.1	Rheumatic disorders of both mitral and tricuspid valves
I08.2	Rheumatic disorders of both aortic and tricuspid valves
I08.3	Combined rheumatic disorders of mitral, aortic and tricuspid valves
I08.8	Other rheumatic multiple valve diseases
I08.9	Rheumatic multiple valve disease, unspecified
I09.0	Rheumatic myocarditis
I09.1	Rheumatic diseases of endocardium, valve unspecified
I09.81	Rheumatic heart failure

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Code	Description
I11.0	Hypertensive heart disease with heart failure
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease
I20.0	Unstable angina
I20.1	Angina pectoris with documented spasm
I20.8	Other forms of angina pectoris
I20.9	Angina pectoris, unspecified
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery
I21.29	ST elevation (STEMI) myocardial infarction involving other sites
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site
I21.4	Non-ST elevation (NSTEMI) myocardial infarction
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site
I23.1	Atrial septal defect as current complication following acute myocardial infarction

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I23.2	Ventricular septal defect as current complication following acute myocardial infarction
I23.4	Rupture of chordae tendineae as current complication following acute myocardial infarction
I23.5	Rupture of papillary muscle as current complication following acute myocardial infarction
I24.0	Acute coronary thrombosis not resulting in myocardial infarction
I24.1	Dressler's syndrome
I24.8	Other forms of acute ischemic heart disease
I24.9	Acute ischemic heart disease, unspecified
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm



**Medicare National Coverage Determinations (NCD)
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Code	Description
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris
I25.84	Coronary atherosclerosis due to calcified coronary lesion
I40.0	Infective myocarditis
I40.1	Isolated myocarditis

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I40.8	Other acute myocarditis
I40.9	Acute myocarditis, unspecified
I41	Myocarditis in diseases classified elsewhere
I42.0	Dilated cardiomyopathy
I42.1	Obstructive hypertrophic cardiomyopathy
I42.2	Other hypertrophic cardiomyopathy
I42.3	Endomyocardial (eosinophilic) disease
I42.4	Endocardial fibroelastosis
I42.5	Other restrictive cardiomyopathy
I42.6	Alcoholic cardiomyopathy
I42.7	Cardiomyopathy due to drug and external agent
I42.8	Other cardiomyopathies
I42.9	Cardiomyopathy, unspecified
I43	Cardiomyopathy in diseases classified elsewhere
I44.0	Atrioventricular block, first degree
I44.1	Atrioventricular block, second degree
I44.2	Atrioventricular block, complete
I44.30	Unspecified atrioventricular block
I44.39	Other atrioventricular block
I44.4	Left anterior fascicular block
I44.5	Left posterior fascicular block
I44.60	Unspecified fascicular block
I44.69	Other fascicular block
I44.7	Left bundle-branch block, unspecified
I45.0	Right fascicular block
I45.10	Unspecified right bundle-branch block
I45.19	Other right bundle-branch block
I45.2	Bifascicular block
I45.3	Trifascicular block
I45.4	Nonspecific intraventricular block

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**Medicare National Coverage Determinations (NCD)
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Code	Description
I45.5	Other specified heart block
I45.6	Pre-excitation syndrome
I45.81	Long QT syndrome
I45.89	Other specified conduction disorders
I45.9	Conduction disorder, unspecified
I46.2	Cardiac arrest due to underlying cardiac condition
I46.8	Cardiac arrest due to other underlying condition
I46.9	Cardiac arrest, cause unspecified
I47.0	Re-entry ventricular arrhythmia
I47.1	Supraventricular tachycardia
I47.2	Ventricular tachycardia
I47.9	Paroxysmal tachycardia, unspecified
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation
I48.2	Chronic atrial fibrillation
I48.3	Typical atrial flutter
I48.4	Atypical atrial flutter
I48.91	Unspecified atrial fibrillation
I48.92	Unspecified atrial flutter
I49.01	Ventricular fibrillation
I49.02	Ventricular flutter
I49.1	Atrial premature depolarization
I49.2	Junctional premature depolarization
I49.3	Ventricular premature depolarization
I49.40	Unspecified premature depolarization
I49.49	Other premature depolarization
I49.5	Sick sinus syndrome
I49.8	Other specified cardiac arrhythmias
I49.9	Cardiac arrhythmia, unspecified
I50.1	Left ventricular failure



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
I50.20	Unspecified systolic (congestive) heart failure
I50.21	Acute systolic (congestive) heart failure
I50.22	Chronic systolic (congestive) heart failure
I50.23	Acute on chronic systolic (congestive) heart failure
I50.30	Unspecified diastolic (congestive) heart failure
I50.31	Acute diastolic (congestive) heart failure
I50.32	Chronic diastolic (congestive) heart failure
I50.33	Acute on chronic diastolic (congestive) heart failure
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
I50.9	Heart failure, unspecified
I51.0	Cardiac septal defect, acquired
I51.1	Rupture of chordae tendineae, not elsewhere classified
I51.2	Rupture of papillary muscle, not elsewhere classified
I74.01	Saddle embolus of abdominal aorta
I74.09	Other arterial embolism and thrombosis of abdominal aorta
I74.10	Embolism and thrombosis of unspecified parts of aorta
I74.19	Embolism and thrombosis of other parts of aorta
I97.0	Postcardiotomy syndrome
I97.110	Postprocedural cardiac insufficiency following cardiac surgery
I97.111	Postprocedural cardiac insufficiency following other surgery
I97.120	Postprocedural cardiac arrest following cardiac surgery
I97.121	Postprocedural cardiac arrest following other surgery
I97.130	Postprocedural heart failure following cardiac surgery
I97.131	Postprocedural heart failure following other surgery
I97.190	Other postprocedural cardiac functional disturbances following cardiac surgery
I97.191	Other postprocedural cardiac functional disturbances following other surgery
J81.1	Chronic pulmonary edema

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**Medicare National Coverage Determinations (NCD)
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Code	Description
K52.21	Food protein-induced enterocolitis syndrome
K52.22	Food protein-induced enteropathy
K52.29	Other allergic and dietetic gastroenteritis and colitis
K52.89	Other specified noninfective gastroenteritis and colitis
K76.81	Hepatopulmonary syndrome
K90.9	Intestinal malabsorption, unspecified
N17.0	Acute kidney failure with tubular necrosis
N17.1	Acute kidney failure with acute cortical necrosis
N17.2	Acute kidney failure with medullary necrosis
N17.8	Other acute kidney failure
N17.9	Acute kidney failure, unspecified
N18.1	Chronic kidney disease, stage 1
N18.2	Chronic kidney disease, stage 2 (mild)
N18.3	Chronic kidney disease, stage 3 (moderate)
N18.4	Chronic kidney disease, stage 4 (severe)
N18.5	Chronic kidney disease, stage 5
N18.6	End stage renal disease
N18.9	Chronic kidney disease, unspecified
N19	Unspecified kidney failure
N25.0	Renal osteodystrophy
N25.1	Nephrogenic diabetes insipidus
N25.81	Secondary hyperparathyroidism of renal origin
N25.89	Other disorders resulting from impaired renal tubular function
N25.9	Disorder resulting from impaired renal tubular function, unspecified
N26.1	Atrophy of kidney (terminal)
N26.9	Renal sclerosis, unspecified
R00.1	Bradycardia, unspecified
R11.0	Nausea
R11.10	Vomiting, unspecified
R11.11	Vomiting without nausea

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**Medicare National Coverage Determinations (NCD)
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Code	Description
R11.12	Projectile vomiting
R11.14	Bilious vomiting
R11.2	Nausea with vomiting, unspecified
R19.7	Diarrhea, unspecified
R40.0	Somnolence
R40.1	Stupor
R40.20	Unspecified coma
R40.2110	Coma scale, eyes open, never, unspecified time
R40.2111	Coma scale, eyes open, never, in the field [EMT or ambulance]
R40.2112	Coma scale, eyes open, never, at arrival to emergency department
R40.2113	Coma scale, eyes open, never, at hospital admission
R40.2114	Coma scale, eyes open, never, 24 hours or more after hospital admission
R40.2120	Coma scale, eyes open, to pain, unspecified time
R40.2121	Coma scale, eyes open, to pain, in the field [EMT or ambulance]
R40.2122	Coma scale, eyes open, to pain, at arrival to emergency department
R40.2123	Coma scale, eyes open, to pain, at hospital admission
R40.2124	Coma scale, eyes open, to pain, 24 hours or more after hospital admission
R40.2210	Coma scale, best verbal response, none, unspecified time
R40.2211	Coma scale, best verbal response, none, in the field [EMT or ambulance]
R40.2212	Coma scale, best verbal response, none, at arrival to emergency department
R40.2213	Coma scale, best verbal response, none, at hospital admission
R40.2214	Coma scale, best verbal response, none, 24 hours or more after hospital admission
R40.2220	Coma scale, best verbal response, incomprehensible words, unspecified time
R40.2221	Coma scale, best verbal response, incomprehensible words, in the field [EMT or ambulance]
R40.2222	Coma scale, best verbal response, incomprehensible words, at arrival to emergency department
R40.2223	Coma scale, best verbal response, incomprehensible words, at hospital admission
R40.2224	Coma scale, best verbal response, incomprehensible words, 24 hours or more after hospital admission
R40.2310	Coma scale, best motor response, none, unspecified time

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**Medicare National Coverage Determinations (NCD)
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Code	Description
R40.2311	Coma scale, best motor response, none, in the field [EMT or ambulance]
R40.2312	Coma scale, best motor response, none, at arrival to emergency department
R40.2313	Coma scale, best motor response, none, at hospital admission
R40.2314	Coma scale, best motor response, none, 24 hours or more after hospital admission
R40.2320	Coma scale, best motor response, extension, unspecified time
R40.2321	Coma scale, best motor response, extension, in the field [EMT or ambulance]
R40.2322	Coma scale, best motor response, extension, at arrival to emergency department
R40.2323	Coma scale, best motor response, extension, at hospital admission
R40.2324	Coma scale, best motor response, extension, 24 hours or more after hospital admission
R40.2340	Coma scale, best motor response, flexion withdrawal, unspecified time
R40.2341	Coma scale, best motor response, flexion withdrawal, in the field [EMT or ambulance]
R40.2342	Coma scale, best motor response, flexion withdrawal, at arrival to emergency department
R40.2343	Coma scale, best motor response, flexion withdrawal, at hospital admission
R40.2344	Coma scale, best motor response, flexion withdrawal, 24 hours or more after hospital admission
R40.4	Transient alteration of awareness
R42	Dizziness and giddiness
R44.0	Auditory hallucinations
R44.1	Visual hallucinations
R44.2	Other hallucinations
R44.3	Hallucinations, unspecified
R45.0	Nervousness
R45.3	Demoralization and apathy
R45.4	Irritability and anger
R45.86	Emotional lability
R45.87	Impulsiveness
R45.89	Other symptoms and signs involving emotional state
R48.3	Visual agnosia
R51	Headache
R53.1	Weakness
R53.2	Functional quadriplegia

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**Medicare National Coverage Determinations (NCD)
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Code	Description
R53.81	Other malaise
R53.82	Chronic fatigue, unspecified
R53.83	Other fatigue
R55	Syncope and collapse
R63.0	Anorexia
R94.31	Abnormal electrocardiogram [ECG] [EKG]
T46.0X1A	Poisoning by cardiac-stimulant glycosides and drugs of similar action, accidental (unintentional), initial encounter
T46.0X2A	Poisoning by cardiac-stimulant glycosides and drugs of similar action, intentional self-harm, initial encounter
T46.0X3A	Poisoning by cardiac-stimulant glycosides and drugs of similar action, assault, initial encounter
T46.0X4A	Poisoning by cardiac-stimulant glycosides and drugs of similar action, undetermined, initial encounter
*T46.0X5A	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, initial encounter
*T46.0X5S	Adverse effect of cardiac-stimulant glycosides and drugs of similar action, sequela
T46.1X5A	Adverse effect of calcium-channel blockers, initial encounter
T46.2X1A	Poisoning by other antidysrhythmic drugs, accidental (unintentional), initial encounter
T46.2X2A	Poisoning by other antidysrhythmic drugs, intentional self-harm, initial encounter
T46.2X3A	Poisoning by other antidysrhythmic drugs, assault, initial encounter
T46.2X4A	Poisoning by other antidysrhythmic drugs, undetermined, initial encounter
T46.2X5A	Adverse effect of other antidysrhythmic drugs, initial encounter
T50.905A	Adverse effect of unspecified drugs, medicaments and biological substances, initial encounter
T50.995A	Adverse effect of other drugs, medicaments and biological substances, initial encounter
T78.41XA	Arthus phenomenon, initial encounter
T88.52XA	Failed moderate sedation during procedure, initial encounter
*Z79.84	*Long term (current) use of oral hypoglycemic drugs
Z79.899	Other long term (current) drug therapy
*Codes may not be reported as a stand-alone or first-listed code on the claim.	



Indications

Digoxin levels may be performed to monitor drug levels of individuals receiving digoxin therapy because the margin of safety between side effects and toxicity is narrow or because the blood level may not be high enough to achieve the desired clinical effect.

Clinical indications may include individuals on digoxin:

- With symptoms, signs or electrocardiogram (ECG) suggestive of digoxin toxicity
- Taking medications that influence absorption, bioavailability, distribution, and/or elimination of digoxin
- With impaired renal, hepatic, gastrointestinal, or thyroid function
- With pH and/or electrolyte abnormalities
- With unstable cardiovascular status, including myocarditis
- Requiring monitoring of patient compliance

Clinical indications may include individuals:

- Suspected of accidental or intended overdose
- Who have an acceptable cardiac diagnosis (as listed) and for whom an accurate history of use of digoxin is unobtainable

The value of obtaining regular serum digoxin levels is uncertain, but it may be reasonable to check levels once yearly after a steady state is achieved. In addition, it may be reasonable to check the level if:

- Heart failure status worsens
- Renal function deteriorates
- Additional medications are added that could affect the digoxin level
- Signs or symptoms of toxicity develop

Steady state will be reached in approximately 1 week in patients with normal renal function, although 2-3 weeks may be needed in patients with renal impairment. After changes in dosages or the addition of a medication that could affect the digoxin level, it is reasonable to check the digoxin level one week after the change or addition. Based on the clinical situation, in cases of digoxin toxicity, testing may need to be done more than once a week.

Digoxin is indicated for the treatment of patients with heart failure due to systolic dysfunction and for reduction of the ventricular response in patients with atrial fibrillation or flutter. Digoxin may also be indicated to treat other supraventricular arrhythmias, particularly with heart failure.

Limitations

This test is not appropriate for patients on digitoxin or treated with digoxin FAB (fragment antigen binding) antibody.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Doherty JE. Digitalis serum levels: clinical use. *Ann Intern Med* 1971 May; 74(5):787-789.

Duhme DW, Greenblatt DJ, Koch-Weser J. Reduction of digoxin toxicity associated with measurement of serum levels. A report from the Boston Collaborative Drug Surveillance Program. *Ann Intern Med* 1974 Apr; 80(4):516-519



**Medicare National Coverage Determinations (NCD)
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- Goldman RH, Use of Serum Digoxin Levels in Clinical Practice. JAMA 1974, Jul 15, 229(3).
- Howanitz PJ, Steindel SJ. Digoxin therapeutic drug monitoring practices. A College of American Pathologists Q-Probes study of 666 institutions and 18,679 toxic levels. Arch Pathol Lab Med 1993 Jul; 117(7):684-690.
- Marcus FI. Pharmacokinetic interactions between digoxin and other drugs. J Am Coll Cardiol 1985 May; 5(5 Suppl A):82A-90A.
- Rodin SM, Johnson BF. Pharmacokinetic interactions with digoxin. Clin Pharmacokinetics 1988 Oct; 15(4):227-244.
- Smith TW, Butler VP Jr, Haber E. Determination of therapeutic and toxic serum digoxin concentrations by radioimmunoassay. N Engl J Med 1969 Nov 27; 281(22):1212-1216.
- Smith TW, Haber E. Digoxin intoxication: the relationship of clinical presentation to serum digoxin concentration. J Clin Invest 1970, Dec; 49 (12):2377-2386.
- Valdes R. Jr, Jortani SA, Gheorghide M. Standards of laboratory practice: cardiac drug monitoring. National Academy of Clinical Biochemistry. Clin Chem 1998 May; 44(5): 1096-1109.
- Konstam M, Dracup K, Baker D, et al. Heart Failure: Evaluation and Care of Patients with Left-Ventricular Systolic Dysfunction. Clinical Practice Guideline No.11. AHCPR Pub. No. 94-0612. Rockville, MD: Agency for Health Care Policy & Research, Public Health Service, U.S. Dept. of Health and Human Services. June 1994.



190.25 - Alpha-fetoprotein

Other Names/Abbreviations

AFP

Description

Alpha-fetoprotein (AFP) is a polysaccharide found in some carcinomas. It is effective as a biochemical marker for monitoring the response of certain malignancies to therapy.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
82105	Alpha-fetoprotein; serum

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of
Downloads: Lab Code List, at
<http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A52.74	Syphilis of liver and other viscera
B18.0	Chronic viral hepatitis B with delta-agent
B18.1	Chronic viral hepatitis B without delta-agent
B18.2	Chronic viral hepatitis C
B66.1	Clonorchiasis
B66.3	Fascioliasis
C22.0	Liver cell carcinoma
C22.1	Intrahepatic bile duct carcinoma
C22.2	Hepatoblastoma
C22.3	Angiosarcoma of liver
C22.4	Other sarcomas of liver
C22.7	Other specified carcinomas of liver
C22.8	Malignant neoplasm of liver, primary, unspecified as to type
C22.9	Malignant neoplasm of liver, not specified as primary or secondary
C38.1	Malignant neoplasm of anterior mediastinum
C38.2	Malignant neoplasm of posterior mediastinum



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Code	Description
C38.3	Malignant neoplasm of mediastinum, part unspecified
C38.8	Malignant neoplasm of overlapping sites of heart, mediastinum and pleura
C56.1	Malignant neoplasm of right ovary
C56.2	Malignant neoplasm of left ovary
C56.9	Malignant neoplasm of unspecified ovary
C62.00	Malignant neoplasm of unspecified undescended testis
C62.01	Malignant neoplasm of undescended right testis
C62.02	Malignant neoplasm of undescended left testis
C62.10	Malignant neoplasm of unspecified descended testis
C62.11	Malignant neoplasm of descended right testis
C62.12	Malignant neoplasm of descended left testis
C62.90	Malignant neoplasm of unspecified testis, unspecified whether descended or undescended
C62.91	Malignant neoplasm of right testis, unspecified whether descended or undescended
C62.92	Malignant neoplasm of left testis, unspecified whether descended or undescended
C78.1	Secondary malignant neoplasm of mediastinum
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct
C79.60	Secondary malignant neoplasm of unspecified ovary
C79.61	Secondary malignant neoplasm of right ovary
C79.62	Secondary malignant neoplasm of left ovary
C79.82	Secondary malignant neoplasm of genital organs
C7A.00	Malignant carcinoid tumor of unspecified site
C7A.090	Malignant carcinoid tumor of the bronchus and lung
C7A.091	Malignant carcinoid tumor of the thymus
C7A.092	Malignant carcinoid tumor of the stomach
C7A.093	Malignant carcinoid tumor of the kidney
C7A.094	Malignant carcinoid tumor of the foregut, unspecified
C7A.095	Malignant carcinoid tumor of the midgut, unspecified
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified
C7A.098	Malignant carcinoid tumors of other sites
C7B.00	Secondary carcinoid tumors, unspecified site

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**Medicare National Coverage Determinations (NCD)
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Code	Description
C7B.01	Secondary carcinoid tumors of distant lymph nodes
C7B.02	Secondary carcinoid tumors of liver
C7B.03	Secondary carcinoid tumors of bone
C7B.04	Secondary carcinoid tumors of peritoneum
C7B.09	Secondary carcinoid tumors of other sites
C7B.1	Secondary Merkel cell carcinoma
C7B.8	Other secondary neuroendocrine tumors
D13.4	Benign neoplasm of liver
D13.5	Benign neoplasm of extrahepatic bile ducts
D37.6	Neoplasm of uncertain behavior of liver, gallbladder and bile ducts
D64.0	Hereditary sideroblastic anemia
D64.1	Secondary sideroblastic anemia due to disease
D64.2	Secondary sideroblastic anemia due to drugs and toxins
D64.3	Other sideroblastic anemias
D81.810	Biotinidase deficiency
D84.1	Defects in the complement system
E78.2	Mixed hyperlipidemia
E83.00	Disorder of copper metabolism, unspecified
E83.01	Wilson's disease
E83.09	Other disorders of copper metabolism
E83.10	Disorder of iron metabolism, unspecified
E83.110	Hereditary hemochromatosis
E83.111	Hemochromatosis due to repeated red blood cell transfusions
E83.118	Other hemochromatosis
E83.119	Hemochromatosis, unspecified
E83.19	Other disorders of iron metabolism
E84.19	Cystic fibrosis with other intestinal manifestations
E84.9	Cystic fibrosis, unspecified
E88.01	Alpha-1-antitrypsin deficiency
G89.3	Neoplasm related pain (acute) (chronic)



**Medicare National Coverage Determinations (NCD)
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Code	Description
I25.84	Coronary atherosclerosis due to calcified coronary lesion
I74.01	Saddle embolus of abdominal aorta
I74.09	Other arterial embolism and thrombosis of abdominal aorta
I74.10	Embolism and thrombosis of unspecified parts of aorta
I74.19	Embolism and thrombosis of other parts of aorta
*J98.59	*Other diseases of mediastinum, not elsewhere classified
K70.2	Alcoholic fibrosis and sclerosis of liver
K70.30	Alcoholic cirrhosis of liver without ascites
K70.31	Alcoholic cirrhosis of liver with ascites
K73.0	Chronic persistent hepatitis, not elsewhere classified
K73.1	Chronic lobular hepatitis, not elsewhere classified
K73.2	Chronic active hepatitis, not elsewhere classified
K73.8	Other chronic hepatitis, not elsewhere classified
K73.9	Chronic hepatitis, unspecified
K74.0	Hepatic fibrosis
K74.60	Unspecified cirrhosis of liver
K74.69	Other cirrhosis of liver
K75.4	Autoimmune hepatitis
K76.81	Hepatopulmonary syndrome
N44.1	Cyst of tunica albuginea testis
N44.2	Benign cyst of testis
N44.8	Other noninflammatory disorders of the testis
N50.3	Cyst of epididymis
N50.811	Right testicular pain
N50.812	Left testicular pain
N50.819	Testicular pain, unspecified
N50.82	Scrotal pain
N50.89	Other specified disorders of the male genital organs
N53.12	Painful ejaculation
N53.8	Other male sexual dysfunction

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
N53.9	Unspecified male sexual dysfunction
R91.1	Solitary pulmonary nodule
R91.8	Other nonspecific abnormal finding of lung field
R93.1	Abnormal findings on diagnostic imaging of heart and coronary circulation
R93.2	Abnormal findings on diagnostic imaging of liver and biliary tract
R93.5	Abnormal findings on diagnostic imaging of other abdominal regions, including retroperitoneum
R93.8	Abnormal findings on diagnostic imaging of other specified body structures
R97.8	Other abnormal tumor markers
Z17.0	Estrogen receptor positive status [ER+]
Z17.1	Estrogen receptor negative status [ER-]
Z85.05	Personal history of malignant neoplasm of liver
Z85.43	Personal history of malignant neoplasm of ovary
Z85.47	Personal history of malignant neoplasm of testis

Indications

AFP is useful for the diagnosis of hepatocellular carcinoma in high-risk patients (such as alcoholic cirrhosis, cirrhosis of viral etiology, hemochromatosis, and alpha 1-antitrypsin deficiency) and in separating patients with benign hepatocellular neoplasms or metastases from those with hepatocellular carcinoma and, as a non-specific tumor associated antigen, serves in marking germ cell neoplasms of the testis, ovary, retro peritoneum, and mediastinum.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Tatsuta M. Yamamura H. Iishi H. Kasugai H. Okuda S. Value of serum alpha-fetoprotein and ferritin in the diagnosis of hepatocellular carcinoma. *Oncology*. 43(5):306-10, 1986.



190.26 - Carcinoembryonic Antigen

Other Names/Abbreviations

CEA

Description

Carcinoembryonic antigen (CEA) is a protein polysaccharide found in some carcinomas. It is effective as a biochemical marker for monitoring the response of certain malignancies to therapy.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
82378	Carcinoembryonic antigen (CEA)

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
C15.3	Malignant neoplasm of upper third of esophagus
C15.4	Malignant neoplasm of middle third of esophagus
C15.5	Malignant neoplasm of lower third of esophagus
C15.8	Malignant neoplasm of overlapping sites of esophagus
C15.9	Malignant neoplasm of esophagus, unspecified
C16.0	Malignant neoplasm of cardia
C16.1	Malignant neoplasm of fundus of stomach
C16.2	Malignant neoplasm of body of stomach
C16.3	Malignant neoplasm of pyloric antrum
C16.4	Malignant neoplasm of pylorus
C16.5	Malignant neoplasm of lesser curvature of stomach, unspecified
C16.6	Malignant neoplasm of greater curvature of stomach, unspecified
C16.8	Malignant neoplasm of overlapping sites of stomach
C16.9	Malignant neoplasm of stomach, unspecified
C17.0	Malignant neoplasm of duodenum



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
C17.1	Malignant neoplasm of jejunum
C17.2	Malignant neoplasm of ileum
C17.3	Meckel's diverticulum, malignant
C17.8	Malignant neoplasm of overlapping sites of small intestine
C17.9	Malignant neoplasm of small intestine, unspecified
C18.0	Malignant neoplasm of cecum
C18.1	Malignant neoplasm of appendix
C18.2	Malignant neoplasm of ascending colon
C18.3	Malignant neoplasm of hepatic flexure
C18.4	Malignant neoplasm of transverse colon
C18.5	Malignant neoplasm of splenic flexure
C18.6	Malignant neoplasm of descending colon
C18.7	Malignant neoplasm of sigmoid colon
C18.8	Malignant neoplasm of overlapping sites of colon
C18.9	Malignant neoplasm of colon, unspecified
C19	Malignant neoplasm of rectosigmoid junction
C20	Malignant neoplasm of rectum
C21.0	Malignant neoplasm of anus, unspecified
C21.1	Malignant neoplasm of anal canal
C21.2	Malignant neoplasm of cloacogenic zone
C21.8	Malignant neoplasm of overlapping sites of rectum, anus and anal canal
C25.0	Malignant neoplasm of head of pancreas
C25.1	Malignant neoplasm of body of pancreas
C25.2	Malignant neoplasm of tail of pancreas
C25.3	Malignant neoplasm of pancreatic duct
C25.4	Malignant neoplasm of endocrine pancreas
C25.7	Malignant neoplasm of other parts of pancreas
C25.8	Malignant neoplasm of overlapping sites of pancreas
C25.9	Malignant neoplasm of pancreas, unspecified
C26.0	Malignant neoplasm of intestinal tract, part unspecified

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
C33	Malignant neoplasm of trachea
C34.00	Malignant neoplasm of unspecified main bronchus
C34.01	Malignant neoplasm of right main bronchus
C34.02	Malignant neoplasm of left main bronchus
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung
C34.2	Malignant neoplasm of middle lobe, bronchus or lung
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung
C50.011	Malignant neoplasm of nipple and areola, right female breast
C50.012	Malignant neoplasm of nipple and areola, left female breast
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast
C50.021	Malignant neoplasm of nipple and areola, right male breast
C50.022	Malignant neoplasm of nipple and areola, left male breast
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast
C50.111	Malignant neoplasm of central portion of right female breast
C50.112	Malignant neoplasm of central portion of left female breast
C50.119	Malignant neoplasm of central portion of unspecified female breast
C50.121	Malignant neoplasm of central portion of right male breast
C50.122	Malignant neoplasm of central portion of left male breast
C50.129	Malignant neoplasm of central portion of unspecified male breast
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast
C50.611	Malignant neoplasm of axillary tail of right female breast
C50.612	Malignant neoplasm of axillary tail of left female breast
C50.619	Malignant neoplasm of axillary tail of unspecified female breast
C50.621	Malignant neoplasm of axillary tail of right male breast
C50.622	Malignant neoplasm of axillary tail of left male breast
C50.629	Malignant neoplasm of axillary tail of unspecified male breast
C50.811	Malignant neoplasm of overlapping sites of right female breast

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
C50.812	Malignant neoplasm of overlapping sites of left female breast
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast
C50.821	Malignant neoplasm of overlapping sites of right male breast
C50.822	Malignant neoplasm of overlapping sites of left male breast
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast
C50.911	Malignant neoplasm of unspecified site of right female breast
C50.912	Malignant neoplasm of unspecified site of left female breast
C50.919	Malignant neoplasm of unspecified site of unspecified female breast
C50.921	Malignant neoplasm of unspecified site of right male breast
C50.922	Malignant neoplasm of unspecified site of left male breast
C50.929	Malignant neoplasm of unspecified site of unspecified male breast
C56.1	Malignant neoplasm of right ovary
C56.2	Malignant neoplasm of left ovary
C56.9	Malignant neoplasm of unspecified ovary
C78.00	Secondary malignant neoplasm of unspecified lung
C78.01	Secondary malignant neoplasm of right lung
C78.02	Secondary malignant neoplasm of left lung
C78.4	Secondary malignant neoplasm of small intestine
C78.5	Secondary malignant neoplasm of large intestine and rectum
C7A.00	Malignant carcinoid tumor of unspecified site
C7A.010	Malignant carcinoid tumor of the duodenum
C7A.011	Malignant carcinoid tumor of the jejunum
C7A.012	Malignant carcinoid tumor of the ileum
C7A.019	Malignant carcinoid tumor of the small intestine, unspecified portion
C7A.020	Malignant carcinoid tumor of the appendix
C7A.021	Malignant carcinoid tumor of the cecum
C7A.022	Malignant carcinoid tumor of the ascending colon
C7A.023	Malignant carcinoid tumor of the transverse colon
C7A.024	Malignant carcinoid tumor of the descending colon
C7A.025	Malignant carcinoid tumor of the sigmoid colon

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
C7A.026	Malignant carcinoid tumor of the rectum
C7A.029	Malignant carcinoid tumor of the large intestine, unspecified portion
C7A.090	Malignant carcinoid tumor of the bronchus and lung
C7A.091	Malignant carcinoid tumor of the thymus
C7A.092	Malignant carcinoid tumor of the stomach
C7A.093	Malignant carcinoid tumor of the kidney
C7A.094	Malignant carcinoid tumor of the foregut, unspecified
C7A.095	Malignant carcinoid tumor of the midgut, unspecified
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified
C7A.098	Malignant carcinoid tumors of other sites
C7B.00	Secondary carcinoid tumors, unspecified site
C7B.01	Secondary carcinoid tumors of distant lymph nodes
C7B.02	Secondary carcinoid tumors of liver
C7B.03	Secondary carcinoid tumors of bone
C7B.04	Secondary carcinoid tumors of peritoneum
C7B.09	Secondary carcinoid tumors of other sites
C7B.1	Secondary Merkel cell carcinoma
C7B.8	Other secondary neuroendocrine tumors
D01.0	Carcinoma in situ of colon
D01.1	Carcinoma in situ of rectosigmoid junction
D01.2	Carcinoma in situ of rectum
D01.40	Carcinoma in situ of unspecified part of intestine
D01.49	Carcinoma in situ of other parts of intestine
D01.7	Carcinoma in situ of other specified digestive organs
D01.9	Carcinoma in situ of digestive organ, unspecified
D37.1	Neoplasm of uncertain behavior of stomach
D37.2	Neoplasm of uncertain behavior of small intestine
D37.3	Neoplasm of uncertain behavior of appendix
D37.4	Neoplasm of uncertain behavior of colon
D37.5	Neoplasm of uncertain behavior of rectum

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
G89.3	Neoplasm related pain (acute) (chronic)
R70.1	Abnormal plasma viscosity
R77.0	Abnormality of albumin
R77.1	Abnormality of globulin
R77.2	Abnormality of alphafetoprotein
R77.8	Other specified abnormalities of plasma proteins
R77.9	Abnormality of plasma protein, unspecified
R78.89	Finding of other specified substances, not normally found in blood
R78.9	Finding of unspecified substance, not normally found in blood
R79.89	Other specified abnormal findings of blood chemistry
R97.0	Elevated carcinoembryonic antigen [CEA]
R97.8	Other abnormal tumor markers
Z08	Encounter for follow-up examination after completed treatment for malignant neoplasm
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z85.00	Personal history of malignant neoplasm of unspecified digestive organ
Z85.038	Personal history of other malignant neoplasm of large intestine
Z85.048	Personal history of other malignant neoplasm of rectum, rectosigmoid junction, and anus
Z85.118	Personal history of other malignant neoplasm of bronchus and lung
Z85.3	Personal history of malignant neoplasm of breast
Z85.43	Personal history of malignant neoplasm of ovary

Indications

CEA may be medically necessary for follow-up of patients with colorectal carcinoma. It would however only be medically necessary at treatment decision-making points. In some clinical situations (e.g. adenocarcinoma of the lung, small cell carcinoma of the lung, and some gastrointestinal carcinomas) when a more specific marker is not expressed by the tumor, CEA may be a medically necessary alternative marker for monitoring. Preoperative CEA may also be helpful in determining the post-operative adequacy of surgical resection and subsequent medical management. In general, a single tumor marker will suffice in following patients with colorectal carcinoma or other malignancies that express such tumor markers.

In following patients who have had treatment for colorectal carcinoma, ASCO guideline suggests that if resection of liver metastasis would be indicated, it is recommended that post-



operative CEA testing be performed every two to three months in patients with initial stage II or stage III disease for at least two years after diagnosis.

For patients with metastatic solid tumors which express CEA, CEA may be measured at the start of the treatment and with subsequent treatment cycles to assess the tumor's response to therapy.

Limitations

Serum CEA determinations are generally not indicated more frequently than once per chemotherapy treatment cycle for patients with metastatic solid tumors which express CEA or every two months post-surgical treatment for patients who have had colorectal carcinoma. However, it may be proper to order the test more frequently in certain situations, for example, when there has been a significant change from prior CEA level or a significant change in patient status which could reflect disease progression or recurrence.

Testing with a diagnosis of an in situ carcinoma is not reasonably done more frequently than once, unless the result is abnormal, in which case the test may be repeated once.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Journal Clinical Oncol: 14(10):2843-2877, 1996

Vauthey JN. Dudrick PS. Lind DS. Copeland EM 3rd. Management of recurrent colorectal cancer: another look at carcinoembryonic antigen detected recurrence [see comments]. [Review] Digestive Diseases. 14(1):5©13, 1996 Jan-Feb.

Germ J. The prognostic importance of tumor markers in adenocarcinoma of the gastrointestinal tract. [Review] [38 refs] Current Opinion in Oncology. 9(4):380-7, 1997 Jul.

Bergama chi R. Arnaud JP. Routine compared with nonscheduled follow-up of patients with "curative" surgery for colorectal cancer. Annals of Surgical Oncology. 3(5):464-9, 1996 Sep.

Kim YH. Ajani JA. Ota DM. Lynch P. Roth JA. Value of serial carcinoembryonic antigen levels in patients with respectable adenocarcinoma of the esophagus and stomach Cancer. 75(2):451©6, 1995 Jan 15.



190.27 - Human Chorionic Gonadotropin

Other Names/Abbreviations

hCG

Description

Human Chorionic Gonadotropin (hCG) is useful for monitoring and diagnosis of germ cell neoplasms of the ovary, testis, mediastinum, retroperitoneum, and central nervous system. In addition, hCG is useful for monitoring pregnant patients with vaginal bleeding, hypertension and/or suspected fetal loss.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
84702	Gonadotropin, chorionic (hCG); quantitative

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
C38.1	Malignant neoplasm of anterior mediastinum
C38.2	Malignant neoplasm of posterior mediastinum
C38.3	Malignant neoplasm of mediastinum, part unspecified
C38.8	Malignant neoplasm of overlapping sites of heart, mediastinum and pleura
C45.1	Mesothelioma of peritoneum
C48.0	Malignant neoplasm of retroperitoneum
C48.1	Malignant neoplasm of specified parts of peritoneum
C48.8	Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum
C56.1	Malignant neoplasm of right ovary
C56.2	Malignant neoplasm of left ovary
C56.9	Malignant neoplasm of unspecified ovary
C57.4	Malignant neoplasm of uterine adnexa, unspecified
C58	Malignant neoplasm of placenta
C62.00	Malignant neoplasm of unspecified undescended testis



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
C62.01	Malignant neoplasm of undescended right testis
C62.02	Malignant neoplasm of undescended left testis
C62.10	Malignant neoplasm of unspecified descended testis
C62.11	Malignant neoplasm of descended right testis
C62.12	Malignant neoplasm of descended left testis
C62.90	Malignant neoplasm of unspecified testis, unspecified whether descended or undescended
C62.91	Malignant neoplasm of right testis, unspecified whether descended or undescended
C62.92	Malignant neoplasm of left testis, unspecified whether descended or undescended
C75.3	Malignant neoplasm of pineal gland
C78.1	Secondary malignant neoplasm of mediastinum
C78.6	Secondary malignant neoplasm of retroperitoneum and peritoneum
C79.60	Secondary malignant neoplasm of unspecified ovary
C79.61	Secondary malignant neoplasm of right ovary
C79.62	Secondary malignant neoplasm of left ovary
C79.82	Secondary malignant neoplasm of genital organs
D39.2	Neoplasm of uncertain behavior of placenta
G89.3	Neoplasm related pain (acute) (chronic)
*J98.59	*Other diseases of mediastinum, not elsewhere classified
N89.8	Other specified noninflammatory disorders of vagina
N94.89	Other specified conditions associated with female genital organs and menstrual cycle
*O00.00	*Abdominal pregnancy without intrauterine pregnancy
*O00.01	*Abdominal pregnancy with intrauterine pregnancy
*O00.10	*Tubal pregnancy without intrauterine pregnancy
*O00.11	*Tubal pregnancy with intrauterine pregnancy
*O00.20	*Ovarian pregnancy without intrauterine pregnancy
*O00.21	*Ovarian pregnancy with intrauterine pregnancy
*O00.80	*Other ectopic pregnancy without intrauterine pregnancy
*O00.81	*Other ectopic pregnancy with intrauterine pregnancy
O00.90	Unspecified ectopic pregnancy without intrauterine pregnancy
O00.91	Unspecified ectopic pregnancy with intrauterine pregnancy

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
O01.0	Classical hydatidiform mole
O01.1	Incomplete and partial hydatidiform mole
O01.9	Hydatidiform mole, unspecified
O02.0	Blighted ovum and nonhydatidiform mole
O02.1	Missed abortion
O02.81	Inappropriate change in quantitative human chorionic gonadotropin (hCG) in early pregnancy
O02.89	Other abnormal products of conception
O02.9	Abnormal product of conception, unspecified
O03.0	Genital tract and pelvic infection following incomplete spontaneous abortion
O03.37	Sepsis following incomplete spontaneous abortion
O03.5	Genital tract and pelvic infection following complete or unspecified spontaneous abortion
O03.87	Sepsis following complete or unspecified spontaneous abortion
*O09.A0	*Supervision of pregnancy with history of molar pregnancy, unspecified trimester
*O09.A1	*Supervision of pregnancy with history of molar pregnancy, first trimester
*O09.A2	*Supervision of pregnancy with history of molar pregnancy, second trimester
*O09.A3	*Supervision of pregnancy with history of molar pregnancy, third trimester
O11.1	Pre-existing hypertension with pre-eclampsia, first trimester
O11.2	Pre-existing hypertension with pre-eclampsia, second trimester
O11.3	Pre-existing hypertension with pre-eclampsia, third trimester
*O11.4	*Pre-existing hypertension with pre-eclampsia, complicating childbirth
*O11.5	*Pre-existing hypertension with pre-eclampsia, complicating the puerperium
O11.9	Pre-existing hypertension with pre-eclampsia, unspecified trimester
*O12.04	*Gestational edema, complicating childbirth
*O12.05	*Gestational edema, complicating the puerperium
*O12.14	*Gestational proteinuria, complicating childbirth
*O12.15	*Gestational proteinuria, complicating the puerperium
*O12.24	*Gestational edema with proteinuria, complicating childbirth
*O12.25	*Gestational edema with proteinuria, complicating the puerperium
O13.1	Gestational [pregnancy-induced] hypertension without significant proteinuria, first trimester



**Medicare National Coverage Determinations (NCD)
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Code	Description
O13.2	Gestational [pregnancy-induced] hypertension without significant proteinuria, second trimester
O13.3	Gestational [pregnancy-induced] hypertension without significant proteinuria, third trimester
*O13.4	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth
*O13.5	*Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating the puerperium
O13.9	Gestational [pregnancy-induced] hypertension without significant proteinuria, unspecified trimester
O14.00	Mild to moderate pre-eclampsia, unspecified trimester
O14.02	Mild to moderate pre-eclampsia, second trimester
O14.03	Mild to moderate pre-eclampsia, third trimester
*O14.04	*Mild to moderate pre-eclampsia, complicating childbirth
*O14.05	*Mild to moderate pre-eclampsia, complicating the puerperium
O14.10	Severe pre-eclampsia, unspecified trimester
O14.12	Severe pre-eclampsia, second trimester
O14.13	Severe pre-eclampsia, third trimester
*O14.14	*Severe pre-eclampsia complicating childbirth
*O14.15	*Severe pre-eclampsia, complicating the puerperium
O14.20	HELLP syndrome (HELLP), unspecified trimester
O14.22	HELLP syndrome (HELLP), second trimester
O14.23	HELLP syndrome (HELLP), third trimester
*O14.24	*HELLP syndrome, complicating childbirth
*O14.25	*HELLP syndrome, complicating the puerperium
O14.90	Unspecified pre-eclampsia, unspecified trimester
O14.92	Unspecified pre-eclampsia, second trimester
O14.93	Unspecified pre-eclampsia, third trimester
*O14.94	*Unspecified pre-eclampsia, complicating childbirth
*O14.95	*Unspecified pre-eclampsia, complicating the puerperium
O15.00	Eclampsia complicating pregnancy, unspecified trimester
O15.02	Eclampsia complicating pregnancy, second trimester



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
O15.03	Eclampsia complicating pregnancy, third trimester
O15.1	Eclampsia complicating labor
O15.2	Eclampsia complicating the puerperium
O15.9	Eclampsia, unspecified as to time period
O16.1	Unspecified maternal hypertension, first trimester
O16.2	Unspecified maternal hypertension, second trimester
O16.3	Unspecified maternal hypertension, third trimester
*O16.4	*Unspecified maternal hypertension, complicating childbirth
*O16.5	*Unspecified maternal hypertension, complicating the puerperium
O16.9	Unspecified maternal hypertension, unspecified trimester
O20.0	Threatened abortion
*O24.415	*Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs
*O24.425	*Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs
*O24.435	*Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs
*O44.20	*Partial placenta previa NOS or without hemorrhage, unspecified trimester
*O44.21	*Partial placenta previa NOS or without hemorrhage, first trimester
*O44.22	*Partial placenta previa NOS or without hemorrhage, second trimester
*O44.23	*Partial placenta previa NOS or without hemorrhage, third trimester
*O44.30	*Partial placenta previa with hemorrhage, unspecified trimester
*O44.31	*Partial placenta previa with hemorrhage, first trimester
*O44.32	*Partial placenta previa with hemorrhage, second trimester
*O44.33	*Partial placenta previa with hemorrhage, third trimester
*O44.40	*Low lying placenta NOS or without hemorrhage, unspecified trimester
*O44.41	*Low lying placenta NOS or without hemorrhage, first trimester
*O44.42	*Low lying placenta NOS or without hemorrhage, second trimester
*O44.43	*Low lying placenta NOS or without hemorrhage, third trimester
*O44.50	*Low lying placenta with hemorrhage, unspecified trimester
*O44.51	*Low lying placenta with hemorrhage, first trimester
*O44.52	*Low lying placenta with hemorrhage, second trimester
*O44.53	*Low lying placenta with hemorrhage, third trimester

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*April 2017 Changes
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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
R10.2	Pelvic and perineal pain
R97.8	Other abnormal tumor markers
*Z31.7	*Encounter for procreative management and counseling for gestational carrier
Z34.00	Encounter for supervision of normal first pregnancy, unspecified trimester
Z34.01	Encounter for supervision of normal first pregnancy, first trimester
Z34.02	Encounter for supervision of normal first pregnancy, second trimester
Z34.03	Encounter for supervision of normal first pregnancy, third trimester
Z34.80	Encounter for supervision of other normal pregnancy, unspecified trimester
Z34.81	Encounter for supervision of other normal pregnancy, first trimester
Z34.82	Encounter for supervision of other normal pregnancy, second trimester
Z34.83	Encounter for supervision of other normal pregnancy, third trimester
Z34.90	Encounter for supervision of normal pregnancy, unspecified, unspecified trimester
Z34.91	Encounter for supervision of normal pregnancy, unspecified, first trimester
Z34.92	Encounter for supervision of normal pregnancy, unspecified, second trimester
Z34.93	Encounter for supervision of normal pregnancy, unspecified, third trimester
*Z84.82	*Family history of sudden infant death syndrome
Z85.068	Personal history of other malignant neoplasm of small intestine
Z85.07	Personal history of malignant neoplasm of pancreas
Z85.09	Personal history of malignant neoplasm of other digestive organs
Z85.238	Personal history of other malignant neoplasm of thymus
Z85.29	Personal history of malignant neoplasm of other respiratory and intrathoracic organs
Z85.43	Personal history of malignant neoplasm of ovary
Z85.47	Personal history of malignant neoplasm of testis

Limitations

It is not reasonable and necessary to perform hCG testing more than once per month for diagnostic purposes. It may be performed as needed for monitoring of patient progress and treatment. Qualitative hCG assays are not appropriate for medically managing patients with known or suspected germ cell neoplasms.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Sources of Information

O'Callaghan A. Mead GM. Testicular carcinoma. [Review] [23 Refs] Postgraduate Medical Journal. 73(862):4816, 1997 Aug.

Sawamura Y. Current diagnosis and treatment of central nervous system germ cell tumors. [Review] [47 Refs] Current Opinion in Neurology. 9(6):41923, 1996 Dec.

Wilkins M. Horwich A. Diagnosis and treatment of urological malignancy: The testes. [Review] [23 Refs] British Journal of Hospital Medicine. 55(4): 199203, 1996. Feb 21, Mar 5.



190.28 - Tumor Antigen by Immunoassay CA 125

Description

Immunoassay determinations of the serum levels of certain proteins or carbohydrates serve as tumor markers. When elevated, serum concentration of these markers may reflect tumor size and grade. This policy specifically addresses tumor antigen CA 125.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
86304	Immunoassay for tumor antigen, quantitative, CA 125

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of
Downloads: Lab Code List, at
<http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
C45.1	Mesothelioma of peritoneum
C48.1	Malignant neoplasm of specified parts of peritoneum
C48.2	Malignant neoplasm of peritoneum, unspecified
C48.8	Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum
C51.8	Malignant neoplasm of overlapping sites of vulva
C53.0	Malignant neoplasm of endocervix
C54.1	Malignant neoplasm of endometrium
C54.2	Malignant neoplasm of myometrium
C54.3	Malignant neoplasm of fundus uteri
C54.9	Malignant neoplasm of corpus uteri, unspecified
C56.1	Malignant neoplasm of right ovary
C56.2	Malignant neoplasm of left ovary
C56.9	Malignant neoplasm of unspecified ovary
C57.00	Malignant neoplasm of unspecified fallopian tube
C57.01	Malignant neoplasm of right fallopian tube
C57.02	Malignant neoplasm of left fallopian tube
C57.4	Malignant neoplasm of uterine adnexa, unspecified



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
C57.7	Malignant neoplasm of other specified female genital organs
C57.8	Malignant neoplasm of overlapping sites of female genital organs
C79.60	Secondary malignant neoplasm of unspecified ovary
C79.61	Secondary malignant neoplasm of right ovary
C79.62	Secondary malignant neoplasm of left ovary
C79.82	Secondary malignant neoplasm of genital organs
D39.0	Neoplasm of uncertain behavior of uterus
D39.10	Neoplasm of uncertain behavior of unspecified ovary
D39.11	Neoplasm of uncertain behavior of right ovary
D39.12	Neoplasm of uncertain behavior of left ovary
D39.2	Neoplasm of uncertain behavior of placenta
D39.8	Neoplasm of uncertain behavior of other specified female genital organs
D39.9	Neoplasm of uncertain behavior of female genital organ, unspecified
G89.3	Neoplasm related pain (acute) (chronic)
R19.09	Other intra-abdominal and pelvic swelling, mass and lump
R97.1	Elevated cancer antigen 125 [CA 125]
R97.8	Other abnormal tumor markers
Z85.41	Personal history of malignant neoplasm of cervix uteri
Z85.42	Personal history of malignant neoplasm of other parts of uterus
Z85.43	Personal history of malignant neoplasm of ovary
Z85.44	Personal history of malignant neoplasm of other female genital organs

Indications

CA 125 is a high molecular weight serum tumor marker elevated in 80% of patients who present with epithelial ovarian carcinoma. It is also elevated in carcinomas of the fallopian tube, endometrium, and endocervix. An elevated level may also be associated with the presence of a malignant mesothelioma or primary peritoneal carcinoma.

A CA 125 level may be obtained as part of the initial pre-operative work-up for women presenting with a suspicious pelvic mass to be used as a baseline for purposes of post-operative monitoring. Initial declines in CA 125 after initial surgery and/or chemotherapy for ovarian carcinoma are also measured by obtaining three serum levels during the first month post treatment to determine the patient's CA 125 half-life, which has significant prognostic implications.

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The CA 125 levels are again obtained at the completion of chemotherapy as an index of residual disease. Surveillance CA 125 measurements are generally obtained every 3 months for 2 years, every 6 months for the next 3 years, and yearly thereafter. CA 125 levels are also an important indicator of a patient's response to therapy in the presence of advanced or recurrent disease. In this setting, CA 125 levels may be obtained prior to each treatment cycle.

Limitations

These services are not covered for the evaluation of patients with signs or symptoms suggestive of malignancy. The service may be ordered at times necessary to assess either the presence of recurrent disease or the patient's response to treatment with subsequent treatment cycles.

The CA 125 is specifically not covered for aiding in the differential diagnosis of patients with a pelvic mass as the sensitivity and specificity of the test is not sufficient. In general, a single "tumor marker" will suffice in following a patient with one of these malignancies.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Documentation Requirements

Indicated if service request for CA125 is requested more frequently than stipulated.

Sources of Information

Clinical Pancreatic Guideline for the Use of Tumor Markers in Breast and Colorectal Cancer, American Society of Clinical Oncology. J Clin Oncol 14:2843-2877, 1996.

Chan DW, Beveridge RA, Muss H, et al. Use of Triquant BR Radioimmunoassay for Early Detection of Breast Cancer Recurrence in Patients with Stage II and Stage III Disease. J Clin Oncol 1977, 15(6):2322-2328.



190.29 - Tumor Antigen by Immunoassay CA 15-3/CA 27.29

Description

Immunoassay determinations of the serum levels of certain proteins or carbohydrates serve as tumor markers. When elevated, serum concentration of markers may reflect tumor size & grade. This policy specifically addresses the following tumor antigens: CA 15-3 and CA 27.29

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
86300	Immunoassay for tumor antigen, quantitative; CA 15-3 (27.29)

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of
Downloads: Lab Code List, at
<http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
C50.011	Malignant neoplasm of nipple and areola, right female breast
C50.012	Malignant neoplasm of nipple and areola, left female breast
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast
C50.021	Malignant neoplasm of nipple and areola, right male breast
C50.022	Malignant neoplasm of nipple and areola, left male breast
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast
C50.111	Malignant neoplasm of central portion of right female breast
C50.112	Malignant neoplasm of central portion of left female breast
C50.119	Malignant neoplasm of central portion of unspecified female breast
C50.121	Malignant neoplasm of central portion of right male breast
C50.122	Malignant neoplasm of central portion of left male breast
C50.129	Malignant neoplasm of central portion of unspecified male breast
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast



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Code	Description
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast
C50.611	Malignant neoplasm of axillary tail of right female breast
C50.612	Malignant neoplasm of axillary tail of left female breast
C50.619	Malignant neoplasm of axillary tail of unspecified female breast
C50.621	Malignant neoplasm of axillary tail of right male breast
C50.622	Malignant neoplasm of axillary tail of left male breast
C50.629	Malignant neoplasm of axillary tail of unspecified male breast
C50.811	Malignant neoplasm of overlapping sites of right female breast
C50.812	Malignant neoplasm of overlapping sites of left female breast
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast
C50.821	Malignant neoplasm of overlapping sites of right male breast
C50.822	Malignant neoplasm of overlapping sites of left male breast

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Code	Description
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast
C50.911	Malignant neoplasm of unspecified site of right female breast
C50.912	Malignant neoplasm of unspecified site of left female breast
C50.919	Malignant neoplasm of unspecified site of unspecified female breast
C50.921	Malignant neoplasm of unspecified site of right male breast
C50.922	Malignant neoplasm of unspecified site of left male breast
C50.929	Malignant neoplasm of unspecified site of unspecified male breast
C79.2	Secondary malignant neoplasm of skin
C79.81	Secondary malignant neoplasm of breast
G89.3	Neoplasm related pain (acute) (chronic)
R97.8	Other abnormal tumor markers
Z85.3	Personal history of malignant neoplasm of breast

Indications

Multiple tumor markers are available for monitoring the response of certain malignancies to therapy and assessing whether a residual tumor exists post-surgical therapy. CA 15-3 is often medically necessary to aid in the management of patients with breast cancer. Serial testing must be used in conjunction with other clinical methods for monitoring breast cancer. For monitoring, if medically necessary, use consistently either CA 15-3 or CA 27.29, not both. CA 27.29 is equivalent to CA 15-3 in its usage in management of patients with breast cancer.

Limitations

These services are not covered for the evaluation of patients with signs or symptoms suggestive of malignancy. The service may be ordered at times necessary to assess either the presence of recurrent disease or the patient's response to treatment with subsequent treatment cycles.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Clinical Pancreatic Guideline for the Use of Tumor Markers in Breast and Colorectal Cancer, American Society of Clinical Oncology. J Clin Oncol 14:2843-2877, 1996.

Chan DW, Beveridge RA, Muss H, et al. Use of Triquant BR Radioimmunoassay for Early Detection of Breast Cancer Recurrence in Patients with Stage II & Stage III Disease. J Clin Oncol 1977, 15(6):2322-2328.



**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Bone GG, von Mensdorff-Pouilly S, Kenemans P, van Kamp GJ, et al. Clinical and Technical Evaluation of ACS BR Serum Assay of MUC-1 Gene Derived Glycoprotein in Breast Cancer, and Compared with CA15-3 Assays. Clin Chem 1997, 43(4):585-593.



190.30 - Tumor Antigen by Immunoassay CA 19-9

Description

Immunoassay determinations of the serum levels of certain proteins or carbohydrates serve as tumor markers. When elevated, serum concentration of these markers may reflect tumor size and grade. This policy specifically addresses the following tumor antigen: CA19-9.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
86301	Immunoassay for tumor antigen, quantitative; CA 19-9

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
C22.1	Intrahepatic bile duct carcinoma
C23	Malignant neoplasm of gallbladder
C24.0	Malignant neoplasm of extrahepatic bile duct
C24.1	Malignant neoplasm of ampulla of Vater
C24.8	Malignant neoplasm of overlapping sites of biliary tract
C24.9	Malignant neoplasm of biliary tract, unspecified
C25.0	Malignant neoplasm of head of pancreas
C25.1	Malignant neoplasm of body of pancreas
C25.2	Malignant neoplasm of tail of pancreas
C25.3	Malignant neoplasm of pancreatic duct
C25.4	Malignant neoplasm of endocrine pancreas
C25.7	Malignant neoplasm of other parts of pancreas
C25.8	Malignant neoplasm of overlapping sites of pancreas
C25.9	Malignant neoplasm of pancreas, unspecified
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct
C78.80	Secondary malignant neoplasm of unspecified digestive organ
C78.89	Secondary malignant neoplasm of other digestive organs



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
D37.6	Neoplasm of uncertain behavior of liver, gallbladder and bile ducts
D37.8	Neoplasm of uncertain behavior of other specified digestive organs
D37.9	Neoplasm of uncertain behavior of digestive organ, unspecified
G89.3	Neoplasm related pain (acute) (chronic)
R97.8	Other abnormal tumor markers
Z85.068	Personal history of other malignant neoplasm of small intestine
Z85.07	Personal history of malignant neoplasm of pancreas
Z85.09	Personal history of malignant neoplasm of other digestive organs

Indications

Multiple tumor markers are available for monitoring the response of certain malignancies to therapy and assessing whether residual tumor exists post-surgical therapy.

Levels are useful in following the course of patients with established diagnosis of pancreatic and biliary ductal carcinoma. The test is not indicated for diagnosing these two diseases.

Limitations

These services are not covered for the evaluation of patients with signs or symptoms suggestive of malignancy. The service may be ordered at times necessary to assess either the presence of recurrent disease or the patient's response to treatment with subsequent treatment cycles.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Clinical Pancreatic Guideline for the Use of Tumor Markers in Breast and Colorectal Cancer, American Society of Clinical Oncology. J Clin Oncol 14:2843-2877, 1996.

Richter JM, Christensen MR, Rustgi AK, and Silverstein MD. The Clinical Utility of the CA19-9 Radioimmunoassay for the Diagnosis of Pancreatic Cancer Presenting as Pain or Weight Loss: A Cost Effective Analysis. Arch Intern Med 1989, 149:2292-2297.

Safi F, SchlosseW, Falkenreck S, et. al. Prognostic Value of CA 19-9 Serum Course in Pancreatic Cancer. Hepatogastroenterology 1998 Jan-Feb; 45(19):253-9.



190.31 - Prostate Specific Antigen

Other Names/Abbreviations

Total PSA

Description

Prostate Specific Antigen (PSA), a tumor marker for adenocarcinoma of the prostate, can predict residual tumor in the post-operative phase of prostate cancer. Three to 6 months after radical prostatectomy, PSA is reported to provide a sensitive indicator of persistent disease. Six months following introduction of antiandrogen therapy, PSA is reported of distinguishing patients with favorable response from those in whom limited response is anticipated.

PSA when used in conjunction with other prostate cancer tests, such as digital rectal examination, may assist in the decision-making process for diagnosing prostate cancer. PSA also, serves as a marker in following the progress of most prostate tumors once a diagnosis has been established. This test is also an aid in the management of prostate cancer patients and in detecting metastatic or persistent disease in patients following treatment.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
84153	Prostate Specific Antigen (PSA), total

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
C61	Malignant neoplasm of prostate
C67.5	Malignant neoplasm of bladder neck
C77.4	Secondary and unspecified malignant neoplasm of inguinal and lower limb lymph nodes
C77.5	Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes
C77.8	Secondary and unspecified malignant neoplasm of lymph nodes of multiple regions
C79.51	Secondary malignant neoplasm of bone
C79.52	Secondary malignant neoplasm of bone marrow
C79.82	Secondary malignant neoplasm of genital organs
D07.5	Carcinoma in situ of prostate
D40.0	Neoplasm of uncertain behavior of prostate

NCD 190.31

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**Medicare National Coverage Determinations (NCD)
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Code	Description
D49.511	Neoplasm of unspecified behavior of right kidney
D49.512	Neoplasm of unspecified behavior of left kidney
D49.519	Neoplasm of unspecified behavior of unspecified kidney
D49.59	Neoplasm of unspecified behavior of other genitourinary organ
N13.9	Obstructive and reflux uropathy, unspecified
N32.0	Bladder-neck obstruction
N40.0	Benign prostatic hyperplasia without lower urinary tract symptoms
N40.1	Benign prostatic hyperplasia with lower urinary tract symptoms
N40.2	Nodular prostate without lower urinary tract symptoms
N40.3	Nodular prostate with lower urinary tract symptoms
N41.9	Inflammatory disease of prostate, unspecified
N42.9	Disorder of prostate, unspecified
R31.0	Gross hematuria
R31.1	Benign essential microscopic hematuria
R31.21	Asymptomatic microscopic hematuria
R31.29	Other microscopic hematuria
R31.9	Hematuria, unspecified
R32	Unspecified urinary incontinence
R33.9	Retention of urine, unspecified
R35.0	Frequency of micturition
R35.1	Nocturia
R39.11	Hesitancy of micturition
R39.12	Poor urinary stream
R39.14	Feeling of incomplete bladder emptying
R39.15	Urgency of urination
R39.16	Straining to void
R93.5	Abnormal findings on diagnostic imaging of other abdominal regions, including retroperitoneum
R93.6	Abnormal findings on diagnostic imaging of limbs
R93.7	Abnormal findings on diagnostic imaging of other parts of musculoskeletal system
R94.8	Abnormal results of function studies of other organs and systems

NCD 190.31

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**Medicare National Coverage Determinations (NCD)
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Code	Description
R97.20	Elevated prostate specific antigen [PSA]
R97.21	Rising PSA following treatment for malignant neoplasm of prostate
Z85.46	Personal history of malignant neoplasm of prostate

Indications

PSA is of proven value in differentiating benign from malignant disease in men with lower urinary tract signs & symptoms (e.g., hematuria, slow urine stream, hesitancy, urgency, frequency, nocturia & incontinence) as well as with patients with palpably abnormal prostate glands on physician exam, and in patients with other laboratory or imaging studies that suggest the possibility of a malignant prostate disorder. PSA is also a marker used to follow the progress of prostate cancer once a diagnosis has been established, such as detecting metastatic or persistent disease in patients who may require additional treatment. PSA testing may also be useful in the differential diagnosis of men presenting with as yet undiagnosed disseminated metastatic disease.

Limitations

Generally, for patients with lower urinary tract signs or symptoms, the test is performed only once per year unless there is a change in the patient's medical condition.

Testing with a diagnosis of in situ carcinoma is not reasonably done more frequently than once, unless the result is abnormal, in which case the test may be repeated once.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Laboratory Test Handbook, 3rd edition, pp.338-340.

Cooner WH, Mosley BR, Rutherford CL, et al. Prostate Cancer Detection in a Clinical Urological Practice by Ultrasonography, Digital Rectal Examination and Prostate Specific Antigen. J.Urol.1990; 143: 1146-1154.



190.32 - Gamma Glutamyl Transferase

Other Names/Abbreviations

GGT

Description

Gamma glutamyl transferase (GGT) is an intracellular enzyme that appears in blood following leakage from cells. Renal tubules, liver, and pancreas contain high amounts, although the measurement of GGT in serum is almost always used for assessment of Hepatobiliary function. Unlike other enzymes which are found in heart, skeletal muscle, and intestinal mucosa as well as liver, the appearance of an elevated level of GGT in serum is almost always the result of liver disease or injury. It is specifically useful to differentiate elevated alkaline phosphatase levels when the source of the alkaline phosphatase increase (bone, liver, or placenta) is unclear. The combination of high alkaline phosphatase and a normal GGT does not, however, rule out liver disease completely.

As well as being a very specific marker of Hepatobiliary function, GGT is also a very sensitive marker for hepatocellular damage. Abnormal concentrations typically appear before elevations of other liver enzymes or biliuria are evident. Obstruction of the biliary tract, viral infection (e.g., hepatitis, mononucleosis), metastatic cancer, exposure to hepatotoxins (e.g., organic solvents, drugs, alcohol), and use of drugs that induce microsomal enzymes in the liver (e.g., cimetidine, barbiturates, phenytoin, and carbamazepine) all can cause a moderate to marked increase in GGT serum concentration. In addition, some drugs can cause or exacerbate liver dysfunction (e.g., atorvastatin, troglitazone, and others as noted in FDA Contraindications and Warnings.)

GGT is useful for diagnosis of liver disease or injury, exclusion of hepatobiliary involvement related to other diseases, and patient management during the resolution of existing disease or following injury.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
82977	Glutamyl transferase, gamma (GGT)

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A02.1	Salmonella sepsis
A06.0	Acute amebic dysentery

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**Medicare National Coverage Determinations (NCD)
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Code	Description
A06.1	Chronic intestinal amebiasis
A06.2	Amebic nondysenteric colitis
A06.3	Ameboma of intestine
A06.4	Amebic liver abscess
A06.5	Amebic lung abscess
A06.6	Amebic brain abscess
A06.7	Cutaneous amebiasis
A06.81	Amebic cystitis
A06.82	Other amebic genitourinary infections
A06.89	Other amebic infections
A06.9	Amebiasis, unspecified
A17.83	Tuberculous neuritis
A17.9	Tuberculosis of nervous system, unspecified
A18.31	Tuberculous peritonitis
A18.32	Tuberculous enteritis
A18.39	Retroperitoneal tuberculosis
A18.82	Tuberculosis of other endocrine glands
A18.83	Tuberculosis of digestive tract organs, not elsewhere classified
A18.84	Tuberculosis of heart
A18.89	Tuberculosis of other sites
A19.9	Miliary tuberculosis, unspecified
A20.0	Bubonic plague
A20.1	Cellulocutaneous plague
A20.2	Pneumonic plague
A20.3	Plague meningitis
A20.7	Septicemic plague
A20.8	Other forms of plague
A20.9	Plague, unspecified
A22.7	Anthrax sepsis
A26.0	Cutaneous erysipeloid

NCD 190.32

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**Medicare National Coverage Determinations (NCD)
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Code	Description
A26.7	Erysipelothrix sepsis
A26.8	Other forms of erysipeloid
A26.9	Erysipeloid, unspecified
A27.0	Leptospirosis icterohemorrhagica
A30.1	Tuberculoid leprosy
A32.0	Cutaneous listeriosis
A32.11	Listerial meningitis
A32.12	Listerial meningoenzephalitis
A32.7	Listerial sepsis
A32.81	Oculoglandular listeriosis
A32.82	Listerial endocarditis
A32.89	Other forms of listeriosis
A32.9	Listeriosis, unspecified
A36.89	Other diphtheritic complications
A39.2	Acute meningococemia
A39.3	Chronic meningococemia
A39.4	Meningococemia, unspecified
A39.81	Meningococcal encephalitis
A40.0	Sepsis due to streptococcus, group A
A40.1	Sepsis due to streptococcus, group B
A40.3	Sepsis due to Streptococcus pneumoniae
A40.8	Other streptococcal sepsis
A40.9	Streptococcal sepsis, unspecified
A41.01	Sepsis due to Methicillin susceptible Staphylococcus aureus
A41.02	Sepsis due to Methicillin resistant Staphylococcus aureus
A41.1	Sepsis due to other specified staphylococcus
A41.2	Sepsis due to unspecified staphylococcus
A41.3	Sepsis due to Hemophilus influenzae
A41.4	Sepsis due to anaerobes
A41.50	Gram-negative sepsis, unspecified

NCD 190.32

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**Medicare National Coverage Determinations (NCD)
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Code	Description
A41.51	Sepsis due to Escherichia coli [E. coli]
A41.52	Sepsis due to Pseudomonas
A41.53	Sepsis due to Serratia
A41.59	Other Gram-negative sepsis
A41.81	Sepsis due to Enterococcus
A41.89	Other specified sepsis
A41.9	Sepsis, unspecified organism
A42.1	Abdominal actinomycosis
A42.7	Actinomycotic sepsis
A48.0	Gas gangrene
A51.45	Secondary syphilitic hepatitis
A52.74	Syphilis of liver and other viscera
A69.20	Lyme disease, unspecified
A69.21	Meningitis due to Lyme disease
A69.22	Other neurologic disorders in Lyme disease
A69.23	Arthritis due to Lyme disease
A69.29	Other conditions associated with Lyme disease
A70	Chlamydia psittaci infections
A77.0	Spotted fever due to Rickettsia rickettsii
A77.1	Spotted fever due to Rickettsia conorii
A77.2	Spotted fever due to Rickettsia siberica
A77.3	Spotted fever due to Rickettsia australis
A77.40	Ehrlichiosis, unspecified
A77.41	Ehrlichiosis chafeensis [E. chafeensis]
A77.49	Other ehrlichiosis
A77.8	Other spotted fevers
A77.9	Spotted fever, unspecified
A79.9	Rickettsiosis, unspecified
A95.0	Sylvatic yellow fever
A95.1	Urban yellow fever



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Code	Description
B00.0	Eczema herpeticum
B00.7	Disseminated herpesviral disease
B15.0	Hepatitis A with hepatic coma
B15.9	Hepatitis A without hepatic coma
B16.0	Acute hepatitis B with delta-agent with hepatic coma
B16.1	Acute hepatitis B with delta-agent without hepatic coma
B16.2	Acute hepatitis B without delta-agent with hepatic coma
B16.9	Acute hepatitis B without delta-agent and without hepatic coma
B17.0	Acute delta-(super) infection of hepatitis B carrier
B17.10	Acute hepatitis C without hepatic coma
B17.11	Acute hepatitis C with hepatic coma
B17.2	Acute hepatitis E
B17.8	Other specified acute viral hepatitis
B17.9	Acute viral hepatitis, unspecified
B18.0	Chronic viral hepatitis B with delta-agent
B18.1	Chronic viral hepatitis B without delta-agent
B18.2	Chronic viral hepatitis C
B18.8	Other chronic viral hepatitis
B18.9	Chronic viral hepatitis, unspecified
B19.0	Unspecified viral hepatitis with hepatic coma
B19.10	Unspecified viral hepatitis B without hepatic coma
B19.11	Unspecified viral hepatitis B with hepatic coma
B19.20	Unspecified viral hepatitis C without hepatic coma
B19.21	Unspecified viral hepatitis C with hepatic coma
B19.9	Unspecified viral hepatitis without hepatic coma
B20	Human immunodeficiency virus [HIV] disease
B25.0	Cytomegaloviral pneumonitis
B25.1	Cytomegaloviral hepatitis
B25.2	Cytomegaloviral pancreatitis
B25.8	Other cytomegaloviral diseases

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Code	Description
B25.9	Cytomegaloviral disease, unspecified
B26.81	Mumps hepatitis
B27.00	Gammaherpesviral mononucleosis without complication
B27.01	Gammaherpesviral mononucleosis with polyneuropathy
B27.02	Gammaherpesviral mononucleosis with meningitis
B27.09	Gammaherpesviral mononucleosis with other complications
B27.10	Cytomegaloviral mononucleosis without complications
B27.11	Cytomegaloviral mononucleosis with polyneuropathy
B27.12	Cytomegaloviral mononucleosis with meningitis
B27.19	Cytomegaloviral mononucleosis with other complication
B27.80	Other infectious mononucleosis without complication
B27.81	Other infectious mononucleosis with polyneuropathy
B27.82	Other infectious mononucleosis with meningitis
B27.89	Other infectious mononucleosis with other complication
B27.90	Infectious mononucleosis, unspecified without complication
B27.91	Infectious mononucleosis, unspecified with polyneuropathy
B27.92	Infectious mononucleosis, unspecified with meningitis
B27.99	Infectious mononucleosis, unspecified with other complication
B34.1	Enterovirus infection, unspecified
B37.7	Candidal sepsis
B39.4	Histoplasmosis capsulati, unspecified
B50.0	Plasmodium falciparum malaria with cerebral complications
B50.8	Other severe and complicated Plasmodium falciparum malaria
B51.0	Plasmodium vivax malaria with rupture of spleen
B51.8	Plasmodium vivax malaria with other complications
B52.0	Plasmodium malariae malaria with nephropathy
B52.8	Plasmodium malariae malaria with other complications
B57.30	Chagas' disease with digestive system involvement, unspecified
B57.31	Megaesophagus in Chagas' disease
B57.32	Megacolon in Chagas' disease

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Code	Description
B57.39	Other digestive system involvement in Chagas' disease
B57.40	Chagas' disease with nervous system involvement, unspecified
B57.41	Meningitis in Chagas' disease
B57.42	Meningoencephalitis in Chagas' disease
B57.49	Other nervous system involvement in Chagas' disease
B57.5	Chagas' disease (chronic) with other organ involvement
B58.1	Toxoplasma hepatitis
B65.9	Schistosomiasis, unspecified
B66.1	Clonorchiasis
B66.3	Fascioliasis
B67.0	Echinococcus granulosus infection of liver
B67.5	Echinococcus multilocularis infection of liver
B67.8	Echinococcosis, unspecified, of liver
B67.90	Echinococcosis, unspecified
B67.99	Other echinococcosis
B97.10	Unspecified enterovirus as the cause of diseases classified elsewhere
B97.89	Other viral agents as the cause of diseases classified elsewhere
C15.3	Malignant neoplasm of upper third of esophagus
C15.4	Malignant neoplasm of middle third of esophagus
C15.5	Malignant neoplasm of lower third of esophagus
C15.8	Malignant neoplasm of overlapping sites of esophagus
C15.9	Malignant neoplasm of esophagus, unspecified
C16.0	Malignant neoplasm of cardia
C16.1	Malignant neoplasm of fundus of stomach
C16.2	Malignant neoplasm of body of stomach
C16.3	Malignant neoplasm of pyloric antrum
C16.4	Malignant neoplasm of pylorus
C16.5	Malignant neoplasm of lesser curvature of stomach, unspecified
C16.6	Malignant neoplasm of greater curvature of stomach, unspecified
C16.8	Malignant neoplasm of overlapping sites of stomach

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Code	Description
C16.9	Malignant neoplasm of stomach, unspecified
C17.0	Malignant neoplasm of duodenum
C17.1	Malignant neoplasm of jejunum
C17.2	Malignant neoplasm of ileum
C17.3	Meckel's diverticulum, malignant
C17.8	Malignant neoplasm of overlapping sites of small intestine
C17.9	Malignant neoplasm of small intestine, unspecified
C18.0	Malignant neoplasm of cecum
C18.1	Malignant neoplasm of appendix
C18.2	Malignant neoplasm of ascending colon
C18.3	Malignant neoplasm of hepatic flexure
C18.4	Malignant neoplasm of transverse colon
C18.5	Malignant neoplasm of splenic flexure
C18.6	Malignant neoplasm of descending colon
C18.7	Malignant neoplasm of sigmoid colon
C18.8	Malignant neoplasm of overlapping sites of colon
C18.9	Malignant neoplasm of colon, unspecified
C19	Malignant neoplasm of rectosigmoid junction
C20	Malignant neoplasm of rectum
C21.0	Malignant neoplasm of anus, unspecified
C21.1	Malignant neoplasm of anal canal
C21.2	Malignant neoplasm of cloacogenic zone
C21.8	Malignant neoplasm of overlapping sites of rectum, anus and anal canal
C22.0	Liver cell carcinoma
C22.1	Intrahepatic bile duct carcinoma
C22.2	Hepatoblastoma
C22.3	Angiosarcoma of liver
C22.4	Other sarcomas of liver
C22.7	Other specified carcinomas of liver
C22.8	Malignant neoplasm of liver, primary, unspecified as to type



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Code	Description
C22.9	Malignant neoplasm of liver, not specified as primary or secondary
C23	Malignant neoplasm of gallbladder
C24.0	Malignant neoplasm of extrahepatic bile duct
C24.1	Malignant neoplasm of ampulla of Vater
C24.8	Malignant neoplasm of overlapping sites of biliary tract
C24.9	Malignant neoplasm of biliary tract, unspecified
C25.0	Malignant neoplasm of head of pancreas
C25.1	Malignant neoplasm of body of pancreas
C25.2	Malignant neoplasm of tail of pancreas
C25.3	Malignant neoplasm of pancreatic duct
C25.4	Malignant neoplasm of endocrine pancreas
C25.7	Malignant neoplasm of other parts of pancreas
C25.8	Malignant neoplasm of overlapping sites of pancreas
C25.9	Malignant neoplasm of pancreas, unspecified
C26.0	Malignant neoplasm of intestinal tract, part unspecified
C26.1	Malignant neoplasm of spleen
C26.9	Malignant neoplasm of ill-defined sites within the digestive system
C30.0	Malignant neoplasm of nasal cavity
C30.1	Malignant neoplasm of middle ear
C31.0	Malignant neoplasm of maxillary sinus
C31.1	Malignant neoplasm of ethmoidal sinus
C31.2	Malignant neoplasm of frontal sinus
C31.3	Malignant neoplasm of sphenoid sinus
C31.8	Malignant neoplasm of overlapping sites of accessory sinuses
C31.9	Malignant neoplasm of accessory sinus, unspecified
C32.0	Malignant neoplasm of glottis
C32.1	Malignant neoplasm of supraglottis
C32.2	Malignant neoplasm of subglottis
C32.3	Malignant neoplasm of laryngeal cartilage
C32.8	Malignant neoplasm of overlapping sites of larynx

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Code	Description
C32.9	Malignant neoplasm of larynx, unspecified
C33	Malignant neoplasm of trachea
C34.00	Malignant neoplasm of unspecified main bronchus
C34.01	Malignant neoplasm of right main bronchus
C34.02	Malignant neoplasm of left main bronchus
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung
C34.2	Malignant neoplasm of middle lobe, bronchus or lung
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung
C37	Malignant neoplasm of thymus
C38.0	Malignant neoplasm of heart
C38.1	Malignant neoplasm of anterior mediastinum
C38.2	Malignant neoplasm of posterior mediastinum
C38.3	Malignant neoplasm of mediastinum, part unspecified
C38.4	Malignant neoplasm of pleura
C38.8	Malignant neoplasm of overlapping sites of heart, mediastinum and pleura
C39.0	Malignant neoplasm of upper respiratory tract, part unspecified
C39.9	Malignant neoplasm of lower respiratory tract, part unspecified
C40.00	Malignant neoplasm of scapula and long bones of unspecified upper limb
C40.01	Malignant neoplasm of scapula and long bones of right upper limb
C40.02	Malignant neoplasm of scapula and long bones of left upper limb

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Code	Description
C40.10	Malignant neoplasm of short bones of unspecified upper limb
C40.11	Malignant neoplasm of short bones of right upper limb
C40.12	Malignant neoplasm of short bones of left upper limb
C40.20	Malignant neoplasm of long bones of unspecified lower limb
C40.21	Malignant neoplasm of long bones of right lower limb
C40.22	Malignant neoplasm of long bones of left lower limb
C40.30	Malignant neoplasm of short bones of unspecified lower limb
C40.31	Malignant neoplasm of short bones of right lower limb
C40.32	Malignant neoplasm of short bones of left lower limb
C40.80	Malignant neoplasm of overlapping sites of bone and articular cartilage of unspecified limb
C40.81	Malignant neoplasm of overlapping sites of bone and articular cartilage of right limb
C40.82	Malignant neoplasm of overlapping sites of bone and articular cartilage of left limb
C40.90	Malignant neoplasm of unspecified bones and articular cartilage of unspecified limb
C40.91	Malignant neoplasm of unspecified bones and articular cartilage of right limb
C40.92	Malignant neoplasm of unspecified bones and articular cartilage of left limb
C41.0	Malignant neoplasm of bones of skull and face
C41.1	Malignant neoplasm of mandible
C41.2	Malignant neoplasm of vertebral column
C41.3	Malignant neoplasm of ribs, sternum and clavicle
C41.4	Malignant neoplasm of pelvic bones, sacrum and coccyx
C41.9	Malignant neoplasm of bone and articular cartilage, unspecified
C43.0	Malignant melanoma of lip
C43.10	Malignant melanoma of unspecified eyelid, including canthus
C43.11	Malignant melanoma of right eyelid, including canthus
C43.12	Malignant melanoma of left eyelid, including canthus
C43.20	Malignant melanoma of unspecified ear and external auricular canal
C43.21	Malignant melanoma of right ear and external auricular canal
C43.22	Malignant melanoma of left ear and external auricular canal
C43.30	Malignant melanoma of unspecified part of face
C43.31	Malignant melanoma of nose

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Code	Description
C43.39	Malignant melanoma of other parts of face
C43.4	Malignant melanoma of scalp and neck
C43.51	Malignant melanoma of anal skin
C43.52	Malignant melanoma of skin of breast
C43.59	Malignant melanoma of other part of trunk
C43.60	Malignant melanoma of unspecified upper limb, including shoulder
C43.61	Malignant melanoma of right upper limb, including shoulder
C43.62	Malignant melanoma of left upper limb, including shoulder
C43.70	Malignant melanoma of unspecified lower limb, including hip
C43.71	Malignant melanoma of right lower limb, including hip
C43.72	Malignant melanoma of left lower limb, including hip
C43.8	Malignant melanoma of overlapping sites of skin
C43.9	Malignant melanoma of skin, unspecified
C44.00	Unspecified malignant neoplasm of skin of lip
C44.01	Basal cell carcinoma of skin of lip
C44.02	Squamous cell carcinoma of skin of lip
C44.09	Other specified malignant neoplasm of skin of lip
C44.101	Unspecified malignant neoplasm of skin of unspecified eyelid, including canthus
C44.102	Unspecified malignant neoplasm of skin of right eyelid, including canthus
C44.109	Unspecified malignant neoplasm of skin of left eyelid, including canthus
C44.111	Basal cell carcinoma of skin of unspecified eyelid, including canthus
C44.112	Basal cell carcinoma of skin of right eyelid, including canthus
C44.119	Basal cell carcinoma of skin of left eyelid, including canthus
C44.121	Squamous cell carcinoma of skin of unspecified eyelid, including canthus
C44.122	Squamous cell carcinoma of skin of right eyelid, including canthus
C44.129	Squamous cell carcinoma of skin of left eyelid, including canthus
C44.191	Other specified malignant neoplasm of skin of unspecified eyelid, including canthus
C44.192	Other specified malignant neoplasm of skin of right eyelid, including canthus
C44.199	Other specified malignant neoplasm of skin of left eyelid, including canthus
C44.201	Unspecified malignant neoplasm of skin of unspecified ear and external auricular canal

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Code	Description
C44.202	Unspecified malignant neoplasm of skin of right ear and external auricular canal
C44.209	Unspecified malignant neoplasm of skin of left ear and external auricular canal
C44.211	Basal cell carcinoma of skin of unspecified ear and external auricular canal
C44.212	Basal cell carcinoma of skin of right ear and external auricular canal
C44.219	Basal cell carcinoma of skin of left ear and external auricular canal
C44.221	Squamous cell carcinoma of skin of unspecified ear and external auricular canal
C44.222	Squamous cell carcinoma of skin of right ear and external auricular canal
C44.229	Squamous cell carcinoma of skin of left ear and external auricular canal
C44.291	Other specified malignant neoplasm of skin of unspecified ear and external auricular canal
C44.292	Other specified malignant neoplasm of skin of right ear and external auricular canal
C44.299	Other specified malignant neoplasm of skin of left ear and external auricular canal
C44.300	Unspecified malignant neoplasm of skin of unspecified part of face
C44.301	Unspecified malignant neoplasm of skin of nose
C44.309	Unspecified malignant neoplasm of skin of other parts of face
C44.310	Basal cell carcinoma of skin of unspecified parts of face
C44.311	Basal cell carcinoma of skin of nose
C44.319	Basal cell carcinoma of skin of other parts of face
C44.320	Squamous cell carcinoma of skin of unspecified parts of face
C44.321	Squamous cell carcinoma of skin of nose
C44.329	Squamous cell carcinoma of skin of other parts of face
C44.390	Other specified malignant neoplasm of skin of unspecified parts of face
C44.391	Other specified malignant neoplasm of skin of nose
C44.399	Other specified malignant neoplasm of skin of other parts of face
C44.40	Unspecified malignant neoplasm of skin of scalp and neck
C44.41	Basal cell carcinoma of skin of scalp and neck
C44.42	Squamous cell carcinoma of skin of scalp and neck
C44.49	Other specified malignant neoplasm of skin of scalp and neck
C44.500	Unspecified malignant neoplasm of anal skin
C44.501	Unspecified malignant neoplasm of skin of breast
C44.509	Unspecified malignant neoplasm of skin of other part of trunk



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Code	Description
C44.510	Basal cell carcinoma of anal skin
C44.511	Basal cell carcinoma of skin of breast
C44.519	Basal cell carcinoma of skin of other part of trunk
C44.520	Squamous cell carcinoma of anal skin
C44.521	Squamous cell carcinoma of skin of breast
C44.529	Squamous cell carcinoma of skin of other part of trunk
C44.590	Other specified malignant neoplasm of anal skin
C44.591	Other specified malignant neoplasm of skin of breast
C44.599	Other specified malignant neoplasm of skin of other part of trunk
C44.601	Unspecified malignant neoplasm of skin of unspecified upper limb, including shoulder
C44.602	Unspecified malignant neoplasm of skin of right upper limb, including shoulder
C44.609	Unspecified malignant neoplasm of skin of left upper limb, including shoulder
C44.611	Basal cell carcinoma of skin of unspecified upper limb, including shoulder
C44.612	Basal cell carcinoma of skin of right upper limb, including shoulder
C44.619	Basal cell carcinoma of skin of left upper limb, including shoulder
C44.621	Squamous cell carcinoma of skin of unspecified upper limb, including shoulder
C44.622	Squamous cell carcinoma of skin of right upper limb, including shoulder
C44.629	Squamous cell carcinoma of skin of left upper limb, including shoulder
C44.691	Other specified malignant neoplasm of skin of unspecified upper limb, including shoulder
C44.692	Other specified malignant neoplasm of skin of right upper limb, including shoulder
C44.699	Other specified malignant neoplasm of skin of left upper limb, including shoulder
C44.701	Unspecified malignant neoplasm of skin of unspecified lower limb, including hip
C44.702	Unspecified malignant neoplasm of skin of right lower limb, including hip
C44.709	Unspecified malignant neoplasm of skin of left lower limb, including hip
C44.711	Basal cell carcinoma of skin of unspecified lower limb, including hip
C44.712	Basal cell carcinoma of skin of right lower limb, including hip
C44.719	Basal cell carcinoma of skin of left lower limb, including hip
C44.721	Squamous cell carcinoma of skin of unspecified lower limb, including hip
C44.722	Squamous cell carcinoma of skin of right lower limb, including hip
C44.729	Squamous cell carcinoma of skin of left lower limb, including hip

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Code	Description
C44.791	Other specified malignant neoplasm of skin of unspecified lower limb, including hip
C44.792	Other specified malignant neoplasm of skin of right lower limb, including hip
C44.799	Other specified malignant neoplasm of skin of left lower limb, including hip
C44.80	Unspecified malignant neoplasm of overlapping sites of skin
C44.81	Basal cell carcinoma of overlapping sites of skin
C44.82	Squamous cell carcinoma of overlapping sites of skin
C44.89	Other specified malignant neoplasm of overlapping sites of skin
C44.90	Unspecified malignant neoplasm of skin, unspecified
C44.91	Basal cell carcinoma of skin, unspecified
C44.92	Squamous cell carcinoma of skin, unspecified
C44.99	Other specified malignant neoplasm of skin, unspecified
C45.0	Mesothelioma of pleura
C45.1	Mesothelioma of peritoneum
C45.2	Mesothelioma of pericardium
C46.0	Kaposi's sarcoma of skin
C46.1	Kaposi's sarcoma of soft tissue
C46.2	Kaposi's sarcoma of palate
C46.3	Kaposi's sarcoma of lymph nodes
C46.4	Kaposi's sarcoma of gastrointestinal sites
C46.50	Kaposi's sarcoma of unspecified lung
C46.51	Kaposi's sarcoma of right lung
C46.52	Kaposi's sarcoma of left lung
C46.7	Kaposi's sarcoma of other sites
C46.9	Kaposi's sarcoma, unspecified
C47.0	Malignant neoplasm of peripheral nerves of head, face and neck
C47.10	Malignant neoplasm of peripheral nerves of unspecified upper limb, including shoulder
C47.11	Malignant neoplasm of peripheral nerves of right upper limb, including shoulder
C47.12	Malignant neoplasm of peripheral nerves of left upper limb, including shoulder
C47.20	Malignant neoplasm of peripheral nerves of unspecified lower limb, including hip
C47.21	Malignant neoplasm of peripheral nerves of right lower limb, including hip

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Code	Description
C47.22	Malignant neoplasm of peripheral nerves of left lower limb, including hip
C47.3	Malignant neoplasm of peripheral nerves of thorax
C47.4	Malignant neoplasm of peripheral nerves of abdomen
C47.5	Malignant neoplasm of peripheral nerves of pelvis
C47.6	Malignant neoplasm of peripheral nerves of trunk, unspecified
C47.8	Malignant neoplasm of overlapping sites of peripheral nerves and autonomic nervous system
C47.9	Malignant neoplasm of peripheral nerves and autonomic nervous system, unspecified
C48.0	Malignant neoplasm of retroperitoneum
C48.1	Malignant neoplasm of specified parts of peritoneum
C48.2	Malignant neoplasm of peritoneum, unspecified
C48.8	Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum
C49.0	Malignant neoplasm of connective and soft tissue of head, face and neck
C49.10	Malignant neoplasm of connective and soft tissue of unspecified upper limb, including shoulder
C49.11	Malignant neoplasm of connective and soft tissue of right upper limb, including shoulder
C49.12	Malignant neoplasm of connective and soft tissue of left upper limb, including shoulder
C49.20	Malignant neoplasm of connective and soft tissue of unspecified lower limb, including hip
C49.21	Malignant neoplasm of connective and soft tissue of right lower limb, including hip
C49.22	Malignant neoplasm of connective and soft tissue of left lower limb, including hip
C49.3	Malignant neoplasm of connective and soft tissue of thorax
C49.4	Malignant neoplasm of connective and soft tissue of abdomen
C49.5	Malignant neoplasm of connective and soft tissue of pelvis
C49.6	Malignant neoplasm of connective and soft tissue of trunk, unspecified
C49.8	Malignant neoplasm of overlapping sites of connective and soft tissue
C49.9	Malignant neoplasm of connective and soft tissue, unspecified
*C49.A0	*Gastrointestinal stromal tumor, unspecified site
*C49.A1	*Gastrointestinal stromal tumor of esophagus
*C49.A2	*Gastrointestinal stromal tumor of stomach
*C49.A3	*Gastrointestinal stromal tumor of small intestine
*C49.A4	*Gastrointestinal stromal tumor of large intestine

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Code	Description
*C49.A5	*Gastrointestinal stromal tumor of rectum
*C49.A9	*Gastrointestinal stromal tumor of other sites
C50.011	Malignant neoplasm of nipple and areola, right female breast
C50.012	Malignant neoplasm of nipple and areola, left female breast
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast
C50.021	Malignant neoplasm of nipple and areola, right male breast
C50.022	Malignant neoplasm of nipple and areola, left male breast
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast
C50.111	Malignant neoplasm of central portion of right female breast
C50.112	Malignant neoplasm of central portion of left female breast
C50.119	Malignant neoplasm of central portion of unspecified female breast
C50.121	Malignant neoplasm of central portion of right male breast
C50.122	Malignant neoplasm of central portion of left male breast
C50.129	Malignant neoplasm of central portion of unspecified male breast
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast

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Code	Description
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast
C50.611	Malignant neoplasm of axillary tail of right female breast
C50.612	Malignant neoplasm of axillary tail of left female breast
C50.619	Malignant neoplasm of axillary tail of unspecified female breast
C50.621	Malignant neoplasm of axillary tail of right male breast
C50.622	Malignant neoplasm of axillary tail of left male breast
C50.629	Malignant neoplasm of axillary tail of unspecified male breast
C50.811	Malignant neoplasm of overlapping sites of right female breast
C50.812	Malignant neoplasm of overlapping sites of left female breast
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast
C50.821	Malignant neoplasm of overlapping sites of right male breast
C50.822	Malignant neoplasm of overlapping sites of left male breast
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast
C50.911	Malignant neoplasm of unspecified site of right female breast
C50.912	Malignant neoplasm of unspecified site of left female breast
C50.919	Malignant neoplasm of unspecified site of unspecified female breast
C50.921	Malignant neoplasm of unspecified site of right male breast
C50.922	Malignant neoplasm of unspecified site of left male breast
C50.929	Malignant neoplasm of unspecified site of unspecified male breast
C51.0	Malignant neoplasm of labium majus
C51.1	Malignant neoplasm of labium minus
C51.2	Malignant neoplasm of clitoris
C51.8	Malignant neoplasm of overlapping sites of vulva

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Code	Description
C51.9	Malignant neoplasm of vulva, unspecified
C52	Malignant neoplasm of vagina
C53.0	Malignant neoplasm of endocervix
C53.1	Malignant neoplasm of exocervix
C53.8	Malignant neoplasm of overlapping sites of cervix uteri
C53.9	Malignant neoplasm of cervix uteri, unspecified
C54.0	Malignant neoplasm of isthmus uteri
C54.1	Malignant neoplasm of endometrium
C54.2	Malignant neoplasm of myometrium
C54.3	Malignant neoplasm of fundus uteri
C54.8	Malignant neoplasm of overlapping sites of corpus uteri
C54.9	Malignant neoplasm of corpus uteri, unspecified
C55	Malignant neoplasm of uterus, part unspecified
C56.1	Malignant neoplasm of right ovary
C56.2	Malignant neoplasm of left ovary
C56.9	Malignant neoplasm of unspecified ovary
C57.00	Malignant neoplasm of unspecified fallopian tube
C57.01	Malignant neoplasm of right fallopian tube
C57.02	Malignant neoplasm of left fallopian tube
C57.10	Malignant neoplasm of unspecified broad ligament
C57.11	Malignant neoplasm of right broad ligament
C57.12	Malignant neoplasm of left broad ligament
C57.20	Malignant neoplasm of unspecified round ligament
C57.21	Malignant neoplasm of right round ligament
C57.22	Malignant neoplasm of left round ligament
C57.3	Malignant neoplasm of parametrium
C57.4	Malignant neoplasm of uterine adnexa, unspecified
C57.7	Malignant neoplasm of other specified female genital organs
C57.8	Malignant neoplasm of overlapping sites of female genital organs
C57.9	Malignant neoplasm of female genital organ, unspecified

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Code	Description
C58	Malignant neoplasm of placenta
C60.0	Malignant neoplasm of prepuce
C60.1	Malignant neoplasm of glans penis
C60.2	Malignant neoplasm of body of penis
C60.8	Malignant neoplasm of overlapping sites of penis
C60.9	Malignant neoplasm of penis, unspecified
C61	Malignant neoplasm of prostate
C62.00	Malignant neoplasm of unspecified undescended testis
C62.01	Malignant neoplasm of undescended right testis
C62.02	Malignant neoplasm of undescended left testis
C62.10	Malignant neoplasm of unspecified descended testis
C62.11	Malignant neoplasm of descended right testis
C62.12	Malignant neoplasm of descended left testis
C62.90	Malignant neoplasm of unspecified testis, unspecified whether descended or undescended
C62.91	Malignant neoplasm of right testis, unspecified whether descended or undescended
C62.92	Malignant neoplasm of left testis, unspecified whether descended or undescended
C63.00	Malignant neoplasm of unspecified epididymis
C63.01	Malignant neoplasm of right epididymis
C63.02	Malignant neoplasm of left epididymis
C63.10	Malignant neoplasm of unspecified spermatic cord
C63.11	Malignant neoplasm of right spermatic cord
C63.12	Malignant neoplasm of left spermatic cord
C63.2	Malignant neoplasm of scrotum
C63.7	Malignant neoplasm of other specified male genital organs
C63.8	Malignant neoplasm of overlapping sites of male genital organs
C63.9	Malignant neoplasm of male genital organ, unspecified
C64.1	Malignant neoplasm of right kidney, except renal pelvis
C64.2	Malignant neoplasm of left kidney, except renal pelvis
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis
C65.1	Malignant neoplasm of right renal pelvis

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Code	Description
C65.2	Malignant neoplasm of left renal pelvis
C65.9	Malignant neoplasm of unspecified renal pelvis
C66.1	Malignant neoplasm of right ureter
C66.2	Malignant neoplasm of left ureter
C66.9	Malignant neoplasm of unspecified ureter
C67.0	Malignant neoplasm of trigone of bladder
C67.1	Malignant neoplasm of dome of bladder
C67.2	Malignant neoplasm of lateral wall of bladder
C67.3	Malignant neoplasm of anterior wall of bladder
C67.4	Malignant neoplasm of posterior wall of bladder
C67.5	Malignant neoplasm of bladder neck
C67.6	Malignant neoplasm of ureteric orifice
C67.7	Malignant neoplasm of urachus
C67.8	Malignant neoplasm of overlapping sites of bladder
C67.9	Malignant neoplasm of bladder, unspecified
C68.0	Malignant neoplasm of urethra
C68.1	Malignant neoplasm of paraurethral glands
C68.8	Malignant neoplasm of overlapping sites of urinary organs
C68.9	Malignant neoplasm of urinary organ, unspecified
C7A.00	Malignant carcinoid tumor of unspecified site
C7A.090	Malignant carcinoid tumor of the bronchus and lung
C7A.091	Malignant carcinoid tumor of the thymus
C7A.092	Malignant carcinoid tumor of the stomach
C7A.093	Malignant carcinoid tumor of the kidney
C7A.094	Malignant carcinoid tumor of the foregut, unspecified
C7A.095	Malignant carcinoid tumor of the midgut, unspecified
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified
C7A.098	Malignant carcinoid tumors of other sites
C7B.00	Secondary carcinoid tumors, unspecified site
C7B.01	Secondary carcinoid tumors of distant lymph nodes

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Code	Description
C7B.02	Secondary carcinoid tumors of liver
C7B.03	Secondary carcinoid tumors of bone
C7B.04	Secondary carcinoid tumors of peritoneum
C7B.09	Secondary carcinoid tumors of other sites
C7B.1	Secondary Merkel cell carcinoma
C7B.8	Other secondary neuroendocrine tumors
C81.00	Nodular lymphocyte predominant Hodgkin lymphoma, unspecified site
C81.01	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.02	Nodular lymphocyte predominant Hodgkin lymphoma, intrathoracic lymph nodes
C81.03	Nodular lymphocyte predominant Hodgkin lymphoma, intra-abdominal lymph nodes
C81.04	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.05	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.06	Nodular lymphocyte predominant Hodgkin lymphoma, intrapelvic lymph nodes
C81.07	Nodular lymphocyte predominant Hodgkin lymphoma, spleen
C81.08	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of multiple sites
C81.09	Nodular lymphocyte predominant Hodgkin lymphoma, extranodal and solid organ sites
C81.10	Nodular sclerosis Hodgkin lymphoma, unspecified site
C81.11	Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.12	Nodular sclerosis Hodgkin lymphoma, intrathoracic lymph nodes
C81.13	Nodular sclerosis Hodgkin lymphoma, intra-abdominal lymph nodes
C81.14	Nodular sclerosis Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.15	Nodular sclerosis Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.16	Nodular sclerosis Hodgkin lymphoma, intrapelvic lymph nodes
C81.17	Nodular sclerosis Hodgkin lymphoma, spleen
C81.18	Nodular sclerosis Hodgkin lymphoma, lymph nodes of multiple sites
C81.19	Nodular sclerosis Hodgkin lymphoma, extranodal and solid organ sites
C81.20	Mixed cellularity Hodgkin lymphoma, unspecified site
C81.21	Mixed cellularity Hodgkin lymphoma, lymph nodes of head, face, and neck

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Code	Description
C81.22	Mixed cellularity Hodgkin lymphoma, intrathoracic lymph nodes
C81.23	Mixed cellularity Hodgkin lymphoma, intra-abdominal lymph nodes
C81.24	Mixed cellularity Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.25	Mixed cellularity Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.26	Mixed cellularity Hodgkin lymphoma, intrapelvic lymph nodes
C81.27	Mixed cellularity Hodgkin lymphoma, spleen
C81.28	Mixed cellularity Hodgkin lymphoma, lymph nodes of multiple sites
C81.29	Mixed cellularity Hodgkin lymphoma, extranodal and solid organ sites
C81.30	Lymphocyte depleted Hodgkin lymphoma, unspecified site
C81.31	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.32	Lymphocyte depleted Hodgkin lymphoma, intrathoracic lymph nodes
C81.33	Lymphocyte depleted Hodgkin lymphoma, intra-abdominal lymph nodes
C81.34	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.35	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.36	Lymphocyte depleted Hodgkin lymphoma, intrapelvic lymph nodes
C81.37	Lymphocyte depleted Hodgkin lymphoma, spleen
C81.38	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of multiple sites
C81.39	Lymphocyte depleted Hodgkin lymphoma, extranodal and solid organ sites
C81.40	Lymphocyte-rich Hodgkin lymphoma, unspecified site
C81.41	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of head, face, and neck
C81.42	Lymphocyte-rich Hodgkin lymphoma, intrathoracic lymph nodes
C81.43	Lymphocyte-rich Hodgkin lymphoma, intra-abdominal lymph nodes
C81.44	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.45	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.46	Lymphocyte-rich Hodgkin lymphoma, intrapelvic lymph nodes
C81.47	Lymphocyte-rich Hodgkin lymphoma, spleen
C81.48	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of multiple sites
C81.49	Lymphocyte-rich Hodgkin lymphoma, extranodal and solid organ sites
C81.70	Other Hodgkin lymphoma, unspecified site
C81.71	Other Hodgkin lymphoma, lymph nodes of head, face, and neck

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Code	Description
C81.72	Other Hodgkin lymphoma, intrathoracic lymph nodes
C81.73	Other Hodgkin lymphoma, intra-abdominal lymph nodes
C81.74	Other Hodgkin lymphoma, lymph nodes of axilla and upper limb
C81.75	Other Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C81.76	Other Hodgkin lymphoma, intrapelvic lymph nodes
C81.77	Other Hodgkin lymphoma, spleen
C81.78	Other Hodgkin lymphoma, lymph nodes of multiple sites
C81.79	Other Hodgkin lymphoma, extranodal and solid organ sites
C81.90	Hodgkin lymphoma, unspecified, unspecified site
C81.91	Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck
C81.92	Hodgkin lymphoma, unspecified, intrathoracic lymph nodes
C81.93	Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes
C81.94	Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb
C81.95	Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C81.96	Hodgkin lymphoma, unspecified, intrapelvic lymph nodes
C81.97	Hodgkin lymphoma, unspecified, spleen
C81.98	Hodgkin lymphoma, unspecified, lymph nodes of multiple sites
C81.99	Hodgkin lymphoma, unspecified, extranodal and solid organ sites
C82.00	Follicular lymphoma grade I, unspecified site
C82.01	Follicular lymphoma grade I, lymph nodes of head, face, and neck
C82.02	Follicular lymphoma grade I, intrathoracic lymph nodes
C82.03	Follicular lymphoma grade I, intra-abdominal lymph nodes
C82.04	Follicular lymphoma grade I, lymph nodes of axilla and upper limb
C82.05	Follicular lymphoma grade I, lymph nodes of inguinal region and lower limb
C82.06	Follicular lymphoma grade I, intrapelvic lymph nodes
C82.07	Follicular lymphoma grade I, spleen
C82.08	Follicular lymphoma grade I, lymph nodes of multiple sites
C82.09	Follicular lymphoma grade I, extranodal and solid organ sites
C82.10	Follicular lymphoma grade II, unspecified site
C82.11	Follicular lymphoma grade II, lymph nodes of head, face, and neck

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Code	Description
C82.12	Follicular lymphoma grade II, intrathoracic lymph nodes
C82.13	Follicular lymphoma grade II, intra-abdominal lymph nodes
C82.14	Follicular lymphoma grade II, lymph nodes of axilla and upper limb
C82.15	Follicular lymphoma grade II, lymph nodes of inguinal region and lower limb
C82.16	Follicular lymphoma grade II, intrapelvic lymph nodes
C82.17	Follicular lymphoma grade II, spleen
C82.18	Follicular lymphoma grade II, lymph nodes of multiple sites
C82.19	Follicular lymphoma grade II, extranodal and solid organ sites
C82.20	Follicular lymphoma grade III, unspecified, unspecified site
C82.21	Follicular lymphoma grade III, unspecified, lymph nodes of head, face, and neck
C82.22	Follicular lymphoma grade III, unspecified, intrathoracic lymph nodes
C82.23	Follicular lymphoma grade III, unspecified, intra-abdominal lymph nodes
C82.24	Follicular lymphoma grade III, unspecified, lymph nodes of axilla and upper limb
C82.25	Follicular lymphoma grade III, unspecified, lymph nodes of inguinal region and lower limb
C82.26	Follicular lymphoma grade III, unspecified, intrapelvic lymph nodes
C82.27	Follicular lymphoma grade III, unspecified, spleen
C82.28	Follicular lymphoma grade III, unspecified, lymph nodes of multiple sites
C82.29	Follicular lymphoma grade III, unspecified, extranodal and solid organ sites
C82.30	Follicular lymphoma grade IIIa, unspecified site
C82.31	Follicular lymphoma grade IIIa, lymph nodes of head, face, and neck
C82.32	Follicular lymphoma grade IIIa, intrathoracic lymph nodes
C82.33	Follicular lymphoma grade IIIa, intra-abdominal lymph nodes
C82.34	Follicular lymphoma grade IIIa, lymph nodes of axilla and upper limb
C82.35	Follicular lymphoma grade IIIa, lymph nodes of inguinal region and lower limb
C82.36	Follicular lymphoma grade IIIa, intrapelvic lymph nodes
C82.37	Follicular lymphoma grade IIIa, spleen
C82.38	Follicular lymphoma grade IIIa, lymph nodes of multiple sites
C82.39	Follicular lymphoma grade IIIa, extranodal and solid organ sites
C82.40	Follicular lymphoma grade IIIb, unspecified site
C82.41	Follicular lymphoma grade IIIb, lymph nodes of head, face, and neck

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Code	Description
C82.42	Follicular lymphoma grade IIIb, intrathoracic lymph nodes
C82.43	Follicular lymphoma grade IIIb, intra-abdominal lymph nodes
C82.44	Follicular lymphoma grade IIIb, lymph nodes of axilla and upper limb
C82.45	Follicular lymphoma grade IIIb, lymph nodes of inguinal region and lower limb
C82.46	Follicular lymphoma grade IIIb, intrapelvic lymph nodes
C82.47	Follicular lymphoma grade IIIb, spleen
C82.48	Follicular lymphoma grade IIIb, lymph nodes of multiple sites
C82.49	Follicular lymphoma grade IIIb, extranodal and solid organ sites
C82.50	Diffuse follicle center lymphoma, unspecified site
C82.51	Diffuse follicle center lymphoma, lymph nodes of head, face, and neck
C82.52	Diffuse follicle center lymphoma, intrathoracic lymph nodes
C82.53	Diffuse follicle center lymphoma, intra-abdominal lymph nodes
C82.54	Diffuse follicle center lymphoma, lymph nodes of axilla and upper limb
C82.55	Diffuse follicle center lymphoma, lymph nodes of inguinal region and lower limb
C82.56	Diffuse follicle center lymphoma, intrapelvic lymph nodes
C82.57	Diffuse follicle center lymphoma, spleen
C82.58	Diffuse follicle center lymphoma, lymph nodes of multiple sites
C82.59	Diffuse follicle center lymphoma, extranodal and solid organ sites
C82.60	Cutaneous follicle center lymphoma, unspecified site
C82.61	Cutaneous follicle center lymphoma, lymph nodes of head, face, and neck
C82.62	Cutaneous follicle center lymphoma, intrathoracic lymph nodes
C82.63	Cutaneous follicle center lymphoma, intra-abdominal lymph nodes
C82.64	Cutaneous follicle center lymphoma, lymph nodes of axilla and upper limb
C82.65	Cutaneous follicle center lymphoma, lymph nodes of inguinal region and lower limb
C82.66	Cutaneous follicle center lymphoma, intrapelvic lymph nodes
C82.67	Cutaneous follicle center lymphoma, spleen
C82.68	Cutaneous follicle center lymphoma, lymph nodes of multiple sites
C82.69	Cutaneous follicle center lymphoma, extranodal and solid organ sites
C82.80	Other types of follicular lymphoma, unspecified site
C82.81	Other types of follicular lymphoma, lymph nodes of head, face, and neck

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Code	Description
C82.82	Other types of follicular lymphoma, intrathoracic lymph nodes
C82.83	Other types of follicular lymphoma, intra-abdominal lymph nodes
C82.84	Other types of follicular lymphoma, lymph nodes of axilla and upper limb
C82.85	Other types of follicular lymphoma, lymph nodes of inguinal region and lower limb
C82.86	Other types of follicular lymphoma, intrapelvic lymph nodes
C82.87	Other types of follicular lymphoma, spleen
C82.88	Other types of follicular lymphoma, lymph nodes of multiple sites
C82.89	Other types of follicular lymphoma, extranodal and solid organ sites
C82.90	Follicular lymphoma, unspecified, unspecified site
C82.91	Follicular lymphoma, unspecified, lymph nodes of head, face, and neck
C82.92	Follicular lymphoma, unspecified, intrathoracic lymph nodes
C82.93	Follicular lymphoma, unspecified, intra-abdominal lymph nodes
C82.94	Follicular lymphoma, unspecified, lymph nodes of axilla and upper limb
C82.95	Follicular lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C82.96	Follicular lymphoma, unspecified, intrapelvic lymph nodes
C82.97	Follicular lymphoma, unspecified, spleen
C82.98	Follicular lymphoma, unspecified, lymph nodes of multiple sites
C82.99	Follicular lymphoma, unspecified, extranodal and solid organ sites
C83.00	Small cell B-cell lymphoma, unspecified site
C83.01	Small cell B-cell lymphoma, lymph nodes of head, face, and neck
C83.02	Small cell B-cell lymphoma, intrathoracic lymph nodes
C83.03	Small cell B-cell lymphoma, intra-abdominal lymph nodes
C83.04	Small cell B-cell lymphoma, lymph nodes of axilla and upper limb
C83.05	Small cell B-cell lymphoma, lymph nodes of inguinal region and lower limb
C83.06	Small cell B-cell lymphoma, intrapelvic lymph nodes
C83.07	Small cell B-cell lymphoma, spleen
C83.08	Small cell B-cell lymphoma, lymph nodes of multiple sites
C83.09	Small cell B-cell lymphoma, extranodal and solid organ sites
C83.10	Mantle cell lymphoma, unspecified site
C83.11	Mantle cell lymphoma, lymph nodes of head, face, and neck

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Code	Description
C83.12	Mantle cell lymphoma, intrathoracic lymph nodes
C83.13	Mantle cell lymphoma, intra-abdominal lymph nodes
C83.14	Mantle cell lymphoma, lymph nodes of axilla and upper limb
C83.15	Mantle cell lymphoma, lymph nodes of inguinal region and lower limb
C83.16	Mantle cell lymphoma, intrapelvic lymph nodes
C83.17	Mantle cell lymphoma, spleen
C83.18	Mantle cell lymphoma, lymph nodes of multiple sites
C83.19	Mantle cell lymphoma, extranodal and solid organ sites
C83.30	Diffuse large B-cell lymphoma, unspecified site
C83.31	Diffuse large B-cell lymphoma, lymph nodes of head, face, and neck
C83.32	Diffuse large B-cell lymphoma, intrathoracic lymph nodes
C83.33	Diffuse large B-cell lymphoma, intra-abdominal lymph nodes
C83.34	Diffuse large B-cell lymphoma, lymph nodes of axilla and upper limb
C83.35	Diffuse large B-cell lymphoma, lymph nodes of inguinal region and lower limb
C83.36	Diffuse large B-cell lymphoma, intrapelvic lymph nodes
C83.37	Diffuse large B-cell lymphoma, spleen
C83.38	Diffuse large B-cell lymphoma, lymph nodes of multiple sites
C83.39	Diffuse large B-cell lymphoma, extranodal and solid organ sites
C83.50	Lymphoblastic (diffuse) lymphoma, unspecified site
C83.51	Lymphoblastic (diffuse) lymphoma, lymph nodes of head, face, and neck
C83.52	Lymphoblastic (diffuse) lymphoma, intrathoracic lymph nodes
C83.53	Lymphoblastic (diffuse) lymphoma, intra-abdominal lymph nodes
C83.54	Lymphoblastic (diffuse) lymphoma, lymph nodes of axilla and upper limb
C83.55	Lymphoblastic (diffuse) lymphoma, lymph nodes of inguinal region and lower limb
C83.56	Lymphoblastic (diffuse) lymphoma, intrapelvic lymph nodes
C83.57	Lymphoblastic (diffuse) lymphoma, spleen
C83.58	Lymphoblastic (diffuse) lymphoma, lymph nodes of multiple sites
C83.59	Lymphoblastic (diffuse) lymphoma, extranodal and solid organ sites
C83.70	Burkitt lymphoma, unspecified site
C83.71	Burkitt lymphoma, lymph nodes of head, face, and neck

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Code	Description
C83.72	Burkitt lymphoma, intrathoracic lymph nodes
C83.73	Burkitt lymphoma, intra-abdominal lymph nodes
C83.74	Burkitt lymphoma, lymph nodes of axilla and upper limb
C83.75	Burkitt lymphoma, lymph nodes of inguinal region and lower limb
C83.76	Burkitt lymphoma, intrapelvic lymph nodes
C83.77	Burkitt lymphoma, spleen
C83.78	Burkitt lymphoma, lymph nodes of multiple sites
C83.79	Burkitt lymphoma, extranodal and solid organ sites
C83.80	Other non-follicular lymphoma, unspecified site
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck
C83.82	Other non-follicular lymphoma, intrathoracic lymph nodes
C83.83	Other non-follicular lymphoma, intra-abdominal lymph nodes
C83.84	Other non-follicular lymphoma, lymph nodes of axilla and upper limb
C83.85	Other non-follicular lymphoma, lymph nodes of inguinal region and lower limb
C83.86	Other non-follicular lymphoma, intrapelvic lymph nodes
C83.87	Other non-follicular lymphoma, spleen
C83.88	Other non-follicular lymphoma, lymph nodes of multiple sites
C83.89	Other non-follicular lymphoma, extranodal and solid organ sites
C83.90	Non-follicular (diffuse) lymphoma, unspecified, unspecified site
C83.91	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of head, face, and neck
C83.92	Non-follicular (diffuse) lymphoma, unspecified, intrathoracic lymph nodes
C83.93	Non-follicular (diffuse) lymphoma, unspecified, intra-abdominal lymph nodes
C83.94	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of axilla and upper limb
C83.95	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C83.96	Non-follicular (diffuse) lymphoma, unspecified, intrapelvic lymph nodes
C83.97	Non-follicular (diffuse) lymphoma, unspecified, spleen
C83.98	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of multiple sites
C83.99	Non-follicular (diffuse) lymphoma, unspecified, extranodal and solid organ sites
C84.00	Mycosis fungoides, unspecified site
C84.01	Mycosis fungoides, lymph nodes of head, face, and neck

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Code	Description
C84.02	Mycosis fungoides, intrathoracic lymph nodes
C84.03	Mycosis fungoides, intra-abdominal lymph nodes
C84.04	Mycosis fungoides, lymph nodes of axilla and upper limb
C84.05	Mycosis fungoides, lymph nodes of inguinal region and lower limb
C84.06	Mycosis fungoides, intrapelvic lymph nodes
C84.07	Mycosis fungoides, spleen
C84.08	Mycosis fungoides, lymph nodes of multiple sites
C84.09	Mycosis fungoides, extranodal and solid organ sites
C84.10	Sezary disease, unspecified site
C84.11	Sezary disease, lymph nodes of head, face, and neck
C84.12	Sezary disease, intrathoracic lymph nodes
C84.13	Sezary disease, intra-abdominal lymph nodes
C84.14	Sezary disease, lymph nodes of axilla and upper limb
C84.15	Sezary disease, lymph nodes of inguinal region and lower limb
C84.16	Sezary disease, intrapelvic lymph nodes
C84.17	Sezary disease, spleen
C84.18	Sezary disease, lymph nodes of multiple sites
C84.19	Sezary disease, extranodal and solid organ sites
C84.40	Peripheral T-cell lymphoma, not classified, unspecified site
C84.41	Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck
C84.42	Peripheral T-cell lymphoma, not classified, intrathoracic lymph nodes
C84.43	Peripheral T-cell lymphoma, not classified, intra-abdominal lymph nodes
C84.44	Peripheral T-cell lymphoma, not classified, lymph nodes of axilla and upper limb
C84.45	Peripheral T-cell lymphoma, not classified, lymph nodes of inguinal region and lower limb
C84.46	Peripheral T-cell lymphoma, not classified, intrapelvic lymph nodes
C84.47	Peripheral T-cell lymphoma, not classified, spleen
C84.48	Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites
C84.49	Peripheral T-cell lymphoma, not classified, extranodal and solid organ sites
C84.60	Anaplastic large cell lymphoma, ALK-positive, unspecified site
C84.61	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck

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Code	Description
C84.62	Anaplastic large cell lymphoma, ALK-positive, intrathoracic lymph nodes
C84.63	Anaplastic large cell lymphoma, ALK-positive, intra-abdominal lymph nodes
C84.64	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of axilla and upper limb
C84.65	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of inguinal region and lower limb
C84.66	Anaplastic large cell lymphoma, ALK-positive, intrapelvic lymph nodes
C84.67	Anaplastic large cell lymphoma, ALK-positive, spleen
C84.68	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of multiple sites
C84.69	Anaplastic large cell lymphoma, ALK-positive, extranodal and solid organ sites
C84.70	Anaplastic large cell lymphoma, ALK-negative, unspecified site
C84.71	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck
C84.72	Anaplastic large cell lymphoma, ALK-negative, intrathoracic lymph nodes
C84.73	Anaplastic large cell lymphoma, ALK-negative, intra-abdominal lymph nodes
C84.74	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of axilla and upper limb
C84.75	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of inguinal region and lower limb
C84.76	Anaplastic large cell lymphoma, ALK-negative, intrapelvic lymph nodes
C84.77	Anaplastic large cell lymphoma, ALK-negative, spleen
C84.78	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of multiple sites
C84.79	Anaplastic large cell lymphoma, ALK-negative, extranodal and solid organ sites
C84.90	Mature T/NK-cell lymphomas, unspecified, unspecified site
C84.91	Mature T/NK-cell lymphomas, unspecified, lymph nodes of head, face, and neck
C84.92	Mature T/NK-cell lymphomas, unspecified, intrathoracic lymph nodes
C84.93	Mature T/NK-cell lymphomas, unspecified, intra-abdominal lymph nodes
C84.94	Mature T/NK-cell lymphomas, unspecified, lymph nodes of axilla and upper limb
C84.95	Mature T/NK-cell lymphomas, unspecified, lymph nodes of inguinal region and lower limb
C84.96	Mature T/NK-cell lymphomas, unspecified, intrapelvic lymph nodes
C84.97	Mature T/NK-cell lymphomas, unspecified, spleen
C84.98	Mature T/NK-cell lymphomas, unspecified, lymph nodes of multiple sites
C84.99	Mature T/NK-cell lymphomas, unspecified, extranodal and solid organ sites
C84.A0	Cutaneous T-cell lymphoma, unspecified, unspecified site

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Code	Description
C84.A1	Cutaneous T-cell lymphoma, unspecified lymph nodes of head, face, and neck
C84.A2	Cutaneous T-cell lymphoma, unspecified, intrathoracic lymph nodes
C84.A3	Cutaneous T-cell lymphoma, unspecified, intra-abdominal lymph nodes
C84.A4	Cutaneous T-cell lymphoma, unspecified, lymph nodes of axilla and upper limb
C84.A5	Cutaneous T-cell lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C84.A6	Cutaneous T-cell lymphoma, unspecified, intrapelvic lymph nodes
C84.A7	Cutaneous T-cell lymphoma, unspecified, spleen
C84.A8	Cutaneous T-cell lymphoma, unspecified, lymph nodes of multiple sites
C84.A9	Cutaneous T-cell lymphoma, unspecified, extranodal and solid organ sites
C84.Z0	Other mature T/NK-cell lymphomas, unspecified site
C84.Z1	Other mature T/NK-cell lymphomas, lymph nodes of head, face, and neck
C84.Z2	Other mature T/NK-cell lymphomas, intrathoracic lymph nodes
C84.Z3	Other mature T/NK-cell lymphomas, intra-abdominal lymph nodes
C84.Z4	Other mature T/NK-cell lymphomas, lymph nodes of axilla and upper limb
C84.Z5	Other mature T/NK-cell lymphomas, lymph nodes of inguinal region and lower limb
C84.Z6	Other mature T/NK-cell lymphomas, intrapelvic lymph nodes
C84.Z7	Other mature T/NK-cell lymphomas, spleen
C84.Z8	Other mature T/NK-cell lymphomas, lymph nodes of multiple sites
C84.Z9	Other mature T/NK-cell lymphomas, extranodal and solid organ sites
C85.10	Unspecified B-cell lymphoma, unspecified site
C85.11	Unspecified B-cell lymphoma, lymph nodes of head, face, and neck
C85.12	Unspecified B-cell lymphoma, intrathoracic lymph nodes
C85.13	Unspecified B-cell lymphoma, intra-abdominal lymph nodes
C85.14	Unspecified B-cell lymphoma, lymph nodes of axilla and upper limb
C85.15	Unspecified B-cell lymphoma, lymph nodes of inguinal region and lower limb
C85.16	Unspecified B-cell lymphoma, intrapelvic lymph nodes
C85.17	Unspecified B-cell lymphoma, spleen
C85.18	Unspecified B-cell lymphoma, lymph nodes of multiple sites
C85.19	Unspecified B-cell lymphoma, extranodal and solid organ sites
C85.20	Mediastinal (thymic) large B-cell lymphoma, unspecified site

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Code	Description
C85.21	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of head, face, and neck
C85.22	Mediastinal (thymic) large B-cell lymphoma, intrathoracic lymph nodes
C85.23	Mediastinal (thymic) large B-cell lymphoma, intra-abdominal lymph nodes
C85.24	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of axilla and upper limb
C85.25	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of inguinal region and lower limb
C85.26	Mediastinal (thymic) large B-cell lymphoma, intrapelvic lymph nodes
C85.27	Mediastinal (thymic) large B-cell lymphoma, spleen
C85.28	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of multiple sites
C85.29	Mediastinal (thymic) large B-cell lymphoma, extranodal and solid organ sites
C85.80	Other specified types of non-Hodgkin lymphoma, unspecified site
C85.81	Other specified types of non-Hodgkin lymphoma, lymph nodes of head, face, and neck
C85.82	Other specified types of non-Hodgkin lymphoma, intrathoracic lymph nodes
C85.83	Other specified types of non-Hodgkin lymphoma, intra-abdominal lymph nodes
C85.84	Other specified types of non-Hodgkin lymphoma, lymph nodes of axilla and upper limb
C85.85	Other specified types of non-Hodgkin lymphoma, lymph nodes of inguinal region and lower limb
C85.86	Other specified types of non-Hodgkin lymphoma, intrapelvic lymph nodes
C85.87	Other specified types of non-Hodgkin lymphoma, spleen
C85.88	Other specified types of non-Hodgkin lymphoma, lymph nodes of multiple sites
C85.89	Other specified types of non-Hodgkin lymphoma, extranodal and solid organ sites
C85.90	Non-Hodgkin lymphoma, unspecified, unspecified site
C85.91	Non-Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck
C85.92	Non-Hodgkin lymphoma, unspecified, intrathoracic lymph nodes
C85.93	Non-Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes
C85.94	Non-Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb
C85.95	Non-Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb
C85.96	Non-Hodgkin lymphoma, unspecified, intrapelvic lymph nodes
C85.97	Non-Hodgkin lymphoma, unspecified, spleen
C85.98	Non-Hodgkin lymphoma, unspecified, lymph nodes of multiple sites
C85.99	Non-Hodgkin lymphoma, unspecified, extranodal and solid organ sites
C86.0	Extranodal NK/T-cell lymphoma, nasal type

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Code	Description
C86.1	Hepatosplenic T-cell lymphoma
C86.2	Enteropathy-type (intestinal) T-cell lymphoma
C86.3	Subcutaneous panniculitis-like T-cell lymphoma
C86.4	Blastic NK-cell lymphoma
C86.5	Angioimmunoblastic T-cell lymphoma
C86.6	Primary cutaneous CD30-positive T-cell proliferations
C88.2	Heavy chain disease
C88.3	Immunoproliferative small intestinal disease
C88.4	Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue [MALT-lymphoma]
C88.8	Other malignant immunoproliferative diseases
C88.9	Malignant immunoproliferative disease, unspecified
C90.00	Multiple myeloma not having achieved remission
C90.01	Multiple myeloma in remission
C90.02	Multiple myeloma in relapse
C90.10	Plasma cell leukemia not having achieved remission
C90.11	Plasma cell leukemia in remission
C90.12	Plasma cell leukemia in relapse
C90.20	Extramedullary plasmacytoma not having achieved remission
C90.21	Extramedullary plasmacytoma in remission
C90.22	Extramedullary plasmacytoma in relapse
C90.30	Solitary plasmacytoma not having achieved remission
C90.31	Solitary plasmacytoma in remission
C90.32	Solitary plasmacytoma in relapse
C91.00	Acute lymphoblastic leukemia not having achieved remission
C91.01	Acute lymphoblastic leukemia, in remission
C91.02	Acute lymphoblastic leukemia, in relapse
C91.10	Chronic lymphocytic leukemia of B-cell type not having achieved remission
C91.11	Chronic lymphocytic leukemia of B-cell type in remission
C91.12	Chronic lymphocytic leukemia of B-cell type in relapse
C91.30	Prolymphocytic leukemia of B-cell type not having achieved remission

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Code	Description
C91.31	Prolymphocytic leukemia of B-cell type, in remission
C91.32	Prolymphocytic leukemia of B-cell type, in relapse
C91.40	Hairy cell leukemia not having achieved remission
C91.41	Hairy cell leukemia, in remission
C91.42	Hairy cell leukemia, in relapse
C91.50	Adult T-cell lymphoma/leukemia (HTLV-1-associated) not having achieved remission
C91.51	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in remission
C91.52	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in relapse
C91.60	Prolymphocytic leukemia of T-cell type not having achieved remission
C91.61	Prolymphocytic leukemia of T-cell type, in remission
C91.62	Prolymphocytic leukemia of T-cell type, in relapse
C91.90	Lymphoid leukemia, unspecified not having achieved remission
C91.91	Lymphoid leukemia, unspecified, in remission
C91.92	Lymphoid leukemia, unspecified, in relapse
C91.A0	Mature B-cell leukemia Burkitt-type not having achieved remission
C91.A1	Mature B-cell leukemia Burkitt-type, in remission
C91.A2	Mature B-cell leukemia Burkitt-type, in relapse
C91.Z0	Other lymphoid leukemia not having achieved remission
C91.Z1	Other lymphoid leukemia, in remission
C91.Z2	Other lymphoid leukemia, in relapse
C92.00	Acute myeloblastic leukemia, not having achieved remission
C92.01	Acute myeloblastic leukemia, in remission
C92.02	Acute myeloblastic leukemia, in relapse
C92.10	Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission
C92.11	Chronic myeloid leukemia, BCR/ABL-positive, in remission
C92.12	Chronic myeloid leukemia, BCR/ABL-positive, in relapse
C92.20	Atypical chronic myeloid leukemia, BCR/ABL-negative, not having achieved remission
C92.21	Atypical chronic myeloid leukemia, BCR/ABL-negative, in remission
C92.22	Atypical chronic myeloid leukemia, BCR/ABL-negative, in relapse
C92.30	Myeloid sarcoma, not having achieved remission

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Code	Description
C92.31	Myeloid sarcoma, in remission
C92.32	Myeloid sarcoma, in relapse
C92.40	Acute promyelocytic leukemia, not having achieved remission
C92.41	Acute promyelocytic leukemia, in remission
C92.42	Acute promyelocytic leukemia, in relapse
C92.50	Acute myelomonocytic leukemia, not having achieved remission
C92.51	Acute myelomonocytic leukemia, in remission
C92.52	Acute myelomonocytic leukemia, in relapse
C92.60	Acute myeloid leukemia with 11q23-abnormality not having achieved remission
C92.61	Acute myeloid leukemia with 11q23-abnormality in remission
C92.62	Acute myeloid leukemia with 11q23-abnormality in relapse
C92.90	Myeloid leukemia, unspecified, not having achieved remission
C92.91	Myeloid leukemia, unspecified in remission
C92.92	Myeloid leukemia, unspecified in relapse
C92.A0	Acute myeloid leukemia with multilineage dysplasia, not having achieved remission
C92.A1	Acute myeloid leukemia with multilineage dysplasia, in remission
C92.A2	Acute myeloid leukemia with multilineage dysplasia, in relapse
C92.Z0	Other myeloid leukemia not having achieved remission
C92.Z1	Other myeloid leukemia, in remission
C92.Z2	Other myeloid leukemia, in relapse
C93.00	Acute monoblastic/monocytic leukemia, not having achieved remission
C93.01	Acute monoblastic/monocytic leukemia, in remission
C93.02	Acute monoblastic/monocytic leukemia, in relapse
C93.10	Chronic myelomonocytic leukemia not having achieved remission
C93.11	Chronic myelomonocytic leukemia, in remission
C93.12	Chronic myelomonocytic leukemia, in relapse
C93.30	Juvenile myelomonocytic leukemia, not having achieved remission
C93.31	Juvenile myelomonocytic leukemia, in remission
C93.32	Juvenile myelomonocytic leukemia, in relapse
C93.90	Monocytic leukemia, unspecified, not having achieved remission

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Code	Description
C93.91	Monocytic leukemia, unspecified in remission
C93.92	Monocytic leukemia, unspecified in relapse
C93.Z0	Other monocytic leukemia, not having achieved remission
C93.Z1	Other monocytic leukemia, in remission
C93.Z2	Other monocytic leukemia, in relapse
C94.00	Acute erythroid leukemia, not having achieved remission
C94.01	Acute erythroid leukemia, in remission
C94.02	Acute erythroid leukemia, in relapse
C94.20	Acute megakaryoblastic leukemia not having achieved remission
C94.21	Acute megakaryoblastic leukemia, in remission
C94.22	Acute megakaryoblastic leukemia, in relapse
C94.30	Mast cell leukemia not having achieved remission
C94.31	Mast cell leukemia, in remission
C94.32	Mast cell leukemia, in relapse
C94.40	Acute panmyelosis with myelofibrosis not having achieved remission
C94.41	Acute panmyelosis with myelofibrosis, in remission
C94.42	Acute panmyelosis with myelofibrosis, in relapse
C94.6	Myelodysplastic disease, not classified
C94.80	Other specified leukemias not having achieved remission
C94.81	Other specified leukemias, in remission
C94.82	Other specified leukemias, in relapse
C95.00	Acute leukemia of unspecified cell type not having achieved remission
C95.01	Acute leukemia of unspecified cell type, in remission
C95.02	Acute leukemia of unspecified cell type, in relapse
C95.10	Chronic leukemia of unspecified cell type not having achieved remission
C95.11	Chronic leukemia of unspecified cell type, in remission
C95.12	Chronic leukemia of unspecified cell type, in relapse
C95.90	Leukemia, unspecified not having achieved remission
C95.91	Leukemia, unspecified, in remission
C95.92	Leukemia, unspecified, in relapse

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Code	Description
C96.0	Multifocal and multisystemic (disseminated) Langerhans-cell histiocytosis
C96.2	Malignant mast cell tumor
C96.4	Sarcoma of dendritic cells (accessory cells)
C96.9	Malignant neoplasm of lymphoid, hematopoietic and related tissue, unspecified
C96.A	Histiocytic sarcoma
C96.Z	Other specified malignant neoplasms of lymphoid, hematopoietic and related tissue
D01.40	Carcinoma in situ of unspecified part of intestine
D01.49	Carcinoma in situ of other parts of intestine
D01.5	Carcinoma in situ of liver, gallbladder and bile ducts
D01.7	Carcinoma in situ of other specified digestive organs
D01.9	Carcinoma in situ of digestive organ, unspecified
D03.0	Melanoma in situ of lip
D03.10	Melanoma in situ of unspecified eyelid, including canthus
D03.11	Melanoma in situ of right eyelid, including canthus
D03.12	Melanoma in situ of left eyelid, including canthus
D03.20	Melanoma in situ of unspecified ear and external auricular canal
D03.21	Melanoma in situ of right ear and external auricular canal
D03.22	Melanoma in situ of left ear and external auricular canal
D03.30	Melanoma in situ of unspecified part of face
D03.39	Melanoma in situ of other parts of face
D03.4	Melanoma in situ of scalp and neck
D03.51	Melanoma in situ of anal skin
D03.52	Melanoma in situ of breast (skin) (soft tissue)
D03.59	Melanoma in situ of other part of trunk
D03.60	Melanoma in situ of unspecified upper limb, including shoulder
D03.61	Melanoma in situ of right upper limb, including shoulder
D03.62	Melanoma in situ of left upper limb, including shoulder
D03.70	Melanoma in situ of unspecified lower limb, including hip
D03.71	Melanoma in situ of right lower limb, including hip
D03.72	Melanoma in situ of left lower limb, including hip

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Code	Description
D03.8	Melanoma in situ of other sites
D03.9	Melanoma in situ, unspecified
D13.4	Benign neoplasm of liver
D13.5	Benign neoplasm of extrahepatic bile ducts
D13.6	Benign neoplasm of pancreas
D13.7	Benign neoplasm of endocrine pancreas
D18.03	Hemangioma of intra-abdominal structures
D37.01	Neoplasm of uncertain behavior of lip
D37.02	Neoplasm of uncertain behavior of tongue
D37.030	Neoplasm of uncertain behavior of the parotid salivary glands
D37.031	Neoplasm of uncertain behavior of the sublingual salivary glands
D37.032	Neoplasm of uncertain behavior of the submandibular salivary glands
D37.039	Neoplasm of uncertain behavior of the major salivary glands, unspecified
D37.04	Neoplasm of uncertain behavior of the minor salivary glands
D37.05	Neoplasm of uncertain behavior of pharynx
D37.09	Neoplasm of uncertain behavior of other specified sites of the oral cavity
D37.1	Neoplasm of uncertain behavior of stomach
D37.2	Neoplasm of uncertain behavior of small intestine
D37.3	Neoplasm of uncertain behavior of appendix
D37.4	Neoplasm of uncertain behavior of colon
D37.5	Neoplasm of uncertain behavior of rectum
D37.6	Neoplasm of uncertain behavior of liver, gallbladder and bile ducts
D37.8	Neoplasm of uncertain behavior of other specified digestive organs
D37.9	Neoplasm of uncertain behavior of digestive organ, unspecified
D38.0	Neoplasm of uncertain behavior of larynx
D38.1	Neoplasm of uncertain behavior of trachea, bronchus and lung
D38.2	Neoplasm of uncertain behavior of pleura
D38.3	Neoplasm of uncertain behavior of mediastinum
D38.4	Neoplasm of uncertain behavior of thymus
D38.5	Neoplasm of uncertain behavior of other respiratory organs

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Code	Description
D38.6	Neoplasm of uncertain behavior of respiratory organ, unspecified
D39.0	Neoplasm of uncertain behavior of uterus
D39.10	Neoplasm of uncertain behavior of unspecified ovary
D39.11	Neoplasm of uncertain behavior of right ovary
D39.12	Neoplasm of uncertain behavior of left ovary
D39.2	Neoplasm of uncertain behavior of placenta
D39.8	Neoplasm of uncertain behavior of other specified female genital organs
D39.9	Neoplasm of uncertain behavior of female genital organ, unspecified
D40.0	Neoplasm of uncertain behavior of prostate
D40.10	Neoplasm of uncertain behavior of unspecified testis
D40.11	Neoplasm of uncertain behavior of right testis
D40.12	Neoplasm of uncertain behavior of left testis
D40.8	Neoplasm of uncertain behavior of other specified male genital organs
D40.9	Neoplasm of uncertain behavior of male genital organ, unspecified
D41.00	Neoplasm of uncertain behavior of unspecified kidney
D41.01	Neoplasm of uncertain behavior of right kidney
D41.02	Neoplasm of uncertain behavior of left kidney
D41.10	Neoplasm of uncertain behavior of unspecified renal pelvis
D41.11	Neoplasm of uncertain behavior of right renal pelvis
D41.12	Neoplasm of uncertain behavior of left renal pelvis
D41.20	Neoplasm of uncertain behavior of unspecified ureter
D41.21	Neoplasm of uncertain behavior of right ureter
D41.22	Neoplasm of uncertain behavior of left ureter
D41.3	Neoplasm of uncertain behavior of urethra
D41.4	Neoplasm of uncertain behavior of bladder
D41.8	Neoplasm of uncertain behavior of other specified urinary organs
D41.9	Neoplasm of uncertain behavior of unspecified urinary organ
D42.0	Neoplasm of uncertain behavior of cerebral meninges
D42.1	Neoplasm of uncertain behavior of spinal meninges
D42.9	Neoplasm of uncertain behavior of meninges, unspecified

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Code	Description
D43.0	Neoplasm of uncertain behavior of brain, supratentorial
D43.1	Neoplasm of uncertain behavior of brain, infratentorial
D43.2	Neoplasm of uncertain behavior of brain, unspecified
D43.3	Neoplasm of uncertain behavior of cranial nerves
D43.4	Neoplasm of uncertain behavior of spinal cord
D43.8	Neoplasm of uncertain behavior of other specified parts of central nervous system
D43.9	Neoplasm of uncertain behavior of central nervous system, unspecified
D44.0	Neoplasm of uncertain behavior of thyroid gland
D44.10	Neoplasm of uncertain behavior of unspecified adrenal gland
D44.11	Neoplasm of uncertain behavior of right adrenal gland
D44.12	Neoplasm of uncertain behavior of left adrenal gland
D44.2	Neoplasm of uncertain behavior of parathyroid gland
D44.3	Neoplasm of uncertain behavior of pituitary gland
D44.4	Neoplasm of uncertain behavior of craniopharyngeal duct
D44.5	Neoplasm of uncertain behavior of pineal gland
D44.6	Neoplasm of uncertain behavior of carotid body
D44.7	Neoplasm of uncertain behavior of aortic body and other paraganglia
D44.9	Neoplasm of uncertain behavior of unspecified endocrine gland
D45	Polycythemia vera
D46.0	Refractory anemia without ring sideroblasts, so stated
D46.1	Refractory anemia with ring sideroblasts
D46.20	Refractory anemia with excess of blasts, unspecified
D46.21	Refractory anemia with excess of blasts 1
D46.22	Refractory anemia with excess of blasts 2
D46.4	Refractory anemia, unspecified
D46.9	Myelodysplastic syndrome, unspecified
D46.A	Refractory cytopenia with multilineage dysplasia
D46.B	Refractory cytopenia with multilineage dysplasia and ring sideroblasts
D46.C	Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality
D46.Z	Other myelodysplastic syndromes

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Code	Description
D47.0	Histiocytic and mast cell tumors of uncertain behavior
D47.1	Chronic myeloproliferative disease
D47.3	Essential (hemorrhagic) thrombocythemia
D47.9	Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified
D47.Z1	Post-transplant lymphoproliferative disorder (PTLD)
*D47.Z2	*Castleman disease
D47.Z9	Other specified neoplasms of uncertain behavior of lymphoid, hematopoietic and related tissue
D48.0	Neoplasm of uncertain behavior of bone and articular cartilage
D48.1	Neoplasm of uncertain behavior of connective and other soft tissue
D48.2	Neoplasm of uncertain behavior of peripheral nerves and autonomic nervous system
D48.3	Neoplasm of uncertain behavior of retroperitoneum
D48.4	Neoplasm of uncertain behavior of peritoneum
D48.5	Neoplasm of uncertain behavior of skin
D48.60	Neoplasm of uncertain behavior of unspecified breast
D48.61	Neoplasm of uncertain behavior of right breast
D48.62	Neoplasm of uncertain behavior of left breast
D48.7	Neoplasm of uncertain behavior of other specified sites
D48.9	Neoplasm of uncertain behavior, unspecified
D49.0	Neoplasm of unspecified behavior of digestive system
D57.00	Hb-SS disease with crisis, unspecified
D57.01	Hb-SS disease with acute chest syndrome
D57.02	Hb-SS disease with splenic sequestration
D57.1	Sickle-cell disease without crisis
D57.20	Sickle-cell/Hb-C disease without crisis
D57.211	Sickle-cell/Hb-C disease with acute chest syndrome
D57.212	Sickle-cell/Hb-C disease with splenic sequestration
D57.219	Sickle-cell/Hb-C disease with crisis, unspecified
D57.412	Sickle-cell thalassemia with splenic sequestration
D57.80	Other sickle-cell disorders without crisis
D57.811	Other sickle-cell disorders with acute chest syndrome

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Code	Description
D57.812	Other sickle-cell disorders with splenic sequestration
D57.819	Other sickle-cell disorders with crisis, unspecified
D65	Disseminated intravascular coagulation [defibrination syndrome]
D68.32	Hemorrhagic disorder due to extrinsic circulating anticoagulants
D68.4	Acquired coagulation factor deficiency
D73.1	Hypersplenism
D81.810	Biotinidase deficiency
D84.1	Defects in the complement system
D86.0	Sarcoidosis of lung
D86.1	Sarcoidosis of lymph nodes
D86.2	Sarcoidosis of lung with sarcoidosis of lymph nodes
D86.3	Sarcoidosis of skin
D86.81	Sarcoid meningitis
D86.82	Multiple cranial nerve palsies in sarcoidosis
D86.83	Sarcoid iridocyclitis
D86.84	Sarcoid pyelonephritis
D86.85	Sarcoid myocarditis
D86.86	Sarcoid arthropathy
D86.87	Sarcoid myositis
D86.89	Sarcoidosis of other sites
D86.9	Sarcoidosis, unspecified
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma
E10.21	Type 1 diabetes mellitus with diabetic nephropathy

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Code	Description
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E10.36	Type 1 diabetes mellitus with diabetic cataract
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy

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Code	Description
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E10.59	Type 1 diabetes mellitus with other circulatory complications
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy
E10.620	Type 1 diabetes mellitus with diabetic dermatitis
E10.621	Type 1 diabetes mellitus with foot ulcer
E10.622	Type 1 diabetes mellitus with other skin ulcer
E10.628	Type 1 diabetes mellitus with other skin complications
E10.630	Type 1 diabetes mellitus with periodontal disease
E10.638	Type 1 diabetes mellitus with other oral complications
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma
E10.65	Type 1 diabetes mellitus with hyperglycemia
E10.69	Type 1 diabetes mellitus with other specified complication
E10.8	Type 1 diabetes mellitus with unspecified complications
E10.9	Type 1 diabetes mellitus without complications
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma
E11.21	Type 2 diabetes mellitus with diabetic nephropathy
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye

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Code	Description
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral

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Code	Description
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E11.36	Type 2 diabetes mellitus with diabetic cataract
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene

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Code	Description
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene
E11.59	Type 2 diabetes mellitus with other circulatory complications
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy
E11.620	Type 2 diabetes mellitus with diabetic dermatitis
E11.621	Type 2 diabetes mellitus with foot ulcer
E11.622	Type 2 diabetes mellitus with other skin ulcer
E11.628	Type 2 diabetes mellitus with other skin complications
E11.630	Type 2 diabetes mellitus with periodontal disease
E11.638	Type 2 diabetes mellitus with other oral complications
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma
E11.65	Type 2 diabetes mellitus with hyperglycemia
E11.69	Type 2 diabetes mellitus with other specified complication
E11.8	Type 2 diabetes mellitus with unspecified complications
E11.9	Type 2 diabetes mellitus without complications
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma
E13.10	Other specified diabetes mellitus with ketoacidosis without coma
E13.11	Other specified diabetes mellitus with ketoacidosis with coma
E13.21	Other specified diabetes mellitus with diabetic nephropathy
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
E13.29	Other specified diabetes mellitus with other diabetic kidney complication
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye

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Code	Description
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye

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Code	Description
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye
*E13.3521	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
*E13.3522	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
*E13.3523	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
*E13.3529	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye
*E13.3531	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
*E13.3532	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
*E13.3533	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
*E13.3539	*Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye
*E13.3541	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye



**Medicare National Coverage Determinations (NCD)
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Code	Description
*E13.3542	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
*E13.3543	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
*E13.3549	*Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye
*E13.3551	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye
*E13.3552	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye
*E13.3553	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
*E13.3559	*Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye
E13.36	Other specified diabetes mellitus with diabetic cataract
*E13.37X1	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
*E13.37X2	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
*E13.37X3	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
*E13.37X9	*Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified



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Code	Description
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy
E13.44	Other specified diabetes mellitus with diabetic amyotrophy
E13.49	Other specified diabetes mellitus with other diabetic neurological complication
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene
E13.59	Other specified diabetes mellitus with other circulatory complications
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy
E13.618	Other specified diabetes mellitus with other diabetic arthropathy
E13.620	Other specified diabetes mellitus with diabetic dermatitis
E13.621	Other specified diabetes mellitus with foot ulcer
E13.622	Other specified diabetes mellitus with other skin ulcer
E13.628	Other specified diabetes mellitus with other skin complications
E13.630	Other specified diabetes mellitus with periodontal disease
E13.638	Other specified diabetes mellitus with other oral complications
E13.641	Other specified diabetes mellitus with hypoglycemia with coma
E13.649	Other specified diabetes mellitus with hypoglycemia without coma
E13.65	Other specified diabetes mellitus with hyperglycemia
E13.69	Other specified diabetes mellitus with other specified complication
E13.8	Other specified diabetes mellitus with unspecified complications
E13.9	Other specified diabetes mellitus without complications
E20.1	Pseudohypoparathyroidism
E21.0	Primary hyperparathyroidism
E21.1	Secondary hyperparathyroidism, not elsewhere classified
E21.2	Other hyperparathyroidism
E21.3	Hyperparathyroidism, unspecified
E44.1	Mild protein-calorie malnutrition
E46	Unspecified protein-calorie malnutrition
E55.0	Rickets, active



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Code	Description
E56.1	Deficiency of vitamin K
E64.0	Sequelae of protein-calorie malnutrition
E70.20	Disorder of tyrosine metabolism, unspecified
E70.21	Tyrosinemia
E70.29	Other disorders of tyrosine metabolism
E70.30	Albinism, unspecified
E70.310	X-linked ocular albinism
E70.311	Autosomal recessive ocular albinism
E70.318	Other ocular albinism
E70.319	Ocular albinism, unspecified
E70.320	Tyrosinase negative oculocutaneous albinism
E70.321	Tyrosinase positive oculocutaneous albinism
E70.328	Other oculocutaneous albinism
E70.329	Oculocutaneous albinism, unspecified
E70.330	Chediak-Higashi syndrome
E70.331	Hermansky-Pudlak syndrome
E70.338	Other albinism with hematologic abnormality
E70.339	Albinism with hematologic abnormality, unspecified
E70.39	Other specified albinism
E70.5	Disorders of tryptophan metabolism
E70.8	Other disorders of aromatic amino-acid metabolism
E70.9	Disorder of aromatic amino-acid metabolism, unspecified
E72.9	Disorder of amino-acid metabolism, unspecified
E74.00	Glycogen storage disease, unspecified
E74.01	von Gierke disease
E74.02	Pompe disease
E74.03	Cori disease
E74.04	McArdle disease
E74.09	Other glycogen storage disease
E74.4	Disorders of pyruvate metabolism and gluconeogenesis

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Code	Description
E75.21	Fabry (-Anderson) disease
E75.22	Gaucher disease
E75.240	Niemann-Pick disease type A
E75.241	Niemann-Pick disease type B
E75.242	Niemann-Pick disease type C
E75.243	Niemann-Pick disease type D
E75.248	Other Niemann-Pick disease
E75.249	Niemann-Pick disease, unspecified
E75.3	Sphingolipidosis, unspecified
E75.6	Lipid storage disorder, unspecified
E77.0	Defects in post-translational modification of lysosomal enzymes
E77.1	Defects in glycoprotein degradation
E77.8	Other disorders of glycoprotein metabolism
E77.9	Disorder of glycoprotein metabolism, unspecified
E78.00	Pure hypercholesterolemia, unspecified
E78.01	Familial hypercholesterolemia
E78.1	Pure hyperglyceridemia
E78.2	Mixed hyperlipidemia
E78.4	Other hyperlipidemia
E78.5	Hyperlipidemia, unspecified
E78.70	Disorder of bile acid and cholesterol metabolism, unspecified
E78.9	Disorder of lipoprotein metabolism, unspecified
E80.0	Hereditary erythropoietic porphyria
E80.1	Porphyria cutanea tarda
E80.20	Unspecified porphyria
E80.21	Acute intermittent (hepatic) porphyria
E80.29	Other porphyria
E80.4	Gilbert syndrome
E80.5	Crigler-Najjar syndrome
E80.6	Other disorders of bilirubin metabolism

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Code	Description
E80.7	Disorder of bilirubin metabolism, unspecified
E83.00	Disorder of copper metabolism, unspecified
E83.01	Wilson's disease
E83.09	Other disorders of copper metabolism
E83.10	Disorder of iron metabolism, unspecified
E83.110	Hereditary hemochromatosis
E83.111	Hemochromatosis due to repeated red blood cell transfusions
E83.118	Other hemochromatosis
E83.119	Hemochromatosis, unspecified
E83.19	Other disorders of iron metabolism
E83.30	Disorder of phosphorus metabolism, unspecified
E83.31	Familial hypophosphatemia
E83.32	Hereditary vitamin D-dependent rickets (type 1) (type 2)
E83.39	Other disorders of phosphorus metabolism
E83.40	Disorders of magnesium metabolism, unspecified
E83.41	Hypermagnesemia
E83.42	Hypomagnesemia
E83.49	Other disorders of magnesium metabolism
E83.50	Unspecified disorder of calcium metabolism
E83.51	Hypocalcemia
E83.52	Hypercalcemia
E83.59	Other disorders of calcium metabolism
E83.81	Hungry bone syndrome
E85.0	Non-neuropathic hereditary familial amyloidosis
E85.1	Neuropathic hereditary familial amyloidosis
E85.2	Hereditary familial amyloidosis, unspecified
E85.3	Secondary systemic amyloidosis
E85.4	Organ-limited amyloidosis
E85.8	Other amyloidosis
E85.9	Amyloidosis, unspecified

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**Medicare National Coverage Determinations (NCD)
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Code	Description
E88.01	Alpha-1-antitrypsin deficiency
F10.10	Alcohol abuse, uncomplicated
F10.120	Alcohol abuse with intoxication, uncomplicated
F10.121	Alcohol abuse with intoxication delirium
F10.129	Alcohol abuse with intoxication, unspecified
F10.14	Alcohol abuse with alcohol-induced mood disorder
F10.150	Alcohol abuse with alcohol-induced psychotic disorder with delusions
F10.151	Alcohol abuse with alcohol-induced psychotic disorder with hallucinations
F10.159	Alcohol abuse with alcohol-induced psychotic disorder, unspecified
F10.180	Alcohol abuse with alcohol-induced anxiety disorder
F10.181	Alcohol abuse with alcohol-induced sexual dysfunction
F10.182	Alcohol abuse with alcohol-induced sleep disorder
F10.188	Alcohol abuse with other alcohol-induced disorder
F10.19	Alcohol abuse with unspecified alcohol-induced disorder
F10.20	Alcohol dependence, uncomplicated
F10.21	Alcohol dependence, in remission
F10.220	Alcohol dependence with intoxication, uncomplicated
F10.221	Alcohol dependence with intoxication delirium
F10.229	Alcohol dependence with intoxication, unspecified
F10.230	Alcohol dependence with withdrawal, uncomplicated
F10.231	Alcohol dependence with withdrawal delirium
F10.232	Alcohol dependence with withdrawal with perceptual disturbance
F10.239	Alcohol dependence with withdrawal, unspecified
F10.24	Alcohol dependence with alcohol-induced mood disorder
F10.250	Alcohol dependence with alcohol-induced psychotic disorder with delusions
F10.251	Alcohol dependence with alcohol-induced psychotic disorder with hallucinations
F10.259	Alcohol dependence with alcohol-induced psychotic disorder, unspecified
F10.26	Alcohol dependence with alcohol-induced persisting amnestic disorder
F10.27	Alcohol dependence with alcohol-induced persisting dementia
F10.280	Alcohol dependence with alcohol-induced anxiety disorder

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**Medicare National Coverage Determinations (NCD)
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Code	Description
F10.281	Alcohol dependence with alcohol-induced sexual dysfunction
F10.282	Alcohol dependence with alcohol-induced sleep disorder
F10.288	Alcohol dependence with other alcohol-induced disorder
F10.29	Alcohol dependence with unspecified alcohol-induced disorder
F10.920	Alcohol use, unspecified with intoxication, uncomplicated
F10.921	Alcohol use, unspecified with intoxication delirium
F10.929	Alcohol use, unspecified with intoxication, unspecified
F10.94	Alcohol use, unspecified with alcohol-induced mood disorder
F10.950	Alcohol use, unspecified with alcohol-induced psychotic disorder with delusions
F10.951	Alcohol use, unspecified with alcohol-induced psychotic disorder with hallucinations
F10.959	Alcohol use, unspecified with alcohol-induced psychotic disorder, unspecified
F10.96	Alcohol use, unspecified with alcohol-induced persisting amnestic disorder
F10.97	Alcohol use, unspecified with alcohol-induced persisting dementia
F10.980	Alcohol use, unspecified with alcohol-induced anxiety disorder
F10.981	Alcohol use, unspecified with alcohol-induced sexual dysfunction
F10.982	Alcohol use, unspecified with alcohol-induced sleep disorder
F10.988	Alcohol use, unspecified with other alcohol-induced disorder
F10.99	Alcohol use, unspecified with unspecified alcohol-induced disorder
F11.10	Opioid abuse, uncomplicated
F11.120	Opioid abuse with intoxication, uncomplicated
F11.129	Opioid abuse with intoxication, unspecified
F11.20	Opioid dependence, uncomplicated
F11.21	Opioid dependence, in remission
F11.220	Opioid dependence with intoxication, uncomplicated
F11.221	Opioid dependence with intoxication delirium
F11.222	Opioid dependence with intoxication with perceptual disturbance
F11.229	Opioid dependence with intoxication, unspecified
F11.23	Opioid dependence with withdrawal
F11.24	Opioid dependence with opioid-induced mood disorder
F11.250	Opioid dependence with opioid-induced psychotic disorder with delusions

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Code	Description
F11.251	Opioid dependence with opioid-induced psychotic disorder with hallucinations
F11.259	Opioid dependence with opioid-induced psychotic disorder, unspecified
F11.281	Opioid dependence with opioid-induced sexual dysfunction
F11.282	Opioid dependence with opioid-induced sleep disorder
F11.288	Opioid dependence with other opioid-induced disorder
F11.29	Opioid dependence with unspecified opioid-induced disorder
F11.90	Opioid use, unspecified, uncomplicated
F12.10	Cannabis abuse, uncomplicated
F12.20	Cannabis dependence, uncomplicated
F12.21	Cannabis dependence, in remission
F12.220	Cannabis dependence with intoxication, uncomplicated
F12.221	Cannabis dependence with intoxication delirium
F12.222	Cannabis dependence with intoxication with perceptual disturbance
F12.229	Cannabis dependence with intoxication, unspecified
F12.250	Cannabis dependence with psychotic disorder with delusions
F12.251	Cannabis dependence with psychotic disorder with hallucinations
F12.259	Cannabis dependence with psychotic disorder, unspecified
F12.280	Cannabis dependence with cannabis-induced anxiety disorder
F12.288	Cannabis dependence with other cannabis-induced disorder
F12.29	Cannabis dependence with unspecified cannabis-induced disorder
F12.90	Cannabis use, unspecified, uncomplicated
F13.10	Sedative, hypnotic or anxiolytic abuse, uncomplicated
F13.120	Sedative, hypnotic or anxiolytic abuse with intoxication, uncomplicated
F13.20	Sedative, hypnotic or anxiolytic dependence, uncomplicated
F13.21	Sedative, hypnotic or anxiolytic dependence, in remission
F13.220	Sedative, hypnotic or anxiolytic dependence with intoxication, uncomplicated
F13.221	Sedative, hypnotic or anxiolytic dependence with intoxication delirium
F13.229	Sedative, hypnotic or anxiolytic dependence with intoxication, unspecified
F13.230	Sedative, hypnotic or anxiolytic dependence with withdrawal, uncomplicated
F13.231	Sedative, hypnotic or anxiolytic dependence with withdrawal delirium

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Code	Description
F13.232	Sedative, hypnotic or anxiolytic dependence with withdrawal with perceptual disturbance
F13.239	Sedative, hypnotic or anxiolytic dependence with withdrawal, unspecified
F13.24	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced mood disorder
F13.250	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced psychotic disorder with delusions
F13.251	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced psychotic disorder with hallucinations
F13.259	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced psychotic disorder, unspecified
F13.26	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced persisting amnesic disorder
F13.27	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced persisting dementia
F13.280	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced anxiety disorder
F13.281	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced sexual dysfunction
F13.282	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced sleep disorder
F13.288	Sedative, hypnotic or anxiolytic dependence with other sedative, hypnotic or anxiolytic-induced disorder
F13.29	Sedative, hypnotic or anxiolytic dependence with unspecified sedative, hypnotic or anxiolytic-induced disorder
F13.90	Sedative, hypnotic, or anxiolytic use, unspecified, uncomplicated
F14.10	Cocaine abuse, uncomplicated
F14.120	Cocaine abuse with intoxication, uncomplicated
F14.20	Cocaine dependence, uncomplicated
F14.21	Cocaine dependence, in remission
F14.220	Cocaine dependence with intoxication, uncomplicated
F14.221	Cocaine dependence with intoxication delirium
F14.222	Cocaine dependence with intoxication with perceptual disturbance
F14.229	Cocaine dependence with intoxication, unspecified
F14.23	Cocaine dependence with withdrawal

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Code	Description
F14.24	Cocaine dependence with cocaine-induced mood disorder
F14.250	Cocaine dependence with cocaine-induced psychotic disorder with delusions
F14.251	Cocaine dependence with cocaine-induced psychotic disorder with hallucinations
F14.259	Cocaine dependence with cocaine-induced psychotic disorder, unspecified
F14.280	Cocaine dependence with cocaine-induced anxiety disorder
F14.281	Cocaine dependence with cocaine-induced sexual dysfunction
F14.282	Cocaine dependence with cocaine-induced sleep disorder
F14.288	Cocaine dependence with other cocaine-induced disorder
F14.29	Cocaine dependence with unspecified cocaine-induced disorder
F14.90	Cocaine use, unspecified, uncomplicated
F15.10	Other stimulant abuse, uncomplicated
F15.120	Other stimulant abuse with intoxication, uncomplicated
F15.20	Other stimulant dependence, uncomplicated
F15.21	Other stimulant dependence, in remission
F15.220	Other stimulant dependence with intoxication, uncomplicated
F15.221	Other stimulant dependence with intoxication delirium
F15.222	Other stimulant dependence with intoxication with perceptual disturbance
F15.229	Other stimulant dependence with intoxication, unspecified
F15.23	Other stimulant dependence with withdrawal
F15.24	Other stimulant dependence with stimulant-induced mood disorder
F15.250	Other stimulant dependence with stimulant-induced psychotic disorder with delusions
F15.251	Other stimulant dependence with stimulant-induced psychotic disorder with hallucinations
F15.259	Other stimulant dependence with stimulant-induced psychotic disorder, unspecified
F15.280	Other stimulant dependence with stimulant-induced anxiety disorder
F15.281	Other stimulant dependence with stimulant-induced sexual dysfunction
F15.282	Other stimulant dependence with stimulant-induced sleep disorder
F15.288	Other stimulant dependence with other stimulant-induced disorder
F15.29	Other stimulant dependence with unspecified stimulant-induced disorder
F15.90	Other stimulant use, unspecified, uncomplicated
F16.10	Hallucinogen abuse, uncomplicated

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Code	Description
F16.120	Hallucinogen abuse with intoxication, uncomplicated
F16.20	Hallucinogen dependence, uncomplicated
F16.21	Hallucinogen dependence, in remission
F16.220	Hallucinogen dependence with intoxication, uncomplicated
F16.221	Hallucinogen dependence with intoxication with delirium
F16.229	Hallucinogen dependence with intoxication, unspecified
F16.24	Hallucinogen dependence with hallucinogen-induced mood disorder
F16.250	Hallucinogen dependence with hallucinogen-induced psychotic disorder with delusions
F16.251	Hallucinogen dependence with hallucinogen-induced psychotic disorder with hallucinations
F16.259	Hallucinogen dependence with hallucinogen-induced psychotic disorder, unspecified
F16.280	Hallucinogen dependence with hallucinogen-induced anxiety disorder
F16.283	Hallucinogen dependence with hallucinogen persisting perception disorder (flashbacks)
F16.288	Hallucinogen dependence with other hallucinogen-induced disorder
F16.29	Hallucinogen dependence with unspecified hallucinogen-induced disorder
F16.90	Hallucinogen use, unspecified, uncomplicated
F17.200	Nicotine dependence, unspecified, uncomplicated
F17.201	Nicotine dependence, unspecified, in remission
F17.210	Nicotine dependence, cigarettes, uncomplicated
F17.211	Nicotine dependence, cigarettes, in remission
F17.220	Nicotine dependence, chewing tobacco, uncomplicated
F17.221	Nicotine dependence, chewing tobacco, in remission
F17.290	Nicotine dependence, other tobacco product, uncomplicated
F17.291	Nicotine dependence, other tobacco product, in remission
F18.10	Inhalant abuse, uncomplicated
F18.120	Inhalant abuse with intoxication, uncomplicated
F18.20	Inhalant dependence, uncomplicated
F18.21	Inhalant dependence, in remission
F18.220	Inhalant dependence with intoxication, uncomplicated
F18.221	Inhalant dependence with intoxication delirium
F18.229	Inhalant dependence with intoxication, unspecified

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Code	Description
F18.24	Inhalant dependence with inhalant-induced mood disorder
F18.250	Inhalant dependence with inhalant-induced psychotic disorder with delusions
F18.251	Inhalant dependence with inhalant-induced psychotic disorder with hallucinations
F18.259	Inhalant dependence with inhalant-induced psychotic disorder, unspecified
F18.27	Inhalant dependence with inhalant-induced dementia
F18.280	Inhalant dependence with inhalant-induced anxiety disorder
F18.288	Inhalant dependence with other inhalant-induced disorder
F18.29	Inhalant dependence with unspecified inhalant-induced disorder
F18.90	Inhalant use, unspecified, uncomplicated
F19.10	Other psychoactive substance abuse, uncomplicated
F19.120	Other psychoactive substance abuse with intoxication, uncomplicated
F19.20	Other psychoactive substance dependence, uncomplicated
F19.21	Other psychoactive substance dependence, in remission
F19.220	Other psychoactive substance dependence with intoxication, uncomplicated
F19.221	Other psychoactive substance dependence with intoxication delirium
F19.222	Other psychoactive substance dependence with intoxication with perceptual disturbance
F19.229	Other psychoactive substance dependence with intoxication, unspecified
F19.230	Other psychoactive substance dependence with withdrawal, uncomplicated
F19.231	Other psychoactive substance dependence with withdrawal delirium
F19.232	Other psychoactive substance dependence with withdrawal with perceptual disturbance
F19.239	Other psychoactive substance dependence with withdrawal, unspecified
F19.24	Other psychoactive substance dependence with psychoactive substance-induced mood disorder
F19.250	Other psychoactive substance dependence with psychoactive substance-induced psychotic disorder with delusions
F19.251	Other psychoactive substance dependence with psychoactive substance-induced psychotic disorder with hallucinations
F19.259	Other psychoactive substance dependence with psychoactive substance-induced psychotic disorder, unspecified
F19.26	Other psychoactive substance dependence with psychoactive substance-induced persisting amnesic disorder



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Code	Description
F19.27	Other psychoactive substance dependence with psychoactive substance-induced persisting dementia
F19.280	Other psychoactive substance dependence with psychoactive substance-induced anxiety disorder
F19.281	Other psychoactive substance dependence with psychoactive substance-induced sexual dysfunction
F19.282	Other psychoactive substance dependence with psychoactive substance-induced sleep disorder
F19.288	Other psychoactive substance dependence with other psychoactive substance-induced disorder
F19.29	Other psychoactive substance dependence with unspecified psychoactive substance-induced disorder
F19.90	Other psychoactive substance use, unspecified, uncomplicated
F55.0	Abuse of antacids
F55.1	Abuse of herbal or folk remedies
F55.2	Abuse of laxatives
F55.3	Abuse of steroids or hormones
F55.4	Abuse of vitamins
F55.8	Abuse of other non-psychoactive substances
G62.1	Alcoholic polyneuropathy
G71.11	Myotonic muscular dystrophy
G71.12	Myotonia congenita
G71.13	Myotonic chondrodystrophy
G71.14	Drug induced myotonia
G71.19	Other specified myotonic disorders
I81	Portal vein thrombosis
I82.0	Budd-Chiari syndrome
I82.1	Thrombophlebitis migrans
I82.210	Acute embolism and thrombosis of superior vena cava
I82.211	Chronic embolism and thrombosis of superior vena cava
I82.220	Acute embolism and thrombosis of inferior vena cava
I82.221	Chronic embolism and thrombosis of inferior vena cava

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Code	Description
I82.290	Acute embolism and thrombosis of other thoracic veins
I82.291	Chronic embolism and thrombosis of other thoracic veins
I82.3	Embolism and thrombosis of renal vein
I82.401	Acute embolism and thrombosis of unspecified deep veins of right lower extremity
I82.402	Acute embolism and thrombosis of unspecified deep veins of left lower extremity
I82.403	Acute embolism and thrombosis of unspecified deep veins of lower extremity, bilateral
I82.409	Acute embolism and thrombosis of unspecified deep veins of unspecified lower extremity
I82.411	Acute embolism and thrombosis of right femoral vein
I82.412	Acute embolism and thrombosis of left femoral vein
I82.413	Acute embolism and thrombosis of femoral vein, bilateral
I82.419	Acute embolism and thrombosis of unspecified femoral vein
I82.421	Acute embolism and thrombosis of right iliac vein
I82.422	Acute embolism and thrombosis of left iliac vein
I82.423	Acute embolism and thrombosis of iliac vein, bilateral
I82.429	Acute embolism and thrombosis of unspecified iliac vein
I82.431	Acute embolism and thrombosis of right popliteal vein
I82.432	Acute embolism and thrombosis of left popliteal vein
I82.433	Acute embolism and thrombosis of popliteal vein, bilateral
I82.439	Acute embolism and thrombosis of unspecified popliteal vein
I82.441	Acute embolism and thrombosis of right tibial vein
I82.442	Acute embolism and thrombosis of left tibial vein
I82.443	Acute embolism and thrombosis of tibial vein, bilateral
I82.449	Acute embolism and thrombosis of unspecified tibial vein
I82.491	Acute embolism and thrombosis of other specified deep vein of right lower extremity
I82.492	Acute embolism and thrombosis of other specified deep vein of left lower extremity
I82.493	Acute embolism and thrombosis of other specified deep vein of lower extremity, bilateral
I82.499	Acute embolism and thrombosis of other specified deep vein of unspecified lower extremity
I82.4Y1	Acute embolism and thrombosis of unspecified deep veins of right proximal lower extremity
I82.4Y2	Acute embolism and thrombosis of unspecified deep veins of left proximal lower extremity
I82.4Y3	Acute embolism and thrombosis of unspecified deep veins of proximal lower extremity, bilateral

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Code	Description
I82.4Y9	Acute embolism and thrombosis of unspecified deep veins of unspecified proximal lower extremity
I82.4Z1	Acute embolism and thrombosis of unspecified deep veins of right distal lower extremity
I82.4Z2	Acute embolism and thrombosis of unspecified deep veins of left distal lower extremity
I82.4Z3	Acute embolism and thrombosis of unspecified deep veins of distal lower extremity, bilateral
I82.4Z9	Acute embolism and thrombosis of unspecified deep veins of unspecified distal lower extremity
I82.501	Chronic embolism and thrombosis of unspecified deep veins of right lower extremity
I82.502	Chronic embolism and thrombosis of unspecified deep veins of left lower extremity
I82.503	Chronic embolism and thrombosis of unspecified deep veins of lower extremity, bilateral
I82.509	Chronic embolism and thrombosis of unspecified deep veins of unspecified lower extremity
I82.511	Chronic embolism and thrombosis of right femoral vein
I82.512	Chronic embolism and thrombosis of left femoral vein
I82.513	Chronic embolism and thrombosis of femoral vein, bilateral
I82.519	Chronic embolism and thrombosis of unspecified femoral vein
I82.521	Chronic embolism and thrombosis of right iliac vein
I82.522	Chronic embolism and thrombosis of left iliac vein
I82.523	Chronic embolism and thrombosis of iliac vein, bilateral
I82.529	Chronic embolism and thrombosis of unspecified iliac vein
I82.531	Chronic embolism and thrombosis of right popliteal vein
I82.532	Chronic embolism and thrombosis of left popliteal vein
I82.533	Chronic embolism and thrombosis of popliteal vein, bilateral
I82.539	Chronic embolism and thrombosis of unspecified popliteal vein
I82.541	Chronic embolism and thrombosis of right tibial vein
I82.542	Chronic embolism and thrombosis of left tibial vein
I82.543	Chronic embolism and thrombosis of tibial vein, bilateral
I82.549	Chronic embolism and thrombosis of unspecified tibial vein
I82.591	Chronic embolism and thrombosis of other specified deep vein of right lower extremity
I82.592	Chronic embolism and thrombosis of other specified deep vein of left lower extremity
I82.593	Chronic embolism and thrombosis of other specified deep vein of lower extremity, bilateral

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Code	Description
I82.599	Chronic embolism and thrombosis of other specified deep vein of unspecified lower extremity
I82.5Y1	Chronic embolism and thrombosis of unspecified deep veins of right proximal lower extremity
I82.5Y2	Chronic embolism and thrombosis of unspecified deep veins of left proximal lower extremity
I82.5Y3	Chronic embolism and thrombosis of unspecified deep veins of proximal lower extremity, bilateral
I82.5Y9	Chronic embolism and thrombosis of unspecified deep veins of unspecified proximal lower extremity
I82.5Z1	Chronic embolism and thrombosis of unspecified deep veins of right distal lower extremity
I82.5Z2	Chronic embolism and thrombosis of unspecified deep veins of left distal lower extremity
I82.5Z3	Chronic embolism and thrombosis of unspecified deep veins of distal lower extremity, bilateral
I82.5Z9	Chronic embolism and thrombosis of unspecified deep veins of unspecified distal lower extremity
I82.601	Acute embolism and thrombosis of unspecified veins of right upper extremity
I82.602	Acute embolism and thrombosis of unspecified veins of left upper extremity
I82.603	Acute embolism and thrombosis of unspecified veins of upper extremity, bilateral
I82.609	Acute embolism and thrombosis of unspecified veins of unspecified upper extremity
I82.611	Acute embolism and thrombosis of superficial veins of right upper extremity
I82.612	Acute embolism and thrombosis of superficial veins of left upper extremity
I82.613	Acute embolism and thrombosis of superficial veins of upper extremity, bilateral
I82.619	Acute embolism and thrombosis of superficial veins of unspecified upper extremity
I82.621	Acute embolism and thrombosis of deep veins of right upper extremity
I82.622	Acute embolism and thrombosis of deep veins of left upper extremity
I82.623	Acute embolism and thrombosis of deep veins of upper extremity, bilateral
I82.629	Acute embolism and thrombosis of deep veins of unspecified upper extremity
I82.701	Chronic embolism and thrombosis of unspecified veins of right upper extremity
I82.702	Chronic embolism and thrombosis of unspecified veins of left upper extremity
I82.703	Chronic embolism and thrombosis of unspecified veins of upper extremity, bilateral
I82.709	Chronic embolism and thrombosis of unspecified veins of unspecified upper extremity
I82.711	Chronic embolism and thrombosis of superficial veins of right upper extremity

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Code	Description
I82.712	Chronic embolism and thrombosis of superficial veins of left upper extremity
I82.713	Chronic embolism and thrombosis of superficial veins of upper extremity, bilateral
I82.719	Chronic embolism and thrombosis of superficial veins of unspecified upper extremity
I82.721	Chronic embolism and thrombosis of deep veins of right upper extremity
I82.722	Chronic embolism and thrombosis of deep veins of left upper extremity
I82.723	Chronic embolism and thrombosis of deep veins of upper extremity, bilateral
I82.729	Chronic embolism and thrombosis of deep veins of unspecified upper extremity
I82.811	Embolism and thrombosis of superficial veins of right lower extremities
I82.812	Embolism and thrombosis of superficial veins of left lower extremities
I82.813	Embolism and thrombosis of superficial veins of lower extremities, bilateral
I82.819	Embolism and thrombosis of superficial veins of unspecified lower extremities
I82.890	Acute embolism and thrombosis of other specified veins
I82.891	Chronic embolism and thrombosis of other specified veins
I82.90	Acute embolism and thrombosis of unspecified vein
I82.91	Chronic embolism and thrombosis of unspecified vein
I82.A11	Acute embolism and thrombosis of right axillary vein
I82.A12	Acute embolism and thrombosis of left axillary vein
I82.A13	Acute embolism and thrombosis of axillary vein, bilateral
I82.A19	Acute embolism and thrombosis of unspecified axillary vein
I82.A21	Chronic embolism and thrombosis of right axillary vein
I82.A22	Chronic embolism and thrombosis of left axillary vein
I82.A23	Chronic embolism and thrombosis of axillary vein, bilateral
I82.A29	Chronic embolism and thrombosis of unspecified axillary vein
I82.B11	Acute embolism and thrombosis of right subclavian vein
I82.B12	Acute embolism and thrombosis of left subclavian vein
I82.B13	Acute embolism and thrombosis of subclavian vein, bilateral
I82.B19	Acute embolism and thrombosis of unspecified subclavian vein
I82.B21	Chronic embolism and thrombosis of right subclavian vein
I82.B22	Chronic embolism and thrombosis of left subclavian vein
I82.B23	Chronic embolism and thrombosis of subclavian vein, bilateral



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Code	Description
I82.B29	Chronic embolism and thrombosis of unspecified subclavian vein
I82.C11	Acute embolism and thrombosis of right internal jugular vein
I82.C12	Acute embolism and thrombosis of left internal jugular vein
I82.C13	Acute embolism and thrombosis of internal jugular vein, bilateral
I82.C19	Acute embolism and thrombosis of unspecified internal jugular vein
I82.C21	Chronic embolism and thrombosis of right internal jugular vein
I82.C22	Chronic embolism and thrombosis of left internal jugular vein
I82.C23	Chronic embolism and thrombosis of internal jugular vein, bilateral
I82.C29	Chronic embolism and thrombosis of unspecified internal jugular vein
I85.00	Esophageal varices without bleeding
I85.01	Esophageal varices with bleeding
I85.10	Secondary esophageal varices without bleeding
I85.11	Secondary esophageal varices with bleeding
J17	Pneumonia in diseases classified elsewhere
K50.00	Crohn's disease of small intestine without complications
K50.011	Crohn's disease of small intestine with rectal bleeding
K50.012	Crohn's disease of small intestine with intestinal obstruction
K50.013	Crohn's disease of small intestine with fistula
K50.014	Crohn's disease of small intestine with abscess
K50.018	Crohn's disease of small intestine with other complication
K50.019	Crohn's disease of small intestine with unspecified complications
K50.10	Crohn's disease of large intestine without complications
K50.111	Crohn's disease of large intestine with rectal bleeding
K50.112	Crohn's disease of large intestine with intestinal obstruction
K50.113	Crohn's disease of large intestine with fistula
K50.114	Crohn's disease of large intestine with abscess
K50.118	Crohn's disease of large intestine with other complication
K50.119	Crohn's disease of large intestine with unspecified complications
K50.80	Crohn's disease of both small and large intestine without complications
K50.811	Crohn's disease of both small and large intestine with rectal bleeding

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Code	Description
K50.812	Crohn's disease of both small and large intestine with intestinal obstruction
K50.813	Crohn's disease of both small and large intestine with fistula
K50.814	Crohn's disease of both small and large intestine with abscess
K50.818	Crohn's disease of both small and large intestine with other complication
K50.819	Crohn's disease of both small and large intestine with unspecified complications
K50.90	Crohn's disease, unspecified, without complications
K50.911	Crohn's disease, unspecified, with rectal bleeding
K50.912	Crohn's disease, unspecified, with intestinal obstruction
K50.913	Crohn's disease, unspecified, with fistula
K50.914	Crohn's disease, unspecified, with abscess
K50.918	Crohn's disease, unspecified, with other complication
K50.919	Crohn's disease, unspecified, with unspecified complications
K51.00	Ulcerative (chronic) pancolitis without complications
K51.011	Ulcerative (chronic) pancolitis with rectal bleeding
K51.012	Ulcerative (chronic) pancolitis with intestinal obstruction
K51.013	Ulcerative (chronic) pancolitis with fistula
K51.014	Ulcerative (chronic) pancolitis with abscess
K51.018	Ulcerative (chronic) pancolitis with other complication
K51.019	Ulcerative (chronic) pancolitis with unspecified complications
K51.20	Ulcerative (chronic) proctitis without complications
K51.211	Ulcerative (chronic) proctitis with rectal bleeding
K51.212	Ulcerative (chronic) proctitis with intestinal obstruction
K51.213	Ulcerative (chronic) proctitis with fistula
K51.214	Ulcerative (chronic) proctitis with abscess
K51.218	Ulcerative (chronic) proctitis with other complication
K51.219	Ulcerative (chronic) proctitis with unspecified complications
K51.30	Ulcerative (chronic) rectosigmoiditis without complications
K51.311	Ulcerative (chronic) rectosigmoiditis with rectal bleeding
K51.312	Ulcerative (chronic) rectosigmoiditis with intestinal obstruction
K51.313	Ulcerative (chronic) rectosigmoiditis with fistula

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Code	Description
K51.314	Ulcerative (chronic) rectosigmoiditis with abscess
K51.318	Ulcerative (chronic) rectosigmoiditis with other complication
K51.319	Ulcerative (chronic) rectosigmoiditis with unspecified complications
K51.40	Inflammatory polyps of colon without complications
K51.411	Inflammatory polyps of colon with rectal bleeding
K51.412	Inflammatory polyps of colon with intestinal obstruction
K51.413	Inflammatory polyps of colon with fistula
K51.414	Inflammatory polyps of colon with abscess
K51.418	Inflammatory polyps of colon with other complication
K51.419	Inflammatory polyps of colon with unspecified complications
K51.50	Left sided colitis without complications
K51.511	Left sided colitis with rectal bleeding
K51.512	Left sided colitis with intestinal obstruction
K51.513	Left sided colitis with fistula
K51.514	Left sided colitis with abscess
K51.518	Left sided colitis with other complication
K51.519	Left sided colitis with unspecified complications
K51.80	Other ulcerative colitis without complications
K51.811	Other ulcerative colitis with rectal bleeding
K51.812	Other ulcerative colitis with intestinal obstruction
K51.813	Other ulcerative colitis with fistula
K51.814	Other ulcerative colitis with abscess
K51.818	Other ulcerative colitis with other complication
K51.819	Other ulcerative colitis with unspecified complications
K51.90	Ulcerative colitis, unspecified, without complications
K51.911	Ulcerative colitis, unspecified with rectal bleeding
K51.912	Ulcerative colitis, unspecified with intestinal obstruction
K51.913	Ulcerative colitis, unspecified with fistula
K51.914	Ulcerative colitis, unspecified with abscess
K51.918	Ulcerative colitis, unspecified with other complication

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Code	Description
K51.919	Ulcerative colitis, unspecified with unspecified complications
K52.0	Gastroenteritis and colitis due to radiation
K52.1	Toxic gastroenteritis and colitis
K52.21	Food protein-induced enterocolitis syndrome
K52.22	Food protein-induced enteropathy
K52.29	Other allergic and dietetic gastroenteritis and colitis
*K52.3	*Indeterminate colitis
K52.81	Eosinophilic gastritis or gastroenteritis
K52.82	Eosinophilic colitis
*K52.831	*Collagenous colitis
*K52.832	*Lymphocytic colitis
*K52.838	*Other microscopic colitis
*K52.839	*Microscopic colitis, unspecified
K52.89	Other specified noninfective gastroenteritis and colitis
K52.9	Noninfective gastroenteritis and colitis, unspecified
K55.011	Focal (segmental) acute (reversible) ischemia of small intestine
K55.012	Diffuse acute (reversible) ischemia of small intestine
K55.019	Acute (reversible) ischemia of small intestine, extent unspecified
K55.021	Focal (segmental) acute infarction of small intestine
K55.022	Diffuse acute infarction of small intestine
K55.029	Acute infarction of small intestine, extent unspecified
K55.031	Focal (segmental) acute (reversible) ischemia of large intestine
K55.032	Diffuse acute (reversible) ischemia of large intestine
K55.039	Acute (reversible) ischemia of large intestine, extent unspecified
K55.041	Focal (segmental) acute infarction of large intestine
K55.042	Diffuse acute infarction of large intestine
K55.049	Acute infarction of large intestine, extent unspecified
K55.051	Focal (segmental) acute (reversible) ischemia of intestine, part unspecified
K55.052	Diffuse acute (reversible) ischemia of intestine, part unspecified
K55.059	Acute (reversible) ischemia of intestine, part and extent unspecified

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Code	Description
K55.061	Focal (segmental) acute infarction of intestine, part unspecified
K55.062	Diffuse acute infarction of intestine, part unspecified
K55.069	Acute infarction of intestine, part and extent unspecified
*K55.30	*Necrotizing enterocolitis, unspecified
*K55.31	*Stage 1 necrotizing enterocolitis
*K55.32	*Stage 2 necrotizing enterocolitis
*K55.33	*Stage 3 necrotizing enterocolitis
K56.0	Paralytic ileus
K56.1	Intussusception
K56.2	Volvulus
K56.3	Gallstone ileus
K56.41	Fecal impaction
K56.49	Other impaction of intestine
K56.5	Intestinal adhesions [bands] with obstruction (postprocedural) (postinfection)
K56.60	Unspecified intestinal obstruction
K56.69	Other intestinal obstruction
K56.7	Ileus, unspecified
K57.00	Diverticulitis of small intestine with perforation and abscess without bleeding
K57.01	Diverticulitis of small intestine with perforation and abscess with bleeding
K57.12	Diverticulitis of small intestine without perforation or abscess without bleeding
K57.13	Diverticulitis of small intestine without perforation or abscess with bleeding
K57.20	Diverticulitis of large intestine with perforation and abscess without bleeding
K57.21	Diverticulitis of large intestine with perforation and abscess with bleeding
K57.32	Diverticulitis of large intestine without perforation or abscess without bleeding
K57.33	Diverticulitis of large intestine without perforation or abscess with bleeding
K57.40	Diverticulitis of both small and large intestine with perforation and abscess without bleeding
K57.41	Diverticulitis of both small and large intestine with perforation and abscess with bleeding
K57.52	Diverticulitis of both small and large intestine without perforation or abscess without bleeding
K57.53	Diverticulitis of both small and large intestine without perforation or abscess with bleeding

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Code	Description
K57.80	Diverticulitis of intestine, part unspecified, with perforation and abscess without bleeding
K57.81	Diverticulitis of intestine, part unspecified, with perforation and abscess with bleeding
K57.92	Diverticulitis of intestine, part unspecified, without perforation or abscess without bleeding
K57.93	Diverticulitis of intestine, part unspecified, without perforation or abscess with bleeding
*K59.31	*Toxic megacolon
K63.1	Perforation of intestine (nontraumatic)
K65.0	Generalized (acute) peritonitis
K65.1	Peritoneal abscess
K65.2	Spontaneous bacterial peritonitis
K65.3	Choleperitonitis
K65.4	Sclerosing mesenteritis
K65.8	Other peritonitis
K65.9	Peritonitis, unspecified
K67	Disorders of peritoneum in infectious diseases classified elsewhere
K68.19	Other retroperitoneal abscess
K68.9	Other disorders of retroperitoneum
K70.0	Alcoholic fatty liver
K70.10	Alcoholic hepatitis without ascites
K70.11	Alcoholic hepatitis with ascites
K70.2	Alcoholic fibrosis and sclerosis of liver
K70.30	Alcoholic cirrhosis of liver without ascites
K70.31	Alcoholic cirrhosis of liver with ascites
K70.40	Alcoholic hepatic failure without coma
K70.41	Alcoholic hepatic failure with coma
K70.9	Alcoholic liver disease, unspecified
K71.0	Toxic liver disease with cholestasis
K71.10	Toxic liver disease with hepatic necrosis, without coma
K71.11	Toxic liver disease with hepatic necrosis, with coma
K71.2	Toxic liver disease with acute hepatitis
K71.3	Toxic liver disease with chronic persistent hepatitis

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Code	Description
K71.4	Toxic liver disease with chronic lobular hepatitis
K71.50	Toxic liver disease with chronic active hepatitis without ascites
K71.51	Toxic liver disease with chronic active hepatitis with ascites
K71.6	Toxic liver disease with hepatitis, not elsewhere classified
K71.7	Toxic liver disease with fibrosis and cirrhosis of liver
K71.8	Toxic liver disease with other disorders of liver
K71.9	Toxic liver disease, unspecified
K72.00	Acute and subacute hepatic failure without coma
K72.01	Acute and subacute hepatic failure with coma
K72.10	Chronic hepatic failure without coma
K72.11	Chronic hepatic failure with coma
K72.90	Hepatic failure, unspecified without coma
K72.91	Hepatic failure, unspecified with coma
K73.0	Chronic persistent hepatitis, not elsewhere classified
K73.1	Chronic lobular hepatitis, not elsewhere classified
K73.2	Chronic active hepatitis, not elsewhere classified
K73.8	Other chronic hepatitis, not elsewhere classified
K73.9	Chronic hepatitis, unspecified
K74.0	Hepatic fibrosis
K74.1	Hepatic sclerosis
K74.2	Hepatic fibrosis with hepatic sclerosis
K74.3	Primary biliary cirrhosis
K74.4	Secondary biliary cirrhosis
K74.5	Biliary cirrhosis, unspecified
K74.60	Unspecified cirrhosis of liver
K74.69	Other cirrhosis of liver
K75.0	Abscess of liver
K75.1	Phlebitis of portal vein
K75.2	Nonspecific reactive hepatitis
K75.3	Granulomatous hepatitis, not elsewhere classified

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Code	Description
K75.4	Autoimmune hepatitis
K75.81	Nonalcoholic steatohepatitis (NASH)
K75.89	Other specified inflammatory liver diseases
K75.9	Inflammatory liver disease, unspecified
K76.0	Fatty (change of) liver, not elsewhere classified
K76.1	Chronic passive congestion of liver
K76.2	Central hemorrhagic necrosis of liver
K76.3	Infarction of liver
K76.4	Peliosis hepatis
K76.5	Hepatic veno-occlusive disease
K76.6	Portal hypertension
K76.7	Hepatorenal syndrome
K76.81	Hepatopulmonary syndrome
K76.89	Other specified diseases of liver
K76.9	Liver disease, unspecified
K77	Liver disorders in diseases classified elsewhere
K80.00	Calculus of gallbladder with acute cholecystitis without obstruction
K80.01	Calculus of gallbladder with acute cholecystitis with obstruction
K80.10	Calculus of gallbladder with chronic cholecystitis without obstruction
K80.11	Calculus of gallbladder with chronic cholecystitis with obstruction
K80.12	Calculus of gallbladder with acute and chronic cholecystitis without obstruction
K80.13	Calculus of gallbladder with acute and chronic cholecystitis with obstruction
K80.18	Calculus of gallbladder with other cholecystitis without obstruction
K80.19	Calculus of gallbladder with other cholecystitis with obstruction
K80.20	Calculus of gallbladder without cholecystitis without obstruction
K80.21	Calculus of gallbladder without cholecystitis with obstruction
K80.30	Calculus of bile duct with cholangitis, unspecified, without obstruction
K80.31	Calculus of bile duct with cholangitis, unspecified, with obstruction
K80.32	Calculus of bile duct with acute cholangitis without obstruction
K80.33	Calculus of bile duct with acute cholangitis with obstruction

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Code	Description
K80.34	Calculus of bile duct with chronic cholangitis without obstruction
K80.35	Calculus of bile duct with chronic cholangitis with obstruction
K80.36	Calculus of bile duct with acute and chronic cholangitis without obstruction
K80.37	Calculus of bile duct with acute and chronic cholangitis with obstruction
K80.40	Calculus of bile duct with cholecystitis, unspecified, without obstruction
K80.41	Calculus of bile duct with cholecystitis, unspecified, with obstruction
K80.42	Calculus of bile duct with acute cholecystitis without obstruction
K80.43	Calculus of bile duct with acute cholecystitis with obstruction
K80.44	Calculus of bile duct with chronic cholecystitis without obstruction
K80.45	Calculus of bile duct with chronic cholecystitis with obstruction
K80.46	Calculus of bile duct with acute and chronic cholecystitis without obstruction
K80.47	Calculus of bile duct with acute and chronic cholecystitis with obstruction
K80.50	Calculus of bile duct without cholangitis or cholecystitis without obstruction
K80.51	Calculus of bile duct without cholangitis or cholecystitis with obstruction
K80.60	Calculus of gallbladder and bile duct with cholecystitis, unspecified, without obstruction
K80.61	Calculus of gallbladder and bile duct with cholecystitis, unspecified, with obstruction
K80.62	Calculus of gallbladder and bile duct with acute cholecystitis without obstruction
K80.63	Calculus of gallbladder and bile duct with acute cholecystitis with obstruction
K80.64	Calculus of gallbladder and bile duct with chronic cholecystitis without obstruction
K80.65	Calculus of gallbladder and bile duct with chronic cholecystitis with obstruction
K80.66	Calculus of gallbladder and bile duct with acute and chronic cholecystitis without obstruction
K80.67	Calculus of gallbladder and bile duct with acute and chronic cholecystitis with obstruction
K80.70	Calculus of gallbladder and bile duct without cholecystitis without obstruction
K80.71	Calculus of gallbladder and bile duct without cholecystitis with obstruction
K80.80	Other cholelithiasis without obstruction
K80.81	Other cholelithiasis with obstruction
K81.0	Acute cholecystitis
K81.1	Chronic cholecystitis
K81.2	Acute cholecystitis with chronic cholecystitis
K81.9	Cholecystitis, unspecified

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Code	Description
K82.0	Obstruction of gallbladder
K82.1	Hydrops of gallbladder
K82.2	Perforation of gallbladder
K82.3	Fistula of gallbladder
K82.4	Cholesterolosis of gallbladder
K82.8	Other specified diseases of gallbladder
K82.9	Disease of gallbladder, unspecified
K83.0	Cholangitis
K83.1	Obstruction of bile duct
K83.2	Perforation of bile duct
K83.3	Fistula of bile duct
K83.4	Spasm of sphincter of Oddi
K83.5	Biliary cyst
K83.8	Other specified diseases of biliary tract
K83.9	Disease of biliary tract, unspecified
K87	Disorders of gallbladder, biliary tract and pancreas in diseases classified elsewhere
K91.5	Postcholecystectomy syndrome
*M04.1	*Periodic fever syndromes
M1A.10X0	Lead-induced chronic gout, unspecified site, without tophus (tophi)
M1A.10X1	Lead-induced chronic gout, unspecified site, with tophus (tophi)
M1A.1110	Lead-induced chronic gout, right shoulder, without tophus (tophi)
M1A.1111	Lead-induced chronic gout, right shoulder, with tophus (tophi)
M1A.1120	Lead-induced chronic gout, left shoulder, without tophus (tophi)
M1A.1121	Lead-induced chronic gout, left shoulder, with tophus (tophi)
M1A.1190	Lead-induced chronic gout, unspecified shoulder, without tophus (tophi)
M1A.1191	Lead-induced chronic gout, unspecified shoulder, with tophus (tophi)
M1A.1210	Lead-induced chronic gout, right elbow, without tophus (tophi)
M1A.1211	Lead-induced chronic gout, right elbow, with tophus (tophi)
M1A.1220	Lead-induced chronic gout, left elbow, without tophus (tophi)
M1A.1221	Lead-induced chronic gout, left elbow, with tophus (tophi)



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M1A.1290	Lead-induced chronic gout, unspecified elbow, without tophus (tophi)
M1A.1291	Lead-induced chronic gout, unspecified elbow, with tophus (tophi)
M1A.1310	Lead-induced chronic gout, right wrist, without tophus (tophi)
M1A.1311	Lead-induced chronic gout, right wrist, with tophus (tophi)
M1A.1320	Lead-induced chronic gout, left wrist, without tophus (tophi)
M1A.1321	Lead-induced chronic gout, left wrist, with tophus (tophi)
M1A.1390	Lead-induced chronic gout, unspecified wrist, without tophus (tophi)
M1A.1391	Lead-induced chronic gout, unspecified wrist, with tophus (tophi)
M1A.1410	Lead-induced chronic gout, right hand, without tophus (tophi)
M1A.1411	Lead-induced chronic gout, right hand, with tophus (tophi)
M1A.1420	Lead-induced chronic gout, left hand, without tophus (tophi)
M1A.1421	Lead-induced chronic gout, left hand, with tophus (tophi)
M1A.1490	Lead-induced chronic gout, unspecified hand, without tophus (tophi)
M1A.1491	Lead-induced chronic gout, unspecified hand, with tophus (tophi)
M1A.1510	Lead-induced chronic gout, right hip, without tophus (tophi)
M1A.1511	Lead-induced chronic gout, right hip, with tophus (tophi)
M1A.1520	Lead-induced chronic gout, left hip, without tophus (tophi)
M1A.1521	Lead-induced chronic gout, left hip, with tophus (tophi)
M1A.1590	Lead-induced chronic gout, unspecified hip, without tophus (tophi)
M1A.1591	Lead-induced chronic gout, unspecified hip, with tophus (tophi)
M1A.1610	Lead-induced chronic gout, right knee, without tophus (tophi)
M1A.1611	Lead-induced chronic gout, right knee, with tophus (tophi)
M1A.1620	Lead-induced chronic gout, left knee, without tophus (tophi)
M1A.1621	Lead-induced chronic gout, left knee, with tophus (tophi)
M1A.1690	Lead-induced chronic gout, unspecified knee, without tophus (tophi)
M1A.1691	Lead-induced chronic gout, unspecified knee, with tophus (tophi)
M1A.1710	Lead-induced chronic gout, right ankle and foot, without tophus (tophi)
M1A.1711	Lead-induced chronic gout, right ankle and foot, with tophus (tophi)
M1A.1720	Lead-induced chronic gout, left ankle and foot, without tophus (tophi)
M1A.1721	Lead-induced chronic gout, left ankle and foot, with tophus (tophi)

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Code	Description
M1A.1790	Lead-induced chronic gout, unspecified ankle and foot, without tophus (tophi)
M1A.1791	Lead-induced chronic gout, unspecified ankle and foot, with tophus (tophi)
M1A.18X0	Lead-induced chronic gout, vertebrae, without tophus (tophi)
M1A.18X1	Lead-induced chronic gout, vertebrae, with tophus (tophi)
M1A.19X0	Lead-induced chronic gout, multiple sites, without tophus (tophi)
M1A.19X1	Lead-induced chronic gout, multiple sites, with tophus (tophi)
M32.14	Glomerular disease in systemic lupus erythematosus
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus
M35.04	Sicca syndrome with tubulo-interstitial nephropathy
M83.0	Puerperal osteomalacia
M83.1	Senile osteomalacia
M83.2	Adult osteomalacia due to malabsorption
M83.3	Adult osteomalacia due to malnutrition
M83.4	Aluminum bone disease
M83.5	Other drug-induced osteomalacia in adults
M83.8	Other adult osteomalacia
M83.9	Adult osteomalacia, unspecified
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis
N02.6	Recurrent and persistent hematuria with dense deposit disease
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis
N02.8	Recurrent and persistent hematuria with other morphologic changes
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes
N03.0	Chronic nephritic syndrome with minor glomerular abnormality
N03.1	Chronic nephritic syndrome with focal and segmental glomerular lesions
N03.2	Chronic nephritic syndrome with diffuse membranous glomerulonephritis

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Code	Description
N03.3	Chronic nephritic syndrome with diffuse mesangial proliferative glomerulonephritis
N03.4	Chronic nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis
N03.5	Chronic nephritic syndrome with diffuse mesangiocapillary glomerulonephritis
N03.6	Chronic nephritic syndrome with dense deposit disease
N03.7	Chronic nephritic syndrome with diffuse crescentic glomerulonephritis
N03.8	Chronic nephritic syndrome with other morphologic changes
N03.9	Chronic nephritic syndrome with unspecified morphologic changes
N04.0	Nephrotic syndrome with minor glomerular abnormality
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis
N04.6	Nephrotic syndrome with dense deposit disease
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis
N04.8	Nephrotic syndrome with other morphologic changes
N04.9	Nephrotic syndrome with unspecified morphologic changes
N05.0	Unspecified nephritic syndrome with minor glomerular abnormality
N05.1	Unspecified nephritic syndrome with focal and segmental glomerular lesions
N05.2	Unspecified nephritic syndrome with diffuse membranous glomerulonephritis
N05.3	Unspecified nephritic syndrome with diffuse mesangial proliferative glomerulonephritis
N05.4	Unspecified nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis
N05.5	Unspecified nephritic syndrome with diffuse mesangiocapillary glomerulonephritis
N05.6	Unspecified nephritic syndrome with dense deposit disease
N05.7	Unspecified nephritic syndrome with diffuse crescentic glomerulonephritis
N05.8	Unspecified nephritic syndrome with other morphologic changes
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes
N06.0	Isolated proteinuria with minor glomerular abnormality
N06.1	Isolated proteinuria with focal and segmental glomerular lesions
N06.2	Isolated proteinuria with diffuse membranous glomerulonephritis



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N06.3	Isolated proteinuria with diffuse mesangial proliferative glomerulonephritis
N06.4	Isolated proteinuria with diffuse endocapillary proliferative glomerulonephritis
N06.5	Isolated proteinuria with diffuse mesangiocapillary glomerulonephritis
N06.6	Isolated proteinuria with dense deposit disease
N06.7	Isolated proteinuria with diffuse crescentic glomerulonephritis
N06.8	Isolated proteinuria with other morphologic lesion
N06.9	Isolated proteinuria with unspecified morphologic lesion
N07.0	Hereditary nephropathy, not elsewhere classified with minor glomerular abnormality
N07.1	Hereditary nephropathy, not elsewhere classified with focal and segmental glomerular lesions
N07.2	Hereditary nephropathy, not elsewhere classified with diffuse membranous glomerulonephritis
N07.3	Hereditary nephropathy, not elsewhere classified with diffuse mesangial proliferative glomerulonephritis
N07.4	Hereditary nephropathy, not elsewhere classified with diffuse endocapillary proliferative glomerulonephritis
N07.5	Hereditary nephropathy, not elsewhere classified with diffuse mesangiocapillary glomerulonephritis
N07.6	Hereditary nephropathy, not elsewhere classified with dense deposit disease
N07.7	Hereditary nephropathy, not elsewhere classified with diffuse crescentic glomerulonephritis
N07.8	Hereditary nephropathy, not elsewhere classified with other morphologic lesions
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions
N08	Glomerular disorders in diseases classified elsewhere
N10	Acute pyelonephritis
N11.0	Nonobstructive reflux-associated chronic pyelonephritis
N11.1	Chronic obstructive pyelonephritis
N11.8	Other chronic tubulo-interstitial nephritis
N11.9	Chronic tubulo-interstitial nephritis, unspecified
N12	Tubulo-interstitial nephritis, not specified as acute or chronic
N13.6	Pyonephrosis
N14.0	Analgesic nephropathy
N14.1	Nephropathy induced by other drugs, medicaments and biological substances

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Code	Description
N14.2	Nephropathy induced by unspecified drug, medicament or biological substance
N14.3	Nephropathy induced by heavy metals
N14.4	Toxic nephropathy, not elsewhere classified
N15.0	Balkan nephropathy
N15.1	Renal and perinephric abscess
N15.8	Other specified renal tubulo-interstitial diseases
N15.9	Renal tubulo-interstitial disease, unspecified
N16	Renal tubulo-interstitial disorders in diseases classified elsewhere
N17.0	Acute kidney failure with tubular necrosis
N17.1	Acute kidney failure with acute cortical necrosis
N17.2	Acute kidney failure with medullary necrosis
N17.8	Other acute kidney failure
N17.9	Acute kidney failure, unspecified
N18.6	End stage renal disease
N19	Unspecified kidney failure
N25.0	Renal osteodystrophy
N25.1	Nephrogenic diabetes insipidus
N25.81	Secondary hyperparathyroidism of renal origin
N25.89	Other disorders resulting from impaired renal tubular function
N25.9	Disorder resulting from impaired renal tubular function, unspecified
N26.1	Atrophy of kidney (terminal)
N26.9	Renal sclerosis, unspecified
N28.84	Pyelitis cystica
N28.85	Pyeloureteritis cystica
N28.86	Ureteritis cystica
O14.10	Severe pre-eclampsia, unspecified trimester
O14.12	Severe pre-eclampsia, second trimester
O14.13	Severe pre-eclampsia, third trimester
O14.20	HELLP syndrome (HELLP), unspecified trimester
O14.22	HELLP syndrome (HELLP), second trimester

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Code	Description
O14.23	HELLP syndrome (HELLP), third trimester
O26.611	Liver and biliary tract disorders in pregnancy, first trimester
O26.612	Liver and biliary tract disorders in pregnancy, second trimester
O26.613	Liver and biliary tract disorders in pregnancy, third trimester
O26.619	Liver and biliary tract disorders in pregnancy, unspecified trimester
O26.62	Liver and biliary tract disorders in childbirth
Q85.00	Neurofibromatosis, unspecified
Q85.01	Neurofibromatosis, type 1
Q85.02	Neurofibromatosis, type 2
Q85.03	Schwannomatosis
Q85.09	Other neurofibromatosis
R11.13	Vomiting of fecal matter
R16.0	Hepatomegaly, not elsewhere classified
R16.2	Hepatomegaly with splenomegaly, not elsewhere classified
R17	Unspecified jaundice
*R40.2410	*Glasgow coma scale score 13-15, unspecified time
*R40.2411	*Glasgow coma scale score 13-15, in the field [EMT or ambulance]
*R40.2412	*Glasgow coma scale score 13-15, at arrival to emergency department
*R40.2413	*Glasgow coma scale score 13-15, at hospital admission
*R40.2414	*Glasgow coma scale score 13-15, 24 hours or more after hospital admission
*R40.2420	*Glasgow coma scale score 9-12, unspecified time
*R40.2421	*Glasgow coma scale score 9-12, in the field [EMT or ambulance]
*R40.2422	*Glasgow coma scale score 9-12, at arrival to emergency department
*R40.2423	*Glasgow coma scale score 9-12, at hospital admission
*R40.2424	*Glasgow coma scale score 9-12, 24 hours or more after hospital admission
*R40.2430	*Glasgow coma scale score 3-8, unspecified time
*R40.2431	*Glasgow coma scale score 3-8, in the field [EMT or ambulance]
*R40.2432	*Glasgow coma scale score 3-8, at arrival to emergency department
*R40.2433	*Glasgow coma scale score 3-8, at hospital admission
*R40.2434	*Glasgow coma scale score 3-8, 24 hours or more after hospital admission



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Code	Description
*R40.2440	*Other coma, without documented Glasgow coma scale score, or with partial score reported, unspecified time
*R40.2441	*Other coma, without documented Glasgow coma scale score, or with partial score reported, in the field [EMT or ambulance]
*R40.2442	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at arrival to emergency department
*R40.2443	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at hospital admission
*R40.2444	*Other coma, without documented Glasgow coma scale score, or with partial score reported, 24 hours or more after hospital admission
R74.0	Nonspecific elevation of levels of transaminase and lactic acid dehydrogenase [LDH]
R74.8	Abnormal levels of other serum enzymes
R74.9	Abnormal serum enzyme level, unspecified
T36.0X1A	Poisoning by penicillins, accidental (unintentional), initial encounter
T36.0X2A	Poisoning by penicillins, intentional self-harm, initial encounter
T36.0X3A	Poisoning by penicillins, assault, initial encounter
T36.0X4A	Poisoning by penicillins, undetermined, initial encounter
T36.1X1A	Poisoning by cephalosporins and other beta-lactam antibiotics, accidental (unintentional), initial encounter
T36.1X2A	Poisoning by cephalosporins and other beta-lactam antibiotics, intentional self-harm, initial encounter
T36.1X3A	Poisoning by cephalosporins and other beta-lactam antibiotics, assault, initial encounter
T36.1X4A	Poisoning by cephalosporins and other beta-lactam antibiotics, undetermined, initial encounter
T36.2X1A	Poisoning by chloramphenicol group, accidental (unintentional), initial encounter
T36.2X2A	Poisoning by chloramphenicol group, intentional self-harm, initial encounter
T36.2X3A	Poisoning by chloramphenicol group, assault, initial encounter
T36.2X4A	Poisoning by chloramphenicol group, undetermined, initial encounter
T36.3X1A	Poisoning by macrolides, accidental (unintentional), initial encounter
T36.3X2A	Poisoning by macrolides, intentional self-harm, initial encounter
T36.3X3A	Poisoning by macrolides, assault, initial encounter
T36.3X4A	Poisoning by macrolides, undetermined, initial encounter
T36.4X1A	Poisoning by tetracyclines, accidental (unintentional), initial encounter

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Code	Description
T36.4X2A	Poisoning by tetracyclines, intentional self-harm, initial encounter
T36.4X3A	Poisoning by tetracyclines, assault, initial encounter
T36.4X4A	Poisoning by tetracyclines, undetermined, initial encounter
T36.5X1A	Poisoning by aminoglycosides, accidental (unintentional), initial encounter
T36.5X2A	Poisoning by aminoglycosides, intentional self-harm, initial encounter
T36.5X3A	Poisoning by aminoglycosides, assault, initial encounter
T36.5X4A	Poisoning by aminoglycosides, undetermined, initial encounter
T36.6X1A	Poisoning by rifampicins, accidental (unintentional), initial encounter
T36.6X2A	Poisoning by rifampicins, intentional self-harm, initial encounter
T36.6X3A	Poisoning by rifampicins, assault, initial encounter
T36.6X4A	Poisoning by rifampicins, undetermined, initial encounter
T36.7X1A	Poisoning by antifungal antibiotics, systemically used, accidental (unintentional), initial encounter
T36.7X2A	Poisoning by antifungal antibiotics, systemically used, intentional self-harm, initial encounter
T36.7X3A	Poisoning by antifungal antibiotics, systemically used, assault, initial encounter
T36.7X4A	Poisoning by antifungal antibiotics, systemically used, undetermined, initial encounter
T36.8X1A	Poisoning by other systemic antibiotics, accidental (unintentional), initial encounter
T36.8X2A	Poisoning by other systemic antibiotics, intentional self-harm, initial encounter
T36.8X3A	Poisoning by other systemic antibiotics, assault, initial encounter
T36.8X4A	Poisoning by other systemic antibiotics, undetermined, initial encounter
T36.91XA	Poisoning by unspecified systemic antibiotic, accidental (unintentional), initial encounter
T36.92XA	Poisoning by unspecified systemic antibiotic, intentional self-harm, initial encounter
T36.93XA	Poisoning by unspecified systemic antibiotic, assault, initial encounter
T36.94XA	Poisoning by unspecified systemic antibiotic, undetermined, initial encounter
T37.0X1A	Poisoning by sulfonamides, accidental (unintentional), initial encounter
T37.0X2A	Poisoning by sulfonamides, intentional self-harm, initial encounter
T37.0X3A	Poisoning by sulfonamides, assault, initial encounter
T37.0X4A	Poisoning by sulfonamides, undetermined, initial encounter
T37.1X1A	Poisoning by antimycobacterial drugs, accidental (unintentional), initial encounter
T37.1X2A	Poisoning by antimycobacterial drugs, intentional self-harm, initial encounter

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Code	Description
T37.1X3A	Poisoning by antimycobacterial drugs, assault, initial encounter
T37.1X4A	Poisoning by antimycobacterial drugs, undetermined, initial encounter
T37.2X1A	Poisoning by antimalarials and drugs acting on other blood protozoa, accidental (unintentional), initial encounter
T37.2X2A	Poisoning by antimalarials and drugs acting on other blood protozoa, intentional self-harm, initial encounter
T37.2X3A	Poisoning by antimalarials and drugs acting on other blood protozoa, assault, initial encounter
T37.2X4A	Poisoning by antimalarials and drugs acting on other blood protozoa, undetermined, initial encounter
T37.3X1A	Poisoning by other antiprotozoal drugs, accidental (unintentional), initial encounter
T37.3X2A	Poisoning by other antiprotozoal drugs, intentional self-harm, initial encounter
T37.3X3A	Poisoning by other antiprotozoal drugs, assault, initial encounter
T37.3X4A	Poisoning by other antiprotozoal drugs, undetermined, initial encounter
T37.4X1A	Poisoning by anthelmintics, accidental (unintentional), initial encounter
T37.4X2A	Poisoning by anthelmintics, intentional self-harm, initial encounter
T37.4X3A	Poisoning by anthelmintics, assault, initial encounter
T37.4X4A	Poisoning by anthelmintics, undetermined, initial encounter
T37.5X1A	Poisoning by antiviral drugs, accidental (unintentional), initial encounter
T37.5X2A	Poisoning by antiviral drugs, intentional self-harm, initial encounter
T37.5X3A	Poisoning by antiviral drugs, assault, initial encounter
T37.5X4A	Poisoning by antiviral drugs, undetermined, initial encounter
T37.8X1A	Poisoning by other specified systemic anti-infectives and antiparasitics, accidental (unintentional), initial encounter
T37.8X2A	Poisoning by other specified systemic anti-infectives and antiparasitics, intentional self-harm, initial encounter
T37.8X3A	Poisoning by other specified systemic anti-infectives and antiparasitics, assault, initial encounter
T37.8X4A	Poisoning by other specified systemic anti-infectives and antiparasitics, undetermined, initial encounter
T37.91XA	Poisoning by unspecified systemic anti-infective and antiparasitics, accidental (unintentional), initial encounter
T37.92XA	Poisoning by unspecified systemic anti-infective and antiparasitics, intentional self-harm, initial encounter



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Code	Description
T37.93XA	Poisoning by unspecified systemic anti-infective and antiparasitics, assault, initial encounter
T37.94XA	Poisoning by unspecified systemic anti-infective and antiparasitics, undetermined, initial encounter
T38.0X1A	Poisoning by glucocorticoids and synthetic analogues, accidental (unintentional), initial encounter
T38.0X2A	Poisoning by glucocorticoids and synthetic analogues, intentional self-harm, initial encounter
T38.0X3A	Poisoning by glucocorticoids and synthetic analogues, assault, initial encounter
T38.0X4A	Poisoning by glucocorticoids and synthetic analogues, undetermined, initial encounter
T38.1X1A	Poisoning by thyroid hormones and substitutes, accidental (unintentional), initial encounter
T38.1X2A	Poisoning by thyroid hormones and substitutes, intentional self-harm, initial encounter
T38.1X3A	Poisoning by thyroid hormones and substitutes, assault, initial encounter
T38.1X4A	Poisoning by thyroid hormones and substitutes, undetermined, initial encounter
T38.2X1A	Poisoning by antithyroid drugs, accidental (unintentional), initial encounter
T38.2X2A	Poisoning by antithyroid drugs, intentional self-harm, initial encounter
T38.2X3A	Poisoning by antithyroid drugs, assault, initial encounter
T38.2X4A	Poisoning by antithyroid drugs, undetermined, initial encounter
T38.3X1A	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, accidental (unintentional), initial encounter
T38.3X2A	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, intentional self-harm, initial encounter
T38.3X3A	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, assault, initial encounter
T38.3X4A	Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, undetermined, initial encounter
T38.4X1A	Poisoning by oral contraceptives, accidental (unintentional), initial encounter
T38.4X2A	Poisoning by oral contraceptives, intentional self-harm, initial encounter
T38.4X3A	Poisoning by oral contraceptives, assault, initial encounter
T38.4X4A	Poisoning by oral contraceptives, undetermined, initial encounter
T38.5X1A	Poisoning by other estrogens and progestogens, accidental (unintentional), initial encounter
T38.5X2A	Poisoning by other estrogens and progestogens, intentional self-harm, initial encounter
T38.5X3A	Poisoning by other estrogens and progestogens, assault, initial encounter

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Code	Description
T38.5X4A	Poisoning by other estrogens and progestogens, undetermined, initial encounter
T38.6X1A	Poisoning by antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, accidental (unintentional), initial encounter
T38.6X2A	Poisoning by antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, intentional self-harm, initial encounter
T38.6X3A	Poisoning by antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, assault, initial encounter
T38.6X4A	Poisoning by antigonadotrophins, antiestrogens, antiandrogens, not elsewhere classified, undetermined, initial encounter
T38.7X1A	Poisoning by androgens and anabolic congeners, accidental (unintentional), initial encounter
T38.7X2A	Poisoning by androgens and anabolic congeners, intentional self-harm, initial encounter
T38.7X3A	Poisoning by androgens and anabolic congeners, assault, initial encounter
T38.7X4A	Poisoning by androgens and anabolic congeners, undetermined, initial encounter
T38.801A	Poisoning by unspecified hormones and synthetic substitutes, accidental (unintentional), initial encounter
T38.802A	Poisoning by unspecified hormones and synthetic substitutes, intentional self-harm, initial encounter
T38.803A	Poisoning by unspecified hormones and synthetic substitutes, assault, initial encounter
T38.804A	Poisoning by unspecified hormones and synthetic substitutes, undetermined, initial encounter
T38.811A	Poisoning by anterior pituitary [adenohypophyseal] hormones, accidental (unintentional), initial encounter
T38.812A	Poisoning by anterior pituitary [adenohypophyseal] hormones, intentional self-harm, initial encounter
T38.813A	Poisoning by anterior pituitary [adenohypophyseal] hormones, assault, initial encounter
T38.814A	Poisoning by anterior pituitary [adenohypophyseal] hormones, undetermined, initial encounter
T38.891A	Poisoning by other hormones and synthetic substitutes, accidental (unintentional), initial encounter
T38.892A	Poisoning by other hormones and synthetic substitutes, intentional self-harm, initial encounter
T38.893A	Poisoning by other hormones and synthetic substitutes, assault, initial encounter
T38.894A	Poisoning by other hormones and synthetic substitutes, undetermined, initial encounter
T38.901A	Poisoning by unspecified hormone antagonists, accidental (unintentional), initial encounter

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Code	Description
T38.902A	Poisoning by unspecified hormone antagonists, intentional self-harm, initial encounter
T38.903A	Poisoning by unspecified hormone antagonists, assault, initial encounter
T38.904A	Poisoning by unspecified hormone antagonists, undetermined, initial encounter
T38.991A	Poisoning by other hormone antagonists, accidental (unintentional), initial encounter
T38.992A	Poisoning by other hormone antagonists, intentional self-harm, initial encounter
T38.993A	Poisoning by other hormone antagonists, assault, initial encounter
T38.994A	Poisoning by other hormone antagonists, undetermined, initial encounter
T39.011A	Poisoning by aspirin, accidental (unintentional), initial encounter
T39.012A	Poisoning by aspirin, intentional self-harm, initial encounter
T39.013A	Poisoning by aspirin, assault, initial encounter
T39.014A	Poisoning by aspirin, undetermined, initial encounter
T39.091A	Poisoning by salicylates, accidental (unintentional), initial encounter
T39.092A	Poisoning by salicylates, intentional self-harm, initial encounter
T39.093A	Poisoning by salicylates, assault, initial encounter
T39.094A	Poisoning by salicylates, undetermined, initial encounter
T39.1X1A	Poisoning by 4-Aminophenol derivatives, accidental (unintentional), initial encounter
T39.1X2A	Poisoning by 4-Aminophenol derivatives, intentional self-harm, initial encounter
T39.1X3A	Poisoning by 4-Aminophenol derivatives, assault, initial encounter
T39.1X4A	Poisoning by 4-Aminophenol derivatives, undetermined, initial encounter
T39.2X1A	Poisoning by pyrazolone derivatives, accidental (unintentional), initial encounter
T39.2X2A	Poisoning by pyrazolone derivatives, intentional self-harm, initial encounter
T39.2X3A	Poisoning by pyrazolone derivatives, assault, initial encounter
T39.2X4A	Poisoning by pyrazolone derivatives, undetermined, initial encounter
T39.311A	Poisoning by propionic acid derivatives, accidental (unintentional), initial encounter
T39.312A	Poisoning by propionic acid derivatives, intentional self-harm, initial encounter
T39.313A	Poisoning by propionic acid derivatives, assault, initial encounter
T39.314A	Poisoning by propionic acid derivatives, undetermined, initial encounter
T39.391A	Poisoning by other nonsteroidal anti-inflammatory drugs [NSAID], accidental (unintentional), initial encounter
T39.392A	Poisoning by other nonsteroidal anti-inflammatory drugs [NSAID], intentional self-harm, initial encounter

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Code	Description
T39.393A	Poisoning by other nonsteroidal anti-inflammatory drugs [NSAID], assault, initial encounter
T39.394A	Poisoning by other nonsteroidal anti-inflammatory drugs [NSAID], undetermined, initial encounter
T39.4X1A	Poisoning by antirheumatics, not elsewhere classified, accidental (unintentional), initial encounter
T39.4X2A	Poisoning by antirheumatics, not elsewhere classified, intentional self-harm, initial encounter
T39.4X3A	Poisoning by antirheumatics, not elsewhere classified, assault, initial encounter
T39.4X4A	Poisoning by antirheumatics, not elsewhere classified, undetermined, initial encounter
T39.8X1A	Poisoning by other nonopioid analgesics and antipyretics, not elsewhere classified, accidental (unintentional), initial encounter
T39.8X2A	Poisoning by other nonopioid analgesics and antipyretics, not elsewhere classified, intentional self-harm, initial encounter
T39.8X3A	Poisoning by other nonopioid analgesics and antipyretics, not elsewhere classified, assault, initial encounter
T39.8X4A	Poisoning by other nonopioid analgesics and antipyretics, not elsewhere classified, undetermined, initial encounter
T39.91XA	Poisoning by unspecified nonopioid analgesic, antipyretic and antirheumatic, accidental (unintentional), initial encounter
T39.92XA	Poisoning by unspecified nonopioid analgesic, antipyretic and antirheumatic, intentional self-harm, initial encounter
T39.93XA	Poisoning by unspecified nonopioid analgesic, antipyretic and antirheumatic, assault, initial encounter
T39.94XA	Poisoning by unspecified nonopioid analgesic, antipyretic and antirheumatic, undetermined, initial encounter
T40.0X1A	Poisoning by opium, accidental (unintentional), initial encounter
T40.0X2A	Poisoning by opium, intentional self-harm, initial encounter
T40.0X3A	Poisoning by opium, assault, initial encounter
T40.0X4A	Poisoning by opium, undetermined, initial encounter
T40.1X1A	Poisoning by heroin, accidental (unintentional), initial encounter
T40.1X2A	Poisoning by heroin, intentional self-harm, initial encounter
T40.1X3A	Poisoning by heroin, assault, initial encounter
T40.1X4A	Poisoning by heroin, undetermined, initial encounter
T40.2X1A	Poisoning by other opioids, accidental (unintentional), initial encounter

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Code	Description
T40.2X2A	Poisoning by other opioids, intentional self-harm, initial encounter
T40.2X3A	Poisoning by other opioids, assault, initial encounter
T40.2X4A	Poisoning by other opioids, undetermined, initial encounter
T40.3X1A	Poisoning by methadone, accidental (unintentional), initial encounter
T40.3X2A	Poisoning by methadone, intentional self-harm, initial encounter
T40.3X3A	Poisoning by methadone, assault, initial encounter
T40.3X4A	Poisoning by methadone, undetermined, initial encounter
T40.4X1A	Poisoning by other synthetic narcotics, accidental (unintentional), initial encounter
T40.4X2A	Poisoning by other synthetic narcotics, intentional self-harm, initial encounter
T40.4X3A	Poisoning by other synthetic narcotics, assault, initial encounter
T40.4X4A	Poisoning by other synthetic narcotics, undetermined, initial encounter
T40.5X1A	Poisoning by cocaine, accidental (unintentional), initial encounter
T40.5X2A	Poisoning by cocaine, intentional self-harm, initial encounter
T40.5X3A	Poisoning by cocaine, assault, initial encounter
T40.5X4A	Poisoning by cocaine, undetermined, initial encounter
T40.601A	Poisoning by unspecified narcotics, accidental (unintentional), initial encounter
T40.602A	Poisoning by unspecified narcotics, intentional self-harm, initial encounter
T40.603A	Poisoning by unspecified narcotics, assault, initial encounter
T40.604A	Poisoning by unspecified narcotics, undetermined, initial encounter
T40.691A	Poisoning by other narcotics, accidental (unintentional), initial encounter
T40.692A	Poisoning by other narcotics, intentional self-harm, initial encounter
T40.693A	Poisoning by other narcotics, assault, initial encounter
T40.694A	Poisoning by other narcotics, undetermined, initial encounter
T40.7X1A	Poisoning by cannabis (derivatives), accidental (unintentional), initial encounter
T40.7X2A	Poisoning by cannabis (derivatives), intentional self-harm, initial encounter
T40.7X3A	Poisoning by cannabis (derivatives), assault, initial encounter
T40.7X4A	Poisoning by cannabis (derivatives), undetermined, initial encounter
T40.8X1A	Poisoning by lysergide [LSD], accidental (unintentional), initial encounter
T40.8X2A	Poisoning by lysergide [LSD], intentional self-harm, initial encounter
T40.8X3A	Poisoning by lysergide [LSD], assault, initial encounter

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Code	Description
T40.8X4A	Poisoning by lysergide [LSD], undetermined, initial encounter
T40.901A	Poisoning by unspecified psychodysleptics [hallucinogens], accidental (unintentional), initial encounter
T40.902A	Poisoning by unspecified psychodysleptics [hallucinogens], intentional self-harm, initial encounter
T40.903A	Poisoning by unspecified psychodysleptics [hallucinogens], assault, initial encounter
T40.904A	Poisoning by unspecified psychodysleptics [hallucinogens], undetermined, initial encounter
T40.991A	Poisoning by other psychodysleptics [hallucinogens], accidental (unintentional), initial encounter
T40.992A	Poisoning by other psychodysleptics [hallucinogens], intentional self-harm, initial encounter
T40.993A	Poisoning by other psychodysleptics [hallucinogens], assault, initial encounter
T40.994A	Poisoning by other psychodysleptics [hallucinogens], undetermined, initial encounter
T41.0X1A	Poisoning by inhaled anesthetics, accidental (unintentional), initial encounter
T41.0X2A	Poisoning by inhaled anesthetics, intentional self-harm, initial encounter
T41.0X3A	Poisoning by inhaled anesthetics, assault, initial encounter
T41.0X4A	Poisoning by inhaled anesthetics, undetermined, initial encounter
T41.1X1A	Poisoning by intravenous anesthetics, accidental (unintentional), initial encounter
T41.1X2A	Poisoning by intravenous anesthetics, intentional self-harm, initial encounter
T41.1X3A	Poisoning by intravenous anesthetics, assault, initial encounter
T41.1X4A	Poisoning by intravenous anesthetics, undetermined, initial encounter
T41.201A	Poisoning by unspecified general anesthetics, accidental (unintentional), initial encounter
T41.202A	Poisoning by unspecified general anesthetics, intentional self-harm, initial encounter
T41.203A	Poisoning by unspecified general anesthetics, assault, initial encounter
T41.204A	Poisoning by unspecified general anesthetics, undetermined, initial encounter
T41.291A	Poisoning by other general anesthetics, accidental (unintentional), initial encounter
T41.292A	Poisoning by other general anesthetics, intentional self-harm, initial encounter
T41.293A	Poisoning by other general anesthetics, assault, initial encounter
T41.294A	Poisoning by other general anesthetics, undetermined, initial encounter
T41.3X1A	Poisoning by local anesthetics, accidental (unintentional), initial encounter
T41.3X2A	Poisoning by local anesthetics, intentional self-harm, initial encounter
T41.3X3A	Poisoning by local anesthetics, assault, initial encounter



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Code	Description
T41.3X4A	Poisoning by local anesthetics, undetermined, initial encounter
T41.41XA	Poisoning by unspecified anesthetic, accidental (unintentional), initial encounter
T41.42XA	Poisoning by unspecified anesthetic, intentional self-harm, initial encounter
T41.43XA	Poisoning by unspecified anesthetic, assault, initial encounter
T41.44XA	Poisoning by unspecified anesthetic, undetermined, initial encounter
T41.5X1A	Poisoning by therapeutic gases, accidental (unintentional), initial encounter
T41.5X2A	Poisoning by therapeutic gases, intentional self-harm, initial encounter
T41.5X3A	Poisoning by therapeutic gases, assault, initial encounter
T41.5X4A	Poisoning by therapeutic gases, undetermined, initial encounter
T42.0X1A	Poisoning by hydantoin derivatives, accidental (unintentional), initial encounter
T42.0X2A	Poisoning by hydantoin derivatives, intentional self-harm, initial encounter
T42.0X3A	Poisoning by hydantoin derivatives, assault, initial encounter
T42.0X4A	Poisoning by hydantoin derivatives, undetermined, initial encounter
T42.1X1A	Poisoning by iminostilbenes, accidental (unintentional), initial encounter
T42.1X2A	Poisoning by iminostilbenes, intentional self-harm, initial encounter
T42.1X3A	Poisoning by iminostilbenes, assault, initial encounter
T42.1X4A	Poisoning by iminostilbenes, undetermined, initial encounter
T42.2X1A	Poisoning by succinimides and oxazolidinediones, accidental (unintentional), initial encounter
T42.2X2A	Poisoning by succinimides and oxazolidinediones, intentional self-harm, initial encounter
T42.2X3A	Poisoning by succinimides and oxazolidinediones, assault, initial encounter
T42.2X4A	Poisoning by succinimides and oxazolidinediones, undetermined, initial encounter
T42.3X1A	Poisoning by barbiturates, accidental (unintentional), initial encounter
T42.3X2A	Poisoning by barbiturates, intentional self-harm, initial encounter
T42.3X3A	Poisoning by barbiturates, assault, initial encounter
T42.3X4A	Poisoning by barbiturates, undetermined, initial encounter
T42.4X1A	Poisoning by benzodiazepines, accidental (unintentional), initial encounter
T42.4X2A	Poisoning by benzodiazepines, intentional self-harm, initial encounter
T42.4X3A	Poisoning by benzodiazepines, assault, initial encounter
T42.4X4A	Poisoning by benzodiazepines, undetermined, initial encounter
T42.5X1A	Poisoning by mixed antiepileptics, accidental (unintentional), initial encounter

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Code	Description
T42.5X2A	Poisoning by mixed antiepileptics, intentional self-harm, initial encounter
T42.5X3A	Poisoning by mixed antiepileptics, assault, initial encounter
T42.5X4A	Poisoning by mixed antiepileptics, undetermined, initial encounter
T42.6X1A	Poisoning by other antiepileptic and sedative-hypnotic drugs, accidental (unintentional), initial encounter
T42.6X2A	Poisoning by other antiepileptic and sedative-hypnotic drugs, intentional self-harm, initial encounter
T42.6X3A	Poisoning by other antiepileptic and sedative-hypnotic drugs, assault, initial encounter
T42.6X4A	Poisoning by other antiepileptic and sedative-hypnotic drugs, undetermined, initial encounter
T42.71XA	Poisoning by unspecified antiepileptic and sedative-hypnotic drugs, accidental (unintentional), initial encounter
T42.72XA	Poisoning by unspecified antiepileptic and sedative-hypnotic drugs, intentional self-harm, initial encounter
T42.73XA	Poisoning by unspecified antiepileptic and sedative-hypnotic drugs, assault, initial encounter
T42.74XA	Poisoning by unspecified antiepileptic and sedative-hypnotic drugs, undetermined, initial encounter
T42.8X1A	Poisoning by antiparkinsonism drugs and other central muscle-tone depressants, accidental (unintentional), initial encounter
T42.8X2A	Poisoning by antiparkinsonism drugs and other central muscle-tone depressants, intentional self-harm, initial encounter
T42.8X3A	Poisoning by antiparkinsonism drugs and other central muscle-tone depressants, assault, initial encounter
T42.8X4A	Poisoning by antiparkinsonism drugs and other central muscle-tone depressants, undetermined, initial encounter
T43.011A	Poisoning by tricyclic antidepressants, accidental (unintentional), initial encounter
T43.012A	Poisoning by tricyclic antidepressants, intentional self-harm, initial encounter
T43.013A	Poisoning by tricyclic antidepressants, assault, initial encounter
T43.014A	Poisoning by tricyclic antidepressants, undetermined, initial encounter
T43.021A	Poisoning by tetracyclic antidepressants, accidental (unintentional), initial encounter
T43.022A	Poisoning by tetracyclic antidepressants, intentional self-harm, initial encounter
T43.023A	Poisoning by tetracyclic antidepressants, assault, initial encounter
T43.024A	Poisoning by tetracyclic antidepressants, undetermined, initial encounter

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**Medicare National Coverage Determinations (NCD)
Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
T43.1X1A	Poisoning by monoamine-oxidase-inhibitor antidepressants, accidental (unintentional), initial encounter
T43.1X2A	Poisoning by monoamine-oxidase-inhibitor antidepressants, intentional self-harm, initial encounter
T43.1X3A	Poisoning by monoamine-oxidase-inhibitor antidepressants, assault, initial encounter
T43.1X4A	Poisoning by monoamine-oxidase-inhibitor antidepressants, undetermined, initial encounter
T43.201A	Poisoning by unspecified antidepressants, accidental (unintentional), initial encounter
T43.202A	Poisoning by unspecified antidepressants, intentional self-harm, initial encounter
T43.203A	Poisoning by unspecified antidepressants, assault, initial encounter
T43.204A	Poisoning by unspecified antidepressants, undetermined, initial encounter
T43.211A	Poisoning by selective serotonin and norepinephrine reuptake inhibitors, accidental (unintentional), initial encounter
T43.212A	Poisoning by selective serotonin and norepinephrine reuptake inhibitors, intentional self-harm, initial encounter
T43.213A	Poisoning by selective serotonin and norepinephrine reuptake inhibitors, assault, initial encounter
T43.214A	Poisoning by selective serotonin and norepinephrine reuptake inhibitors, undetermined, initial encounter
T43.221A	Poisoning by selective serotonin reuptake inhibitors, accidental (unintentional), initial encounter
T43.222A	Poisoning by selective serotonin reuptake inhibitors, intentional self-harm, initial encounter
T43.223A	Poisoning by selective serotonin reuptake inhibitors, assault, initial encounter
T43.224A	Poisoning by selective serotonin reuptake inhibitors, undetermined, initial encounter
T43.291A	Poisoning by other antidepressants, accidental (unintentional), initial encounter
T43.292A	Poisoning by other antidepressants, intentional self-harm, initial encounter
T43.293A	Poisoning by other antidepressants, assault, initial encounter
T43.294A	Poisoning by other antidepressants, undetermined, initial encounter
T43.3X1A	Poisoning by phenothiazine antipsychotics and neuroleptics, accidental (unintentional), initial encounter
T43.3X2A	Poisoning by phenothiazine antipsychotics and neuroleptics, intentional self-harm, initial encounter
T43.3X3A	Poisoning by phenothiazine antipsychotics and neuroleptics, assault, initial encounter



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Code	Description
T43.3X4A	Poisoning by phenothiazine antipsychotics and neuroleptics, undetermined, initial encounter
T43.4X1A	Poisoning by butyrophenone and thiothixene neuroleptics, accidental (unintentional), initial encounter
T43.4X2A	Poisoning by butyrophenone and thiothixene neuroleptics, intentional self-harm, initial encounter
T43.4X3A	Poisoning by butyrophenone and thiothixene neuroleptics, assault, initial encounter
T43.4X4A	Poisoning by butyrophenone and thiothixene neuroleptics, undetermined, initial encounter
T43.501A	Poisoning by unspecified antipsychotics and neuroleptics, accidental (unintentional), initial encounter
T43.502A	Poisoning by unspecified antipsychotics and neuroleptics, intentional self-harm, initial encounter
T43.503A	Poisoning by unspecified antipsychotics and neuroleptics, assault, initial encounter
T43.504A	Poisoning by unspecified antipsychotics and neuroleptics, undetermined, initial encounter
T43.591A	Poisoning by other antipsychotics and neuroleptics, accidental (unintentional), initial encounter
T43.592A	Poisoning by other antipsychotics and neuroleptics, intentional self-harm, initial encounter
T43.593A	Poisoning by other antipsychotics and neuroleptics, assault, initial encounter
T43.594A	Poisoning by other antipsychotics and neuroleptics, undetermined, initial encounter
T43.601A	Poisoning by unspecified psychostimulants, accidental (unintentional), initial encounter
T43.602A	Poisoning by unspecified psychostimulants, intentional self-harm, initial encounter
T43.603A	Poisoning by unspecified psychostimulants, assault, initial encounter
T43.604A	Poisoning by unspecified psychostimulants, undetermined, initial encounter
T43.611A	Poisoning by caffeine, accidental (unintentional), initial encounter
T43.612A	Poisoning by caffeine, intentional self-harm, initial encounter
T43.613A	Poisoning by caffeine, assault, initial encounter
T43.614A	Poisoning by caffeine, undetermined, initial encounter
T43.621A	Poisoning by amphetamines, accidental (unintentional), initial encounter
T43.622A	Poisoning by amphetamines, intentional self-harm, initial encounter
T43.623A	Poisoning by amphetamines, assault, initial encounter
T43.624A	Poisoning by amphetamines, undetermined, initial encounter
T43.631A	Poisoning by methylphenidate, accidental (unintentional), initial encounter



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Code	Description
T43.632A	Poisoning by methylphenidate, intentional self-harm, initial encounter
T43.633A	Poisoning by methylphenidate, assault, initial encounter
T43.634A	Poisoning by methylphenidate, undetermined, initial encounter
T43.691A	Poisoning by other psychostimulants, accidental (unintentional), initial encounter
T43.692A	Poisoning by other psychostimulants, intentional self-harm, initial encounter
T43.693A	Poisoning by other psychostimulants, assault, initial encounter
T43.694A	Poisoning by other psychostimulants, undetermined, initial encounter
T43.8X1A	Poisoning by other psychotropic drugs, accidental (unintentional), initial encounter
T43.8X2A	Poisoning by other psychotropic drugs, intentional self-harm, initial encounter
T43.8X3A	Poisoning by other psychotropic drugs, assault, initial encounter
T43.8X4A	Poisoning by other psychotropic drugs, undetermined, initial encounter
T43.91XA	Poisoning by unspecified psychotropic drug, accidental (unintentional), initial encounter
T43.92XA	Poisoning by unspecified psychotropic drug, intentional self-harm, initial encounter
T43.93XA	Poisoning by unspecified psychotropic drug, assault, initial encounter
T43.94XA	Poisoning by unspecified psychotropic drug, undetermined, initial encounter
T44.0X1A	Poisoning by anticholinesterase agents, accidental (unintentional), initial encounter
T44.0X2A	Poisoning by anticholinesterase agents, intentional self-harm, initial encounter
T44.0X3A	Poisoning by anticholinesterase agents, assault, initial encounter
T44.0X4A	Poisoning by anticholinesterase agents, undetermined, initial encounter
T44.1X1A	Poisoning by other parasympathomimetics [cholinergics], accidental (unintentional), initial encounter
T44.1X2A	Poisoning by other parasympathomimetics [cholinergics], intentional self-harm, initial encounter
T44.1X3A	Poisoning by other parasympathomimetics [cholinergics], assault, initial encounter
T44.1X4A	Poisoning by other parasympathomimetics [cholinergics], undetermined, initial encounter
T44.2X1A	Poisoning by ganglionic blocking drugs, accidental (unintentional), initial encounter
T44.2X2A	Poisoning by ganglionic blocking drugs, intentional self-harm, initial encounter
T44.2X3A	Poisoning by ganglionic blocking drugs, assault, initial encounter
T44.2X4A	Poisoning by ganglionic blocking drugs, undetermined, initial encounter
T44.3X1A	Poisoning by other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, accidental (unintentional), initial encounter



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Code	Description
T44.3X2A	Poisoning by other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, intentional self-harm, initial encounter
T44.3X3A	Poisoning by other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, assault, initial encounter
T44.3X4A	Poisoning by other parasympatholytics [anticholinergics and antimuscarinics] and spasmolytics, undetermined, initial encounter
T44.4X1A	Poisoning by predominantly alpha-adrenoreceptor agonists, accidental (unintentional), initial encounter
T44.4X2A	Poisoning by predominantly alpha-adrenoreceptor agonists, intentional self-harm, initial encounter
T44.4X3A	Poisoning by predominantly alpha-adrenoreceptor agonists, assault, initial encounter
T44.4X4A	Poisoning by predominantly alpha-adrenoreceptor agonists, undetermined, initial encounter
T44.5X1A	Poisoning by predominantly beta-adrenoreceptor agonists, accidental (unintentional), initial encounter
T44.5X2A	Poisoning by predominantly beta-adrenoreceptor agonists, intentional self-harm, initial encounter
T44.5X3A	Poisoning by predominantly beta-adrenoreceptor agonists, assault, initial encounter
T44.5X4A	Poisoning by predominantly beta-adrenoreceptor agonists, undetermined, initial encounter
T44.6X1A	Poisoning by alpha-adrenoreceptor antagonists, accidental (unintentional), initial encounter
T44.6X2A	Poisoning by alpha-adrenoreceptor antagonists, intentional self-harm, initial encounter
T44.6X3A	Poisoning by alpha-adrenoreceptor antagonists, assault, initial encounter
T44.6X4A	Poisoning by alpha-adrenoreceptor antagonists, undetermined, initial encounter
T44.7X1A	Poisoning by beta-adrenoreceptor antagonists, accidental (unintentional), initial encounter
T44.7X2A	Poisoning by beta-adrenoreceptor antagonists, intentional self-harm, initial encounter
T44.7X3A	Poisoning by beta-adrenoreceptor antagonists, assault, initial encounter
T44.7X4A	Poisoning by beta-adrenoreceptor antagonists, undetermined, initial encounter
T44.8X1A	Poisoning by centrally-acting and adrenergic-neuron-blocking agents, accidental (unintentional), initial encounter
T44.8X2A	Poisoning by centrally-acting and adrenergic-neuron-blocking agents, intentional self-harm, initial encounter
T44.8X3A	Poisoning by centrally-acting and adrenergic-neuron-blocking agents, assault, initial encounter



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Code	Description
T44.8X4A	Poisoning by centrally-acting and adrenergic-neuron-blocking agents, undetermined, initial encounter
T44.901A	Poisoning by unspecified drugs primarily affecting the autonomic nervous system, accidental (unintentional), initial encounter
T44.902A	Poisoning by unspecified drugs primarily affecting the autonomic nervous system, intentional self-harm, initial encounter
T44.903A	Poisoning by unspecified drugs primarily affecting the autonomic nervous system, assault, initial encounter
T44.904A	Poisoning by unspecified drugs primarily affecting the autonomic nervous system, undetermined, initial encounter
T44.991A	Poisoning by other drug primarily affecting the autonomic nervous system, accidental (unintentional), initial encounter
T44.992A	Poisoning by other drug primarily affecting the autonomic nervous system, intentional self-harm, initial encounter
T44.993A	Poisoning by other drug primarily affecting the autonomic nervous system, assault, initial encounter
T44.994A	Poisoning by other drug primarily affecting the autonomic nervous system, undetermined, initial encounter
T45.0X1A	Poisoning by antiallergic and antiemetic drugs, accidental (unintentional), initial encounter
T45.0X2A	Poisoning by antiallergic and antiemetic drugs, intentional self-harm, initial encounter
T45.0X3A	Poisoning by antiallergic and antiemetic drugs, assault, initial encounter
T45.0X4A	Poisoning by antiallergic and antiemetic drugs, undetermined, initial encounter
T45.1X1A	Poisoning by antineoplastic and immunosuppressive drugs, accidental (unintentional), initial encounter
T45.1X2A	Poisoning by antineoplastic and immunosuppressive drugs, intentional self-harm, initial encounter
T45.1X3A	Poisoning by antineoplastic and immunosuppressive drugs, assault, initial encounter
T45.1X4A	Poisoning by antineoplastic and immunosuppressive drugs, undetermined, initial encounter
T45.2X1A	Poisoning by vitamins, accidental (unintentional), initial encounter
T45.2X2A	Poisoning by vitamins, intentional self-harm, initial encounter
T45.2X3A	Poisoning by vitamins, assault, initial encounter
T45.2X4A	Poisoning by vitamins, undetermined, initial encounter
T45.3X1A	Poisoning by enzymes, accidental (unintentional), initial encounter



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Code	Description
T45.3X2A	Poisoning by enzymes, intentional self-harm, initial encounter
T45.3X3A	Poisoning by enzymes, assault, initial encounter
T45.3X4A	Poisoning by enzymes, undetermined, initial encounter
T45.4X1A	Poisoning by iron and its compounds, accidental (unintentional), initial encounter
T45.4X2A	Poisoning by iron and its compounds, intentional self-harm, initial encounter
T45.4X3A	Poisoning by iron and its compounds, assault, initial encounter
T45.4X4A	Poisoning by iron and its compounds, undetermined, initial encounter
T45.511A	Poisoning by anticoagulants, accidental (unintentional), initial encounter
T45.512A	Poisoning by anticoagulants, intentional self-harm, initial encounter
T45.513A	Poisoning by anticoagulants, assault, initial encounter
T45.514A	Poisoning by anticoagulants, undetermined, initial encounter
T45.521A	Poisoning by antithrombotic drugs, accidental (unintentional), initial encounter
T45.522A	Poisoning by antithrombotic drugs, intentional self-harm, initial encounter
T45.523A	Poisoning by antithrombotic drugs, assault, initial encounter
T45.524A	Poisoning by antithrombotic drugs, undetermined, initial encounter
T45.601A	Poisoning by unspecified fibrinolysis-affecting drugs, accidental (unintentional), initial encounter
T45.602A	Poisoning by unspecified fibrinolysis-affecting drugs, intentional self-harm, initial encounter
T45.603A	Poisoning by unspecified fibrinolysis-affecting drugs, assault, initial encounter
T45.604A	Poisoning by unspecified fibrinolysis-affecting drugs, undetermined, initial encounter
T45.611A	Poisoning by thrombolytic drug, accidental (unintentional), initial encounter
T45.612A	Poisoning by thrombolytic drug, intentional self-harm, initial encounter
T45.613A	Poisoning by thrombolytic drug, assault, initial encounter
T45.614A	Poisoning by thrombolytic drug, undetermined, initial encounter
T45.621A	Poisoning by hemostatic drug, accidental (unintentional), initial encounter
T45.622A	Poisoning by hemostatic drug, intentional self-harm, initial encounter
T45.623A	Poisoning by hemostatic drug, assault, initial encounter
T45.624A	Poisoning by hemostatic drug, undetermined, initial encounter
T45.691A	Poisoning by other fibrinolysis-affecting drugs, accidental (unintentional), initial encounter
T45.692A	Poisoning by other fibrinolysis-affecting drugs, intentional self-harm, initial encounter
T45.693A	Poisoning by other fibrinolysis-affecting drugs, assault, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T45.694A	Poisoning by other fibrinolysis-affecting drugs, undetermined, initial encounter
T45.7X1A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, accidental (unintentional), initial encounter
T45.7X2A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, intentional self-harm, initial encounter
T45.7X3A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, assault, initial encounter
T45.7X4A	Poisoning by anticoagulant antagonists, vitamin K and other coagulants, undetermined, initial encounter
T45.8X1A	Poisoning by other primarily systemic and hematological agents, accidental (unintentional), initial encounter
T45.8X2A	Poisoning by other primarily systemic and hematological agents, intentional self-harm, initial encounter
T45.8X3A	Poisoning by other primarily systemic and hematological agents, assault, initial encounter
T45.8X4A	Poisoning by other primarily systemic and hematological agents, undetermined, initial encounter
T45.91XA	Poisoning by unspecified primarily systemic and hematological agent, accidental (unintentional), initial encounter
T45.92XA	Poisoning by unspecified primarily systemic and hematological agent, intentional self-harm, initial encounter
T45.93XA	Poisoning by unspecified primarily systemic and hematological agent, assault, initial encounter
T45.94XA	Poisoning by unspecified primarily systemic and hematological agent, undetermined, initial encounter
T46.0X1A	Poisoning by cardiac-stimulant glycosides and drugs of similar action, accidental (unintentional), initial encounter
T46.0X2A	Poisoning by cardiac-stimulant glycosides and drugs of similar action, intentional self-harm, initial encounter
T46.0X3A	Poisoning by cardiac-stimulant glycosides and drugs of similar action, assault, initial encounter
T46.0X4A	Poisoning by cardiac-stimulant glycosides and drugs of similar action, undetermined, initial encounter
T46.1X1A	Poisoning by calcium-channel blockers, accidental (unintentional), initial encounter
T46.1X2A	Poisoning by calcium-channel blockers, intentional self-harm, initial encounter
T46.1X3A	Poisoning by calcium-channel blockers, assault, initial encounter



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Code	Description
T46.1X4A	Poisoning by calcium-channel blockers, undetermined, initial encounter
T46.2X1A	Poisoning by other antidysrhythmic drugs, accidental (unintentional), initial encounter
T46.2X2A	Poisoning by other antidysrhythmic drugs, intentional self-harm, initial encounter
T46.2X3A	Poisoning by other antidysrhythmic drugs, assault, initial encounter
T46.2X4A	Poisoning by other antidysrhythmic drugs, undetermined, initial encounter
T46.3X1A	Poisoning by coronary vasodilators, accidental (unintentional), initial encounter
T46.3X2A	Poisoning by coronary vasodilators, intentional self-harm, initial encounter
T46.3X3A	Poisoning by coronary vasodilators, assault, initial encounter
T46.3X4A	Poisoning by coronary vasodilators, undetermined, initial encounter
T46.4X1A	Poisoning by angiotensin-converting-enzyme inhibitors, accidental (unintentional), initial encounter
T46.4X2A	Poisoning by angiotensin-converting-enzyme inhibitors, intentional self-harm, initial encounter
T46.4X3A	Poisoning by angiotensin-converting-enzyme inhibitors, assault, initial encounter
T46.4X4A	Poisoning by angiotensin-converting-enzyme inhibitors, undetermined, initial encounter
T46.5X1A	Poisoning by other antihypertensive drugs, accidental (unintentional), initial encounter
T46.5X2A	Poisoning by other antihypertensive drugs, intentional self-harm, initial encounter
T46.5X3A	Poisoning by other antihypertensive drugs, assault, initial encounter
T46.5X4A	Poisoning by other antihypertensive drugs, undetermined, initial encounter
T46.6X1A	Poisoning by antihyperlipidemic and antiarteriosclerotic drugs, accidental (unintentional), initial encounter
T46.6X2A	Poisoning by antihyperlipidemic and antiarteriosclerotic drugs, intentional self-harm, initial encounter
T46.6X3A	Poisoning by antihyperlipidemic and antiarteriosclerotic drugs, assault, initial encounter
T46.6X4A	Poisoning by antihyperlipidemic and antiarteriosclerotic drugs, undetermined, initial encounter
T46.7X1A	Poisoning by peripheral vasodilators, accidental (unintentional), initial encounter
T46.7X2A	Poisoning by peripheral vasodilators, intentional self-harm, initial encounter
T46.7X3A	Poisoning by peripheral vasodilators, assault, initial encounter
T46.7X4A	Poisoning by peripheral vasodilators, undetermined, initial encounter
T46.8X1A	Poisoning by antivaricose drugs, including sclerosing agents, accidental (unintentional), initial encounter



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Code	Description
T46.8X2A	Poisoning by antivaricose drugs, including sclerosing agents, intentional self-harm, initial encounter
T46.8X3A	Poisoning by antivaricose drugs, including sclerosing agents, assault, initial encounter
T46.8X4A	Poisoning by antivaricose drugs, including sclerosing agents, undetermined, initial encounter
T46.901A	Poisoning by unspecified agents primarily affecting the cardiovascular system, accidental (unintentional), initial encounter
T46.902A	Poisoning by unspecified agents primarily affecting the cardiovascular system, intentional self-harm, initial encounter
T46.903A	Poisoning by unspecified agents primarily affecting the cardiovascular system, assault, initial encounter
T46.904A	Poisoning by unspecified agents primarily affecting the cardiovascular system, undetermined, initial encounter
T46.991A	Poisoning by other agents primarily affecting the cardiovascular system, accidental (unintentional), initial encounter
T46.992A	Poisoning by other agents primarily affecting the cardiovascular system, intentional self-harm, initial encounter
T46.993A	Poisoning by other agents primarily affecting the cardiovascular system, assault, initial encounter
T46.994A	Poisoning by other agents primarily affecting the cardiovascular system, undetermined, initial encounter
T47.0X1A	Poisoning by histamine H2-receptor blockers, accidental (unintentional), initial encounter
T47.0X2A	Poisoning by histamine H2-receptor blockers, intentional self-harm, initial encounter
T47.0X3A	Poisoning by histamine H2-receptor blockers, assault, initial encounter
T47.0X4A	Poisoning by histamine H2-receptor blockers, undetermined, initial encounter
T47.1X1A	Poisoning by other antacids and anti-gastric-secretion drugs, accidental (unintentional), initial encounter
T47.1X2A	Poisoning by other antacids and anti-gastric-secretion drugs, intentional self-harm, initial encounter
T47.1X3A	Poisoning by other antacids and anti-gastric-secretion drugs, assault, initial encounter
T47.1X4A	Poisoning by other antacids and anti-gastric-secretion drugs, undetermined, initial encounter
T47.2X1A	Poisoning by stimulant laxatives, accidental (unintentional), initial encounter
T47.2X2A	Poisoning by stimulant laxatives, intentional self-harm, initial encounter
T47.2X3A	Poisoning by stimulant laxatives, assault, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T47.2X4A	Poisoning by stimulant laxatives, undetermined, initial encounter
T47.3X1A	Poisoning by saline and osmotic laxatives, accidental (unintentional), initial encounter
T47.3X2A	Poisoning by saline and osmotic laxatives, intentional self-harm, initial encounter
T47.3X3A	Poisoning by saline and osmotic laxatives, assault, initial encounter
T47.3X4A	Poisoning by saline and osmotic laxatives, undetermined, initial encounter
T47.4X1A	Poisoning by other laxatives, accidental (unintentional), initial encounter
T47.4X2A	Poisoning by other laxatives, intentional self-harm, initial encounter
T47.4X3A	Poisoning by other laxatives, assault, initial encounter
T47.4X4A	Poisoning by other laxatives, undetermined, initial encounter
T47.5X1A	Poisoning by digestants, accidental (unintentional), initial encounter
T47.5X2A	Poisoning by digestants, intentional self-harm, initial encounter
T47.5X3A	Poisoning by digestants, assault, initial encounter
T47.5X4A	Poisoning by digestants, undetermined, initial encounter
T47.6X1A	Poisoning by antidiarrheal drugs, accidental (unintentional), initial encounter
T47.6X2A	Poisoning by antidiarrheal drugs, intentional self-harm, initial encounter
T47.6X3A	Poisoning by antidiarrheal drugs, assault, initial encounter
T47.6X4A	Poisoning by antidiarrheal drugs, undetermined, initial encounter
T47.7X1A	Poisoning by emetics, accidental (unintentional), initial encounter
T47.7X2A	Poisoning by emetics, intentional self-harm, initial encounter
T47.7X3A	Poisoning by emetics, assault, initial encounter
T47.7X4A	Poisoning by emetics, undetermined, initial encounter
T47.8X1A	Poisoning by other agents primarily affecting gastrointestinal system, accidental (unintentional), initial encounter
T47.8X2A	Poisoning by other agents primarily affecting gastrointestinal system, intentional self-harm, initial encounter
T47.8X3A	Poisoning by other agents primarily affecting gastrointestinal system, assault, initial encounter
T47.8X4A	Poisoning by other agents primarily affecting gastrointestinal system, undetermined, initial encounter
T47.91XA	Poisoning by unspecified agents primarily affecting the gastrointestinal system, accidental (unintentional), initial encounter



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Code	Description
T47.92XA	Poisoning by unspecified agents primarily affecting the gastrointestinal system, intentional self-harm, initial encounter
T47.93XA	Poisoning by unspecified agents primarily affecting the gastrointestinal system, assault, initial encounter
T47.94XA	Poisoning by unspecified agents primarily affecting the gastrointestinal system, undetermined, initial encounter
T48.0X1A	Poisoning by oxytocic drugs, accidental (unintentional), initial encounter
T48.0X2A	Poisoning by oxytocic drugs, intentional self-harm, initial encounter
T48.0X3A	Poisoning by oxytocic drugs, assault, initial encounter
T48.0X4A	Poisoning by oxytocic drugs, undetermined, initial encounter
T48.1X1A	Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], accidental (unintentional), initial encounter
T48.1X2A	Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], intentional self-harm, initial encounter
T48.1X3A	Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], assault, initial encounter
T48.1X4A	Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], undetermined, initial encounter
T48.201A	Poisoning by unspecified drugs acting on muscles, accidental (unintentional), initial encounter
T48.202A	Poisoning by unspecified drugs acting on muscles, intentional self-harm, initial encounter
T48.203A	Poisoning by unspecified drugs acting on muscles, assault, initial encounter
T48.204A	Poisoning by unspecified drugs acting on muscles, undetermined, initial encounter
T48.291A	Poisoning by other drugs acting on muscles, accidental (unintentional), initial encounter
T48.292A	Poisoning by other drugs acting on muscles, intentional self-harm, initial encounter
T48.293A	Poisoning by other drugs acting on muscles, assault, initial encounter
T48.294A	Poisoning by other drugs acting on muscles, undetermined, initial encounter
T48.3X1A	Poisoning by antitussives, accidental (unintentional), initial encounter
T48.3X2A	Poisoning by antitussives, intentional self-harm, initial encounter
T48.3X3A	Poisoning by antitussives, assault, initial encounter
T48.3X4A	Poisoning by antitussives, undetermined, initial encounter
T48.4X1A	Poisoning by expectorants, accidental (unintentional), initial encounter
T48.4X2A	Poisoning by expectorants, intentional self-harm, initial encounter

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***April 2017 Changes
ICD-10-CM Version – Red**

Fu Associates, Ltd.

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Code	Description
T48.4X3A	Poisoning by expectorants, assault, initial encounter
T48.4X4A	Poisoning by expectorants, undetermined, initial encounter
T48.5X1A	Poisoning by other anti-common-cold drugs, accidental (unintentional), initial encounter
T48.5X2A	Poisoning by other anti-common-cold drugs, intentional self-harm, initial encounter
T48.5X3A	Poisoning by other anti-common-cold drugs, assault, initial encounter
T48.5X4A	Poisoning by other anti-common-cold drugs, undetermined, initial encounter
T48.6X1A	Poisoning by antiasthmatics, accidental (unintentional), initial encounter
T48.6X2A	Poisoning by antiasthmatics, intentional self-harm, initial encounter
T48.6X3A	Poisoning by antiasthmatics, assault, initial encounter
T48.6X4A	Poisoning by antiasthmatics, undetermined, initial encounter
T48.901A	Poisoning by unspecified agents primarily acting on the respiratory system, accidental (unintentional), initial encounter
T48.902A	Poisoning by unspecified agents primarily acting on the respiratory system, intentional self-harm, initial encounter
T48.903A	Poisoning by unspecified agents primarily acting on the respiratory system, assault, initial encounter
T48.904A	Poisoning by unspecified agents primarily acting on the respiratory system, undetermined, initial encounter
T48.991A	Poisoning by other agents primarily acting on the respiratory system, accidental (unintentional), initial encounter
T48.992A	Poisoning by other agents primarily acting on the respiratory system, intentional self-harm, initial encounter
T48.993A	Poisoning by other agents primarily acting on the respiratory system, assault, initial encounter
T48.994A	Poisoning by other agents primarily acting on the respiratory system, undetermined, initial encounter
T49.0X1A	Poisoning by local antifungal, anti-infective and anti-inflammatory drugs, accidental (unintentional), initial encounter
T49.0X2A	Poisoning by local antifungal, anti-infective and anti-inflammatory drugs, intentional self-harm, initial encounter
T49.0X3A	Poisoning by local antifungal, anti-infective and anti-inflammatory drugs, assault, initial encounter
T49.0X4A	Poisoning by local antifungal, anti-infective and anti-inflammatory drugs, undetermined, initial encounter



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
T49.1X1A	Poisoning by antipruritics, accidental (unintentional), initial encounter
T49.1X2A	Poisoning by antipruritics, intentional self-harm, initial encounter
T49.1X3A	Poisoning by antipruritics, assault, initial encounter
T49.1X4A	Poisoning by antipruritics, undetermined, initial encounter
T49.2X1A	Poisoning by local astringents and local detergents, accidental (unintentional), initial encounter
T49.2X2A	Poisoning by local astringents and local detergents, intentional self-harm, initial encounter
T49.2X3A	Poisoning by local astringents and local detergents, assault, initial encounter
T49.2X4A	Poisoning by local astringents and local detergents, undetermined, initial encounter
T49.3X1A	Poisoning by emollients, demulcents and protectants, accidental (unintentional), initial encounter
T49.3X2A	Poisoning by emollients, demulcents and protectants, intentional self-harm, initial encounter
T49.3X3A	Poisoning by emollients, demulcents and protectants, assault, initial encounter
T49.3X4A	Poisoning by emollients, demulcents and protectants, undetermined, initial encounter
T49.4X1A	Poisoning by keratolytics, keratoplastics, and other hair treatment drugs and preparations, accidental (unintentional), initial encounter
T49.4X2A	Poisoning by keratolytics, keratoplastics, and other hair treatment drugs and preparations, intentional self-harm, initial encounter
T49.4X3A	Poisoning by keratolytics, keratoplastics, and other hair treatment drugs and preparations, assault, initial encounter
T49.4X4A	Poisoning by keratolytics, keratoplastics, and other hair treatment drugs and preparations, undetermined, initial encounter
T49.5X1A	Poisoning by ophthalmological drugs and preparations, accidental (unintentional), initial encounter
T49.5X2A	Poisoning by ophthalmological drugs and preparations, intentional self-harm, initial encounter
T49.5X3A	Poisoning by ophthalmological drugs and preparations, assault, initial encounter
T49.5X4A	Poisoning by ophthalmological drugs and preparations, undetermined, initial encounter
T49.6X1A	Poisoning by otorhinolaryngological drugs and preparations, accidental (unintentional), initial encounter
T49.6X2A	Poisoning by otorhinolaryngological drugs and preparations, intentional self-harm, initial encounter
T49.6X3A	Poisoning by otorhinolaryngological drugs and preparations, assault, initial encounter



**Medicare National Coverage Determinations (NCD)
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Code	Description
T49.6X4A	Poisoning by otorhinolaryngological drugs and preparations, undetermined, initial encounter
T49.7X1A	Poisoning by dental drugs, topically applied, accidental (unintentional), initial encounter
T49.7X2A	Poisoning by dental drugs, topically applied, intentional self-harm, initial encounter
T49.7X3A	Poisoning by dental drugs, topically applied, assault, initial encounter
T49.7X4A	Poisoning by dental drugs, topically applied, undetermined, initial encounter
T49.8X1A	Poisoning by other topical agents, accidental (unintentional), initial encounter
T49.8X2A	Poisoning by other topical agents, intentional self-harm, initial encounter
T49.8X3A	Poisoning by other topical agents, assault, initial encounter
T49.8X4A	Poisoning by other topical agents, undetermined, initial encounter
T49.91XA	Poisoning by unspecified topical agent, accidental (unintentional), initial encounter
T49.92XA	Poisoning by unspecified topical agent, intentional self-harm, initial encounter
T49.93XA	Poisoning by unspecified topical agent, assault, initial encounter
T49.94XA	Poisoning by unspecified topical agent, undetermined, initial encounter
T50.0X1A	Poisoning by mineralocorticoids and their antagonists, accidental (unintentional), initial encounter
T50.0X2A	Poisoning by mineralocorticoids and their antagonists, intentional self-harm, initial encounter
T50.0X3A	Poisoning by mineralocorticoids and their antagonists, assault, initial encounter
T50.0X4A	Poisoning by mineralocorticoids and their antagonists, undetermined, initial encounter
T50.1X1A	Poisoning by loop [high-ceiling] diuretics, accidental (unintentional), initial encounter
T50.1X2A	Poisoning by loop [high-ceiling] diuretics, intentional self-harm, initial encounter
T50.1X3A	Poisoning by loop [high-ceiling] diuretics, assault, initial encounter
T50.1X4A	Poisoning by loop [high-ceiling] diuretics, undetermined, initial encounter
T50.2X1A	Poisoning by carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, accidental (unintentional), initial encounter
T50.2X2A	Poisoning by carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, intentional self-harm, initial encounter
T50.2X3A	Poisoning by carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, assault, initial encounter
T50.2X4A	Poisoning by carbonic-anhydrase inhibitors, benzothiadiazides and other diuretics, undetermined, initial encounter



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Code	Description
T50.3X1A	Poisoning by electrolytic, caloric and water-balance agents, accidental (unintentional), initial encounter
T50.3X2A	Poisoning by electrolytic, caloric and water-balance agents, intentional self-harm, initial encounter
T50.3X3A	Poisoning by electrolytic, caloric and water-balance agents, assault, initial encounter
T50.3X4A	Poisoning by electrolytic, caloric and water-balance agents, undetermined, initial encounter
T50.4X1A	Poisoning by drugs affecting uric acid metabolism, accidental (unintentional), initial encounter
T50.4X2A	Poisoning by drugs affecting uric acid metabolism, intentional self-harm, initial encounter
T50.4X3A	Poisoning by drugs affecting uric acid metabolism, assault, initial encounter
T50.4X4A	Poisoning by drugs affecting uric acid metabolism, undetermined, initial encounter
T50.5X1A	Poisoning by appetite depressants, accidental (unintentional), initial encounter
T50.5X2A	Poisoning by appetite depressants, intentional self-harm, initial encounter
T50.5X3A	Poisoning by appetite depressants, assault, initial encounter
T50.5X4A	Poisoning by appetite depressants, undetermined, initial encounter
T50.6X1A	Poisoning by antidotes and chelating agents, accidental (unintentional), initial encounter
T50.6X2A	Poisoning by antidotes and chelating agents, intentional self-harm, initial encounter
T50.6X3A	Poisoning by antidotes and chelating agents, assault, initial encounter
T50.6X4A	Poisoning by antidotes and chelating agents, undetermined, initial encounter
T50.7X1A	Poisoning by analeptics and opioid receptor antagonists, accidental (unintentional), initial encounter
T50.7X2A	Poisoning by analeptics and opioid receptor antagonists, intentional self-harm, initial encounter
T50.7X3A	Poisoning by analeptics and opioid receptor antagonists, assault, initial encounter
T50.7X4A	Poisoning by analeptics and opioid receptor antagonists, undetermined, initial encounter
T50.8X1A	Poisoning by diagnostic agents, accidental (unintentional), initial encounter
T50.8X2A	Poisoning by diagnostic agents, intentional self-harm, initial encounter
T50.8X3A	Poisoning by diagnostic agents, assault, initial encounter
T50.8X4A	Poisoning by diagnostic agents, undetermined, initial encounter
T50.901A	Poisoning by unspecified drugs, medicaments and biological substances, accidental (unintentional), initial encounter
T50.902A	Poisoning by unspecified drugs, medicaments and biological substances, intentional self-harm, initial encounter

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Code	Description
T50.903A	Poisoning by unspecified drugs, medicaments and biological substances, assault, initial encounter
T50.904A	Poisoning by unspecified drugs, medicaments and biological substances, undetermined, initial encounter
T50.991A	Poisoning by other drugs, medicaments and biological substances, accidental (unintentional), initial encounter
T50.992A	Poisoning by other drugs, medicaments and biological substances, intentional self-harm, initial encounter
T50.993A	Poisoning by other drugs, medicaments and biological substances, assault, initial encounter
T50.994A	Poisoning by other drugs, medicaments and biological substances, undetermined, initial encounter
T50.A11A	Poisoning by pertussis vaccine, including combinations with a pertussis component, accidental (unintentional), initial encounter
T50.A12A	Poisoning by pertussis vaccine, including combinations with a pertussis component, intentional self-harm, initial encounter
T50.A13A	Poisoning by pertussis vaccine, including combinations with a pertussis component, assault, initial encounter
T50.A14A	Poisoning by pertussis vaccine, including combinations with a pertussis component, undetermined, initial encounter
T50.A21A	Poisoning by mixed bacterial vaccines without a pertussis component, accidental (unintentional), initial encounter
T50.A22A	Poisoning by mixed bacterial vaccines without a pertussis component, intentional self-harm, initial encounter
T50.A23A	Poisoning by mixed bacterial vaccines without a pertussis component, assault, initial encounter
T50.A24A	Poisoning by mixed bacterial vaccines without a pertussis component, undetermined, initial encounter
T50.A91A	Poisoning by other bacterial vaccines, accidental (unintentional), initial encounter
T50.A92A	Poisoning by other bacterial vaccines, intentional self-harm, initial encounter
T50.A93A	Poisoning by other bacterial vaccines, assault, initial encounter
T50.A94A	Poisoning by other bacterial vaccines, undetermined, initial encounter
T50.B11A	Poisoning by smallpox vaccines, accidental (unintentional), initial encounter
T50.B12A	Poisoning by smallpox vaccines, intentional self-harm, initial encounter
T50.B13A	Poisoning by smallpox vaccines, assault, initial encounter

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Code	Description
T50.B14A	Poisoning by smallpox vaccines, undetermined, initial encounter
T50.B91A	Poisoning by other viral vaccines, accidental (unintentional), initial encounter
T50.B92A	Poisoning by other viral vaccines, intentional self-harm, initial encounter
T50.B93A	Poisoning by other viral vaccines, assault, initial encounter
T50.B94A	Poisoning by other viral vaccines, undetermined, initial encounter
T50.Z11A	Poisoning by immunoglobulin, accidental (unintentional), initial encounter
T50.Z12A	Poisoning by immunoglobulin, intentional self-harm, initial encounter
T50.Z13A	Poisoning by immunoglobulin, assault, initial encounter
T50.Z14A	Poisoning by immunoglobulin, undetermined, initial encounter
T50.Z91A	Poisoning by other vaccines and biological substances, accidental (unintentional), initial encounter
T50.Z92A	Poisoning by other vaccines and biological substances, intentional self-harm, initial encounter
T50.Z93A	Poisoning by other vaccines and biological substances, assault, initial encounter
T50.Z94A	Poisoning by other vaccines and biological substances, undetermined, initial encounter
T51.0X1A	Toxic effect of ethanol, accidental (unintentional), initial encounter
T51.0X2A	Toxic effect of ethanol, intentional self-harm, initial encounter
T51.0X3A	Toxic effect of ethanol, assault, initial encounter
T51.0X4A	Toxic effect of ethanol, undetermined, initial encounter
T51.1X1A	Toxic effect of methanol, accidental (unintentional), initial encounter
T51.1X2A	Toxic effect of methanol, intentional self-harm, initial encounter
T51.1X3A	Toxic effect of methanol, assault, initial encounter
T51.1X4A	Toxic effect of methanol, undetermined, initial encounter
T51.2X1A	Toxic effect of 2-Propanol, accidental (unintentional), initial encounter
T51.2X2A	Toxic effect of 2-Propanol, intentional self-harm, initial encounter
T51.2X3A	Toxic effect of 2-Propanol, assault, initial encounter
T51.2X4A	Toxic effect of 2-Propanol, undetermined, initial encounter
T51.3X1A	Toxic effect of fusel oil, accidental (unintentional), initial encounter
T51.3X2A	Toxic effect of fusel oil, intentional self-harm, initial encounter
T51.3X3A	Toxic effect of fusel oil, assault, initial encounter
T51.3X4A	Toxic effect of fusel oil, undetermined, initial encounter

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Code	Description
T51.8X1A	Toxic effect of other alcohols, accidental (unintentional), initial encounter
T51.8X2A	Toxic effect of other alcohols, intentional self-harm, initial encounter
T51.8X3A	Toxic effect of other alcohols, assault, initial encounter
T51.8X4A	Toxic effect of other alcohols, undetermined, initial encounter
T51.91XA	Toxic effect of unspecified alcohol, accidental (unintentional), initial encounter
T51.92XA	Toxic effect of unspecified alcohol, intentional self-harm, initial encounter
T51.93XA	Toxic effect of unspecified alcohol, assault, initial encounter
T51.94XA	Toxic effect of unspecified alcohol, undetermined, initial encounter
T52.0X1A	Toxic effect of petroleum products, accidental (unintentional), initial encounter
T52.0X2A	Toxic effect of petroleum products, intentional self-harm, initial encounter
T52.0X3A	Toxic effect of petroleum products, assault, initial encounter
T52.0X4A	Toxic effect of petroleum products, undetermined, initial encounter
T52.1X1A	Toxic effect of benzene, accidental (unintentional), initial encounter
T52.1X2A	Toxic effect of benzene, intentional self-harm, initial encounter
T52.1X3A	Toxic effect of benzene, assault, initial encounter
T52.1X4A	Toxic effect of benzene, undetermined, initial encounter
T52.2X1A	Toxic effect of homologues of benzene, accidental (unintentional), initial encounter
T52.2X2A	Toxic effect of homologues of benzene, intentional self-harm, initial encounter
T52.2X3A	Toxic effect of homologues of benzene, assault, initial encounter
T52.2X4A	Toxic effect of homologues of benzene, undetermined, initial encounter
T52.3X1A	Toxic effect of glycols, accidental (unintentional), initial encounter
T52.3X2A	Toxic effect of glycols, intentional self-harm, initial encounter
T52.3X3A	Toxic effect of glycols, assault, initial encounter
T52.3X4A	Toxic effect of glycols, undetermined, initial encounter
T52.4X1A	Toxic effect of ketones, accidental (unintentional), initial encounter
T52.4X2A	Toxic effect of ketones, intentional self-harm, initial encounter
T52.4X3A	Toxic effect of ketones, assault, initial encounter
T52.4X4A	Toxic effect of ketones, undetermined, initial encounter
T52.8X1A	Toxic effect of other organic solvents, accidental (unintentional), initial encounter
T52.8X2A	Toxic effect of other organic solvents, intentional self-harm, initial encounter



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Code	Description
T52.8X3A	Toxic effect of other organic solvents, assault, initial encounter
T52.8X4A	Toxic effect of other organic solvents, undetermined, initial encounter
T52.91XA	Toxic effect of unspecified organic solvent, accidental (unintentional), initial encounter
T52.92XA	Toxic effect of unspecified organic solvent, intentional self-harm, initial encounter
T52.93XA	Toxic effect of unspecified organic solvent, assault, initial encounter
T52.94XA	Toxic effect of unspecified organic solvent, undetermined, initial encounter
T53.0X1A	Toxic effect of carbon tetrachloride, accidental (unintentional), initial encounter
T53.0X2A	Toxic effect of carbon tetrachloride, intentional self-harm, initial encounter
T53.0X3A	Toxic effect of carbon tetrachloride, assault, initial encounter
T53.0X4A	Toxic effect of carbon tetrachloride, undetermined, initial encounter
T53.1X1A	Toxic effect of chloroform, accidental (unintentional), initial encounter
T53.1X2A	Toxic effect of chloroform, intentional self-harm, initial encounter
T53.1X3A	Toxic effect of chloroform, assault, initial encounter
T53.1X4A	Toxic effect of chloroform, undetermined, initial encounter
T53.2X1A	Toxic effect of trichloroethylene, accidental (unintentional), initial encounter
T53.2X2A	Toxic effect of trichloroethylene, intentional self-harm, initial encounter
T53.2X3A	Toxic effect of trichloroethylene, assault, initial encounter
T53.2X4A	Toxic effect of trichloroethylene, undetermined, initial encounter
T53.3X1A	Toxic effect of tetrachloroethylene, accidental (unintentional), initial encounter
T53.3X2A	Toxic effect of tetrachloroethylene, intentional self-harm, initial encounter
T53.3X3A	Toxic effect of tetrachloroethylene, assault, initial encounter
T53.3X4A	Toxic effect of tetrachloroethylene, undetermined, initial encounter
T53.4X1A	Toxic effect of dichloromethane, accidental (unintentional), initial encounter
T53.4X2A	Toxic effect of dichloromethane, intentional self-harm, initial encounter
T53.4X3A	Toxic effect of dichloromethane, assault, initial encounter
T53.4X4A	Toxic effect of dichloromethane, undetermined, initial encounter
T53.5X1A	Toxic effect of chlorofluorocarbons, accidental (unintentional), initial encounter
T53.5X2A	Toxic effect of chlorofluorocarbons, intentional self-harm, initial encounter
T53.5X3A	Toxic effect of chlorofluorocarbons, assault, initial encounter
T53.5X4A	Toxic effect of chlorofluorocarbons, undetermined, initial encounter



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Code	Description
T53.6X1A	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, accidental (unintentional), initial encounter
T53.6X2A	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, intentional self-harm, initial encounter
T53.6X3A	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, assault, initial encounter
T53.6X4A	Toxic effect of other halogen derivatives of aliphatic hydrocarbons, undetermined, initial encounter
T53.7X1A	Toxic effect of other halogen derivatives of aromatic hydrocarbons, accidental (unintentional), initial encounter
T53.7X2A	Toxic effect of other halogen derivatives of aromatic hydrocarbons, intentional self-harm, initial encounter
T53.7X3A	Toxic effect of other halogen derivatives of aromatic hydrocarbons, assault, initial encounter
T53.7X4A	Toxic effect of other halogen derivatives of aromatic hydrocarbons, undetermined, initial encounter
T53.91XA	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, accidental (unintentional), initial encounter
T53.92XA	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, intentional self-harm, initial encounter
T53.93XA	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, assault, initial encounter
T53.94XA	Toxic effect of unspecified halogen derivatives of aliphatic and aromatic hydrocarbons, undetermined, initial encounter
T54.0X1A	Toxic effect of phenol and phenol homologues, accidental (unintentional), initial encounter
T54.0X2A	Toxic effect of phenol and phenol homologues, intentional self-harm, initial encounter
T54.0X3A	Toxic effect of phenol and phenol homologues, assault, initial encounter
T54.0X4A	Toxic effect of phenol and phenol homologues, undetermined, initial encounter
T54.1X1A	Toxic effect of other corrosive organic compounds, accidental (unintentional), initial encounter
T54.1X2A	Toxic effect of other corrosive organic compounds, intentional self-harm, initial encounter
T54.1X3A	Toxic effect of other corrosive organic compounds, assault, initial encounter
T54.1X4A	Toxic effect of other corrosive organic compounds, undetermined, initial encounter
T54.2X1A	Toxic effect of corrosive acids and acid-like substances, accidental (unintentional), initial encounter

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Code	Description
T54.2X2A	Toxic effect of corrosive acids and acid-like substances, intentional self-harm, initial encounter
T54.2X3A	Toxic effect of corrosive acids and acid-like substances, assault, initial encounter
T54.2X4A	Toxic effect of corrosive acids and acid-like substances, undetermined, initial encounter
T54.3X1A	Toxic effect of corrosive alkalis and alkali-like substances, accidental (unintentional), initial encounter
T54.3X2A	Toxic effect of corrosive alkalis and alkali-like substances, intentional self-harm, initial encounter
T54.3X3A	Toxic effect of corrosive alkalis and alkali-like substances, assault, initial encounter
T54.3X4A	Toxic effect of corrosive alkalis and alkali-like substances, undetermined, initial encounter
T54.91XA	Toxic effect of unspecified corrosive substance, accidental (unintentional), initial encounter
T54.92XA	Toxic effect of unspecified corrosive substance, intentional self-harm, initial encounter
T54.93XA	Toxic effect of unspecified corrosive substance, assault, initial encounter
T54.94XA	Toxic effect of unspecified corrosive substance, undetermined, initial encounter
T55.0X1A	Toxic effect of soaps, accidental (unintentional), initial encounter
T55.0X2A	Toxic effect of soaps, intentional self-harm, initial encounter
T55.0X3A	Toxic effect of soaps, assault, initial encounter
T55.0X4A	Toxic effect of soaps, undetermined, initial encounter
T55.1X1A	Toxic effect of detergents, accidental (unintentional), initial encounter
T55.1X2A	Toxic effect of detergents, intentional self-harm, initial encounter
T55.1X3A	Toxic effect of detergents, assault, initial encounter
T55.1X4A	Toxic effect of detergents, undetermined, initial encounter
T56.0X1A	Toxic effect of lead and its compounds, accidental (unintentional), initial encounter
T56.0X2A	Toxic effect of lead and its compounds, intentional self-harm, initial encounter
T56.0X3A	Toxic effect of lead and its compounds, assault, initial encounter
T56.0X4A	Toxic effect of lead and its compounds, undetermined, initial encounter
T56.1X1A	Toxic effect of mercury and its compounds, accidental (unintentional), initial encounter
T56.1X2A	Toxic effect of mercury and its compounds, intentional self-harm, initial encounter
T56.1X3A	Toxic effect of mercury and its compounds, assault, initial encounter
T56.1X4A	Toxic effect of mercury and its compounds, undetermined, initial encounter
T56.2X1A	Toxic effect of chromium and its compounds, accidental (unintentional), initial encounter



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Code	Description
T56.2X2A	Toxic effect of chromium and its compounds, intentional self-harm, initial encounter
T56.2X3A	Toxic effect of chromium and its compounds, assault, initial encounter
T56.2X4A	Toxic effect of chromium and its compounds, undetermined, initial encounter
T56.3X1A	Toxic effect of cadmium and its compounds, accidental (unintentional), initial encounter
T56.3X2A	Toxic effect of cadmium and its compounds, intentional self-harm, initial encounter
T56.3X3A	Toxic effect of cadmium and its compounds, assault, initial encounter
T56.3X4A	Toxic effect of cadmium and its compounds, undetermined, initial encounter
T56.4X1A	Toxic effect of copper and its compounds, accidental (unintentional), initial encounter
T56.4X2A	Toxic effect of copper and its compounds, intentional self-harm, initial encounter
T56.4X3A	Toxic effect of copper and its compounds, assault, initial encounter
T56.4X4A	Toxic effect of copper and its compounds, undetermined, initial encounter
T56.5X1A	Toxic effect of zinc and its compounds, accidental (unintentional), initial encounter
T56.5X2A	Toxic effect of zinc and its compounds, intentional self-harm, initial encounter
T56.5X3A	Toxic effect of zinc and its compounds, assault, initial encounter
T56.5X4A	Toxic effect of zinc and its compounds, undetermined, initial encounter
T56.6X1A	Toxic effect of tin and its compounds, accidental (unintentional), initial encounter
T56.6X2A	Toxic effect of tin and its compounds, intentional self-harm, initial encounter
T56.6X3A	Toxic effect of tin and its compounds, assault, initial encounter
T56.6X4A	Toxic effect of tin and its compounds, undetermined, initial encounter
T56.7X1A	Toxic effect of beryllium and its compounds, accidental (unintentional), initial encounter
T56.7X2A	Toxic effect of beryllium and its compounds, intentional self-harm, initial encounter
T56.7X3A	Toxic effect of beryllium and its compounds, assault, initial encounter
T56.7X4A	Toxic effect of beryllium and its compounds, undetermined, initial encounter
T56.811A	Toxic effect of thallium, accidental (unintentional), initial encounter
T56.812A	Toxic effect of thallium, intentional self-harm, initial encounter
T56.813A	Toxic effect of thallium, assault, initial encounter
T56.814A	Toxic effect of thallium, undetermined, initial encounter
T56.891A	Toxic effect of other metals, accidental (unintentional), initial encounter
T56.892A	Toxic effect of other metals, intentional self-harm, initial encounter
T56.893A	Toxic effect of other metals, assault, initial encounter



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Code	Description
T56.894A	Toxic effect of other metals, undetermined, initial encounter
T56.91XA	Toxic effect of unspecified metal, accidental (unintentional), initial encounter
T56.92XA	Toxic effect of unspecified metal, intentional self-harm, initial encounter
T56.93XA	Toxic effect of unspecified metal, assault, initial encounter
T56.94XA	Toxic effect of unspecified metal, undetermined, initial encounter
T57.0X1A	Toxic effect of arsenic and its compounds, accidental (unintentional), initial encounter
T57.0X2A	Toxic effect of arsenic and its compounds, intentional self-harm, initial encounter
T57.0X3A	Toxic effect of arsenic and its compounds, assault, initial encounter
T57.0X4A	Toxic effect of arsenic and its compounds, undetermined, initial encounter
T57.1X1A	Toxic effect of phosphorus and its compounds, accidental (unintentional), initial encounter
T57.1X2A	Toxic effect of phosphorus and its compounds, intentional self-harm, initial encounter
T57.1X3A	Toxic effect of phosphorus and its compounds, assault, initial encounter
T57.1X4A	Toxic effect of phosphorus and its compounds, undetermined, initial encounter
T57.2X1A	Toxic effect of manganese and its compounds, accidental (unintentional), initial encounter
T57.2X2A	Toxic effect of manganese and its compounds, intentional self-harm, initial encounter
T57.2X3A	Toxic effect of manganese and its compounds, assault, initial encounter
T57.2X4A	Toxic effect of manganese and its compounds, undetermined, initial encounter
T57.3X1A	Toxic effect of hydrogen cyanide, accidental (unintentional), initial encounter
T57.3X2A	Toxic effect of hydrogen cyanide, intentional self-harm, initial encounter
T57.3X3A	Toxic effect of hydrogen cyanide, assault, initial encounter
T57.3X4A	Toxic effect of hydrogen cyanide, undetermined, initial encounter
T57.8X1A	Toxic effect of other specified inorganic substances, accidental (unintentional), initial encounter
T57.8X2A	Toxic effect of other specified inorganic substances, intentional self-harm, initial encounter
T57.8X3A	Toxic effect of other specified inorganic substances, assault, initial encounter
T57.8X4A	Toxic effect of other specified inorganic substances, undetermined, initial encounter
T58.01XA	Toxic effect of carbon monoxide from motor vehicle exhaust, accidental (unintentional), initial encounter
T58.02XA	Toxic effect of carbon monoxide from motor vehicle exhaust, intentional self-harm, initial encounter
T58.03XA	Toxic effect of carbon monoxide from motor vehicle exhaust, assault, initial encounter



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Code	Description
T58.04XA	Toxic effect of carbon monoxide from motor vehicle exhaust, undetermined, initial encounter
T58.11XA	Toxic effect of carbon monoxide from utility gas, accidental (unintentional), initial encounter
T58.12XA	Toxic effect of carbon monoxide from utility gas, intentional self-harm, initial encounter
T58.13XA	Toxic effect of carbon monoxide from utility gas, assault, initial encounter
T58.14XA	Toxic effect of carbon monoxide from utility gas, undetermined, initial encounter
T58.2X1A	Toxic effect of carbon monoxide from incomplete combustion of other domestic fuels, accidental (unintentional), initial encounter
T58.2X2A	Toxic effect of carbon monoxide from incomplete combustion of other domestic fuels, intentional self-harm, initial encounter
T58.2X3A	Toxic effect of carbon monoxide from incomplete combustion of other domestic fuels, assault, initial encounter
T58.2X4A	Toxic effect of carbon monoxide from incomplete combustion of other domestic fuels, undetermined, initial encounter
T58.8X1A	Toxic effect of carbon monoxide from other source, accidental (unintentional), initial encounter
T58.8X2A	Toxic effect of carbon monoxide from other source, intentional self-harm, initial encounter
T58.8X3A	Toxic effect of carbon monoxide from other source, assault, initial encounter
T58.8X4A	Toxic effect of carbon monoxide from other source, undetermined, initial encounter
T58.91XA	Toxic effect of carbon monoxide from unspecified source, accidental (unintentional), initial encounter
T58.92XA	Toxic effect of carbon monoxide from unspecified source, intentional self-harm, initial encounter
T58.93XA	Toxic effect of carbon monoxide from unspecified source, assault, initial encounter
T58.94XA	Toxic effect of carbon monoxide from unspecified source, undetermined, initial encounter
T59.0X1A	Toxic effect of nitrogen oxides, accidental (unintentional), initial encounter
T59.0X2A	Toxic effect of nitrogen oxides, intentional self-harm, initial encounter
T59.0X3A	Toxic effect of nitrogen oxides, assault, initial encounter
T59.0X4A	Toxic effect of nitrogen oxides, undetermined, initial encounter
T59.1X1A	Toxic effect of sulfur dioxide, accidental (unintentional), initial encounter
T59.1X2A	Toxic effect of sulfur dioxide, intentional self-harm, initial encounter
T59.1X3A	Toxic effect of sulfur dioxide, assault, initial encounter
T59.1X4A	Toxic effect of sulfur dioxide, undetermined, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T59.2X1A	Toxic effect of formaldehyde, accidental (unintentional), initial encounter
T59.2X2A	Toxic effect of formaldehyde, intentional self-harm, initial encounter
T59.2X3A	Toxic effect of formaldehyde, assault, initial encounter
T59.2X4A	Toxic effect of formaldehyde, undetermined, initial encounter
T59.3X1A	Toxic effect of lacrimogenic gas, accidental (unintentional), initial encounter
T59.3X2A	Toxic effect of lacrimogenic gas, intentional self-harm, initial encounter
T59.3X3A	Toxic effect of lacrimogenic gas, assault, initial encounter
T59.3X4A	Toxic effect of lacrimogenic gas, undetermined, initial encounter
T59.4X1A	Toxic effect of chlorine gas, accidental (unintentional), initial encounter
T59.4X2A	Toxic effect of chlorine gas, intentional self-harm, initial encounter
T59.4X3A	Toxic effect of chlorine gas, assault, initial encounter
T59.4X4A	Toxic effect of chlorine gas, undetermined, initial encounter
T59.5X1A	Toxic effect of fluorine gas and hydrogen fluoride, accidental (unintentional), initial encounter
T59.5X2A	Toxic effect of fluorine gas and hydrogen fluoride, intentional self-harm, initial encounter
T59.5X3A	Toxic effect of fluorine gas and hydrogen fluoride, assault, initial encounter
T59.5X4A	Toxic effect of fluorine gas and hydrogen fluoride, undetermined, initial encounter
T59.6X1A	Toxic effect of hydrogen sulfide, accidental (unintentional), initial encounter
T59.6X2A	Toxic effect of hydrogen sulfide, intentional self-harm, initial encounter
T59.6X3A	Toxic effect of hydrogen sulfide, assault, initial encounter
T59.6X4A	Toxic effect of hydrogen sulfide, undetermined, initial encounter
T59.7X1A	Toxic effect of carbon dioxide, accidental (unintentional), initial encounter
T59.7X2A	Toxic effect of carbon dioxide, intentional self-harm, initial encounter
T59.7X3A	Toxic effect of carbon dioxide, assault, initial encounter
T59.7X4A	Toxic effect of carbon dioxide, undetermined, initial encounter
T59.811A	Toxic effect of smoke, accidental (unintentional), initial encounter
T59.812A	Toxic effect of smoke, intentional self-harm, initial encounter
T59.813A	Toxic effect of smoke, assault, initial encounter
T59.814A	Toxic effect of smoke, undetermined, initial encounter
T59.891A	Toxic effect of other specified gases, fumes and vapors, accidental (unintentional), initial encounter



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
T59.892A	Toxic effect of other specified gases, fumes and vapors, intentional self-harm, initial encounter
T59.893A	Toxic effect of other specified gases, fumes and vapors, assault, initial encounter
T59.894A	Toxic effect of other specified gases, fumes and vapors, undetermined, initial encounter
T59.91XA	Toxic effect of unspecified gases, fumes and vapors, accidental (unintentional), initial encounter
T59.92XA	Toxic effect of unspecified gases, fumes and vapors, intentional self-harm, initial encounter
T59.93XA	Toxic effect of unspecified gases, fumes and vapors, assault, initial encounter
T59.94XA	Toxic effect of unspecified gases, fumes and vapors, undetermined, initial encounter
T60.0X1A	Toxic effect of organophosphate and carbamate insecticides, accidental (unintentional), initial encounter
T60.0X2A	Toxic effect of organophosphate and carbamate insecticides, intentional self-harm, initial encounter
T60.0X3A	Toxic effect of organophosphate and carbamate insecticides, assault, initial encounter
T60.0X4A	Toxic effect of organophosphate and carbamate insecticides, undetermined, initial encounter
T60.1X1A	Toxic effect of halogenated insecticides, accidental (unintentional), initial encounter
T60.1X2A	Toxic effect of halogenated insecticides, intentional self-harm, initial encounter
T60.1X3A	Toxic effect of halogenated insecticides, assault, initial encounter
T60.1X4A	Toxic effect of halogenated insecticides, undetermined, initial encounter
T60.2X1A	Toxic effect of other insecticides, accidental (unintentional), initial encounter
T60.2X2A	Toxic effect of other insecticides, intentional self-harm, initial encounter
T60.2X3A	Toxic effect of other insecticides, assault, initial encounter
T60.2X4A	Toxic effect of other insecticides, undetermined, initial encounter
T60.3X1A	Toxic effect of herbicides and fungicides, accidental (unintentional), initial encounter
T60.3X2A	Toxic effect of herbicides and fungicides, intentional self-harm, initial encounter
T60.3X3A	Toxic effect of herbicides and fungicides, assault, initial encounter
T60.3X4A	Toxic effect of herbicides and fungicides, undetermined, initial encounter
T60.4X1A	Toxic effect of rodenticides, accidental (unintentional), initial encounter
T60.4X2A	Toxic effect of rodenticides, intentional self-harm, initial encounter
T60.4X3A	Toxic effect of rodenticides, assault, initial encounter
T60.4X4A	Toxic effect of rodenticides, undetermined, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T60.8X1A	Toxic effect of other pesticides, accidental (unintentional), initial encounter
T60.8X2A	Toxic effect of other pesticides, intentional self-harm, initial encounter
T60.8X3A	Toxic effect of other pesticides, assault, initial encounter
T60.8X4A	Toxic effect of other pesticides, undetermined, initial encounter
T60.91XA	Toxic effect of unspecified pesticide, accidental (unintentional), initial encounter
T60.92XA	Toxic effect of unspecified pesticide, intentional self-harm, initial encounter
T60.93XA	Toxic effect of unspecified pesticide, assault, initial encounter
T60.94XA	Toxic effect of unspecified pesticide, undetermined, initial encounter
T61.01XA	Ciguatera fish poisoning, accidental (unintentional), initial encounter
T61.02XA	Ciguatera fish poisoning, intentional self-harm, initial encounter
T61.03XA	Ciguatera fish poisoning, assault, initial encounter
T61.04XA	Ciguatera fish poisoning, undetermined, initial encounter
T61.11XA	Scombroid fish poisoning, accidental (unintentional), initial encounter
T61.12XA	Scombroid fish poisoning, intentional self-harm, initial encounter
T61.13XA	Scombroid fish poisoning, assault, initial encounter
T61.14XA	Scombroid fish poisoning, undetermined, initial encounter
T61.771A	Other fish poisoning, accidental (unintentional), initial encounter
T61.772A	Other fish poisoning, intentional self-harm, initial encounter
T61.773A	Other fish poisoning, assault, initial encounter
T61.774A	Other fish poisoning, undetermined, initial encounter
T61.781A	Other shellfish poisoning, accidental (unintentional), initial encounter
T61.782A	Other shellfish poisoning, intentional self-harm, initial encounter
T61.783A	Other shellfish poisoning, assault, initial encounter
T61.784A	Other shellfish poisoning, undetermined, initial encounter
T61.8X1A	Toxic effect of other seafood, accidental (unintentional), initial encounter
T61.8X2A	Toxic effect of other seafood, intentional self-harm, initial encounter
T61.8X3A	Toxic effect of other seafood, assault, initial encounter
T61.8X4A	Toxic effect of other seafood, undetermined, initial encounter
T61.91XA	Toxic effect of unspecified seafood, accidental (unintentional), initial encounter
T61.92XA	Toxic effect of unspecified seafood, intentional self-harm, initial encounter



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Coding Policy Manual and Change Report (ICD-10-CM)**

Code	Description
T61.93XA	Toxic effect of unspecified seafood, assault, initial encounter
T61.94XA	Toxic effect of unspecified seafood, undetermined, initial encounter
T62.0X1A	Toxic effect of ingested mushrooms, accidental (unintentional), initial encounter
T62.0X2A	Toxic effect of ingested mushrooms, intentional self-harm, initial encounter
T62.0X3A	Toxic effect of ingested mushrooms, assault, initial encounter
T62.0X4A	Toxic effect of ingested mushrooms, undetermined, initial encounter
T62.1X1A	Toxic effect of ingested berries, accidental (unintentional), initial encounter
T62.1X2A	Toxic effect of ingested berries, intentional self-harm, initial encounter
T62.1X3A	Toxic effect of ingested berries, assault, initial encounter
T62.1X4A	Toxic effect of ingested berries, undetermined, initial encounter
T62.2X1A	Toxic effect of other ingested (parts of) plant(s), accidental (unintentional), initial encounter
T62.2X2A	Toxic effect of other ingested (parts of) plant(s), intentional self-harm, initial encounter
T62.2X3A	Toxic effect of other ingested (parts of) plant(s), assault, initial encounter
T62.2X4A	Toxic effect of other ingested (parts of) plant(s), undetermined, initial encounter
T62.8X1A	Toxic effect of other specified noxious substances eaten as food, accidental (unintentional), initial encounter
T62.8X2A	Toxic effect of other specified noxious substances eaten as food, intentional self-harm, initial encounter
T62.8X3A	Toxic effect of other specified noxious substances eaten as food, assault, initial encounter
T62.8X4A	Toxic effect of other specified noxious substances eaten as food, undetermined, initial encounter
T62.91XA	Toxic effect of unspecified noxious substance eaten as food, accidental (unintentional), initial encounter
T62.92XA	Toxic effect of unspecified noxious substance eaten as food, intentional self-harm, initial encounter
T62.93XA	Toxic effect of unspecified noxious substance eaten as food, assault, initial encounter
T62.94XA	Toxic effect of unspecified noxious substance eaten as food, undetermined, initial encounter
T63.001A	Toxic effect of unspecified snake venom, accidental (unintentional), initial encounter
T63.002A	Toxic effect of unspecified snake venom, intentional self-harm, initial encounter
T63.003A	Toxic effect of unspecified snake venom, assault, initial encounter
T63.004A	Toxic effect of unspecified snake venom, undetermined, initial encounter



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Code	Description
T63.011A	Toxic effect of rattlesnake venom, accidental (unintentional), initial encounter
T63.012A	Toxic effect of rattlesnake venom, intentional self-harm, initial encounter
T63.013A	Toxic effect of rattlesnake venom, assault, initial encounter
T63.014A	Toxic effect of rattlesnake venom, undetermined, initial encounter
T63.021A	Toxic effect of coral snake venom, accidental (unintentional), initial encounter
T63.022A	Toxic effect of coral snake venom, intentional self-harm, initial encounter
T63.023A	Toxic effect of coral snake venom, assault, initial encounter
T63.024A	Toxic effect of coral snake venom, undetermined, initial encounter
T63.031A	Toxic effect of taipan venom, accidental (unintentional), initial encounter
T63.032A	Toxic effect of taipan venom, intentional self-harm, initial encounter
T63.033A	Toxic effect of taipan venom, assault, initial encounter
T63.034A	Toxic effect of taipan venom, undetermined, initial encounter
T63.041A	Toxic effect of cobra venom, accidental (unintentional), initial encounter
T63.042A	Toxic effect of cobra venom, intentional self-harm, initial encounter
T63.043A	Toxic effect of cobra venom, assault, initial encounter
T63.044A	Toxic effect of cobra venom, undetermined, initial encounter
T63.061A	Toxic effect of venom of other North and South American snake, accidental (unintentional), initial encounter
T63.062A	Toxic effect of venom of other North and South American snake, intentional self-harm, initial encounter
T63.063A	Toxic effect of venom of other North and South American snake, assault, initial encounter
T63.064A	Toxic effect of venom of other North and South American snake, undetermined, initial encounter
T63.071A	Toxic effect of venom of other Australian snake, accidental (unintentional), initial encounter
T63.072A	Toxic effect of venom of other Australian snake, intentional self-harm, initial encounter
T63.073A	Toxic effect of venom of other Australian snake, assault, initial encounter
T63.074A	Toxic effect of venom of other Australian snake, undetermined, initial encounter
T63.081A	Toxic effect of venom of other African and Asian snake, accidental (unintentional), initial encounter
T63.082A	Toxic effect of venom of other African and Asian snake, intentional self-harm, initial encounter
T63.083A	Toxic effect of venom of other African and Asian snake, assault, initial encounter

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Code	Description
T63.084A	Toxic effect of venom of other African and Asian snake, undetermined, initial encounter
T63.091A	Toxic effect of venom of other snake, accidental (unintentional), initial encounter
T63.092A	Toxic effect of venom of other snake, intentional self-harm, initial encounter
T63.093A	Toxic effect of venom of other snake, assault, initial encounter
T63.094A	Toxic effect of venom of other snake, undetermined, initial encounter
T63.111A	Toxic effect of venom of gila monster, accidental (unintentional), initial encounter
T63.112A	Toxic effect of venom of gila monster, intentional self-harm, initial encounter
T63.113A	Toxic effect of venom of gila monster, assault, initial encounter
T63.114A	Toxic effect of venom of gila monster, undetermined, initial encounter
T63.121A	Toxic effect of venom of other venomous lizard, accidental (unintentional), initial encounter
T63.122A	Toxic effect of venom of other venomous lizard, intentional self-harm, initial encounter
T63.123A	Toxic effect of venom of other venomous lizard, assault, initial encounter
T63.124A	Toxic effect of venom of other venomous lizard, undetermined, initial encounter
T63.191A	Toxic effect of venom of other reptiles, accidental (unintentional), initial encounter
T63.192A	Toxic effect of venom of other reptiles, intentional self-harm, initial encounter
T63.193A	Toxic effect of venom of other reptiles, assault, initial encounter
T63.194A	Toxic effect of venom of other reptiles, undetermined, initial encounter
T63.2X1A	Toxic effect of venom of scorpion, accidental (unintentional), initial encounter
T63.2X2A	Toxic effect of venom of scorpion, intentional self-harm, initial encounter
T63.2X3A	Toxic effect of venom of scorpion, assault, initial encounter
T63.2X4A	Toxic effect of venom of scorpion, undetermined, initial encounter
T63.301A	Toxic effect of unspecified spider venom, accidental (unintentional), initial encounter
T63.302A	Toxic effect of unspecified spider venom, intentional self-harm, initial encounter
T63.303A	Toxic effect of unspecified spider venom, assault, initial encounter
T63.304A	Toxic effect of unspecified spider venom, undetermined, initial encounter
T63.311A	Toxic effect of venom of black widow spider, accidental (unintentional), initial encounter
T63.312A	Toxic effect of venom of black widow spider, intentional self-harm, initial encounter
T63.313A	Toxic effect of venom of black widow spider, assault, initial encounter
T63.314A	Toxic effect of venom of black widow spider, undetermined, initial encounter
T63.321A	Toxic effect of venom of tarantula, accidental (unintentional), initial encounter



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Code	Description
T63.322A	Toxic effect of venom of tarantula, intentional self-harm, initial encounter
T63.323A	Toxic effect of venom of tarantula, assault, initial encounter
T63.324A	Toxic effect of venom of tarantula, undetermined, initial encounter
T63.331A	Toxic effect of venom of brown recluse spider, accidental (unintentional), initial encounter
T63.332A	Toxic effect of venom of brown recluse spider, intentional self-harm, initial encounter
T63.333A	Toxic effect of venom of brown recluse spider, assault, initial encounter
T63.334A	Toxic effect of venom of brown recluse spider, undetermined, initial encounter
T63.391A	Toxic effect of venom of other spider, accidental (unintentional), initial encounter
T63.392A	Toxic effect of venom of other spider, intentional self-harm, initial encounter
T63.393A	Toxic effect of venom of other spider, assault, initial encounter
T63.394A	Toxic effect of venom of other spider, undetermined, initial encounter
T63.411A	Toxic effect of venom of centipedes and venomous millipedes, accidental (unintentional), initial encounter
T63.412A	Toxic effect of venom of centipedes and venomous millipedes, intentional self-harm, initial encounter
T63.413A	Toxic effect of venom of centipedes and venomous millipedes, assault, initial encounter
T63.414A	Toxic effect of venom of centipedes and venomous millipedes, undetermined, initial encounter
T63.421A	Toxic effect of venom of ants, accidental (unintentional), initial encounter
T63.422A	Toxic effect of venom of ants, intentional self-harm, initial encounter
T63.423A	Toxic effect of venom of ants, assault, initial encounter
T63.424A	Toxic effect of venom of ants, undetermined, initial encounter
T63.431A	Toxic effect of venom of caterpillars, accidental (unintentional), initial encounter
T63.432A	Toxic effect of venom of caterpillars, intentional self-harm, initial encounter
T63.433A	Toxic effect of venom of caterpillars, assault, initial encounter
T63.434A	Toxic effect of venom of caterpillars, undetermined, initial encounter
T63.441A	Toxic effect of venom of bees, accidental (unintentional), initial encounter
T63.442A	Toxic effect of venom of bees, intentional self-harm, initial encounter
T63.443A	Toxic effect of venom of bees, assault, initial encounter
T63.444A	Toxic effect of venom of bees, undetermined, initial encounter
T63.451A	Toxic effect of venom of hornets, accidental (unintentional), initial encounter



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Code	Description
T63.452A	Toxic effect of venom of hornets, intentional self-harm, initial encounter
T63.453A	Toxic effect of venom of hornets, assault, initial encounter
T63.454A	Toxic effect of venom of hornets, undetermined, initial encounter
T63.461A	Toxic effect of venom of wasps, accidental (unintentional), initial encounter
T63.462A	Toxic effect of venom of wasps, intentional self-harm, initial encounter
T63.463A	Toxic effect of venom of wasps, assault, initial encounter
T63.464A	Toxic effect of venom of wasps, undetermined, initial encounter
T63.481A	Toxic effect of venom of other arthropod, accidental (unintentional), initial encounter
T63.482A	Toxic effect of venom of other arthropod, intentional self-harm, initial encounter
T63.483A	Toxic effect of venom of other arthropod, assault, initial encounter
T63.484A	Toxic effect of venom of other arthropod, undetermined, initial encounter
T63.511A	Toxic effect of contact with stingray, accidental (unintentional), initial encounter
T63.512A	Toxic effect of contact with stingray, intentional self-harm, initial encounter
T63.513A	Toxic effect of contact with stingray, assault, initial encounter
T63.514A	Toxic effect of contact with stingray, undetermined, initial encounter
T63.591A	Toxic effect of contact with other venomous fish, accidental (unintentional), initial encounter
T63.592A	Toxic effect of contact with other venomous fish, intentional self-harm, initial encounter
T63.593A	Toxic effect of contact with other venomous fish, assault, initial encounter
T63.594A	Toxic effect of contact with other venomous fish, undetermined, initial encounter
T63.611A	Toxic effect of contact with Portugese Man-o-war, accidental (unintentional), initial encounter
T63.612A	Toxic effect of contact with Portugese Man-o-war, intentional self-harm, initial encounter
T63.613A	Toxic effect of contact with Portugese Man-o-war, assault, initial encounter
T63.614A	Toxic effect of contact with Portugese Man-o-war, undetermined, initial encounter
T63.621A	Toxic effect of contact with other jellyfish, accidental (unintentional), initial encounter
T63.622A	Toxic effect of contact with other jellyfish, intentional self-harm, initial encounter
T63.623A	Toxic effect of contact with other jellyfish, assault, initial encounter
T63.624A	Toxic effect of contact with other jellyfish, undetermined, initial encounter
T63.631A	Toxic effect of contact with sea anemone, accidental (unintentional), initial encounter
T63.632A	Toxic effect of contact with sea anemone, intentional self-harm, initial encounter

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Code	Description
T63.633A	Toxic effect of contact with sea anemone, assault, initial encounter
T63.634A	Toxic effect of contact with sea anemone, undetermined, initial encounter
T63.691A	Toxic effect of contact with other venomous marine animals, accidental (unintentional), initial encounter
T63.692A	Toxic effect of contact with other venomous marine animals, intentional self-harm, initial encounter
T63.693A	Toxic effect of contact with other venomous marine animals, assault, initial encounter
T63.694A	Toxic effect of contact with other venomous marine animals, undetermined, initial encounter
T63.711A	Toxic effect of contact with venomous marine plant, accidental (unintentional), initial encounter
T63.712A	Toxic effect of contact with venomous marine plant, intentional self-harm, initial encounter
T63.713A	Toxic effect of contact with venomous marine plant, assault, initial encounter
T63.714A	Toxic effect of contact with venomous marine plant, undetermined, initial encounter
T63.791A	Toxic effect of contact with other venomous plant, accidental (unintentional), initial encounter
T63.792A	Toxic effect of contact with other venomous plant, intentional self-harm, initial encounter
T63.793A	Toxic effect of contact with other venomous plant, assault, initial encounter
T63.794A	Toxic effect of contact with other venomous plant, undetermined, initial encounter
T63.811A	Toxic effect of contact with venomous frog, accidental (unintentional), initial encounter
T63.812A	Toxic effect of contact with venomous frog, intentional self-harm, initial encounter
T63.813A	Toxic effect of contact with venomous frog, assault, initial encounter
T63.814A	Toxic effect of contact with venomous frog, undetermined, initial encounter
T63.821A	Toxic effect of contact with venomous toad, accidental (unintentional), initial encounter
T63.822A	Toxic effect of contact with venomous toad, intentional self-harm, initial encounter
T63.823A	Toxic effect of contact with venomous toad, assault, initial encounter
T63.824A	Toxic effect of contact with venomous toad, undetermined, initial encounter
T63.831A	Toxic effect of contact with other venomous amphibian, accidental (unintentional), initial encounter
T63.832A	Toxic effect of contact with other venomous amphibian, intentional self-harm, initial encounter
T63.833A	Toxic effect of contact with other venomous amphibian, assault, initial encounter
T63.834A	Toxic effect of contact with other venomous amphibian, undetermined, initial encounter

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**Medicare National Coverage Determinations (NCD)
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Code	Description
T63.891A	Toxic effect of contact with other venomous animals, accidental (unintentional), initial encounter
T63.892A	Toxic effect of contact with other venomous animals, intentional self-harm, initial encounter
T63.893A	Toxic effect of contact with other venomous animals, assault, initial encounter
T63.894A	Toxic effect of contact with other venomous animals, undetermined, initial encounter
T63.91XA	Toxic effect of contact with unspecified venomous animal, accidental (unintentional), initial encounter
T63.92XA	Toxic effect of contact with unspecified venomous animal, intentional self-harm, initial encounter
T63.93XA	Toxic effect of contact with unspecified venomous animal, assault, initial encounter
T63.94XA	Toxic effect of contact with unspecified venomous animal, undetermined, initial encounter
T64.01XA	Toxic effect of aflatoxin, accidental (unintentional), initial encounter
T64.02XA	Toxic effect of aflatoxin, intentional self-harm, initial encounter
T64.03XA	Toxic effect of aflatoxin, assault, initial encounter
T64.04XA	Toxic effect of aflatoxin, undetermined, initial encounter
T64.81XA	Toxic effect of other mycotoxin food contaminants, accidental (unintentional), initial encounter
T64.82XA	Toxic effect of other mycotoxin food contaminants, intentional self-harm, initial encounter
T64.83XA	Toxic effect of other mycotoxin food contaminants, assault, initial encounter
T64.84XA	Toxic effect of other mycotoxin food contaminants, undetermined, initial encounter
T65.0X1A	Toxic effect of cyanides, accidental (unintentional), initial encounter
T65.0X2A	Toxic effect of cyanides, intentional self-harm, initial encounter
T65.0X3A	Toxic effect of cyanides, assault, initial encounter
T65.0X4A	Toxic effect of cyanides, undetermined, initial encounter
T65.1X1A	Toxic effect of strychnine and its salts, accidental (unintentional), initial encounter
T65.1X2A	Toxic effect of strychnine and its salts, intentional self-harm, initial encounter
T65.1X3A	Toxic effect of strychnine and its salts, assault, initial encounter
T65.1X4A	Toxic effect of strychnine and its salts, undetermined, initial encounter
T65.211A	Toxic effect of chewing tobacco, accidental (unintentional), initial encounter
T65.212A	Toxic effect of chewing tobacco, intentional self-harm, initial encounter
T65.213A	Toxic effect of chewing tobacco, assault, initial encounter
T65.214A	Toxic effect of chewing tobacco, undetermined, initial encounter

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Code	Description
T65.221A	Toxic effect of tobacco cigarettes, accidental (unintentional), initial encounter
T65.222A	Toxic effect of tobacco cigarettes, intentional self-harm, initial encounter
T65.223A	Toxic effect of tobacco cigarettes, assault, initial encounter
T65.224A	Toxic effect of tobacco cigarettes, undetermined, initial encounter
T65.291A	Toxic effect of other tobacco and nicotine, accidental (unintentional), initial encounter
T65.292A	Toxic effect of other tobacco and nicotine, intentional self-harm, initial encounter
T65.293A	Toxic effect of other tobacco and nicotine, assault, initial encounter
T65.294A	Toxic effect of other tobacco and nicotine, undetermined, initial encounter
T65.3X1A	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, accidental (unintentional), initial encounter
T65.3X2A	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, intentional self-harm, initial encounter
T65.3X3A	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, assault, initial encounter
T65.3X4A	Toxic effect of nitroderivatives and aminoderivatives of benzene and its homologues, undetermined, initial encounter
T65.4X1A	Toxic effect of carbon disulfide, accidental (unintentional), initial encounter
T65.4X2A	Toxic effect of carbon disulfide, intentional self-harm, initial encounter
T65.4X3A	Toxic effect of carbon disulfide, assault, initial encounter
T65.4X4A	Toxic effect of carbon disulfide, undetermined, initial encounter
T65.5X1A	Toxic effect of nitroglycerin and other nitric acids and esters, accidental (unintentional), initial encounter
T65.5X2A	Toxic effect of nitroglycerin and other nitric acids and esters, intentional self-harm, initial encounter
T65.5X3A	Toxic effect of nitroglycerin and other nitric acids and esters, assault, initial encounter
T65.5X4A	Toxic effect of nitroglycerin and other nitric acids and esters, undetermined, initial encounter
T65.6X1A	Toxic effect of paints and dyes, not elsewhere classified, accidental (unintentional), initial encounter
T65.6X2A	Toxic effect of paints and dyes, not elsewhere classified, intentional self-harm, initial encounter
T65.6X3A	Toxic effect of paints and dyes, not elsewhere classified, assault, initial encounter
T65.6X4A	Toxic effect of paints and dyes, not elsewhere classified, undetermined, initial encounter



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Code	Description
T65.811A	Toxic effect of latex, accidental (unintentional), initial encounter
T65.812A	Toxic effect of latex, intentional self-harm, initial encounter
T65.813A	Toxic effect of latex, assault, initial encounter
T65.814A	Toxic effect of latex, undetermined, initial encounter
T65.821A	Toxic effect of harmful algae and algae toxins, accidental (unintentional), initial encounter
T65.822A	Toxic effect of harmful algae and algae toxins, intentional self-harm, initial encounter
T65.823A	Toxic effect of harmful algae and algae toxins, assault, initial encounter
T65.824A	Toxic effect of harmful algae and algae toxins, undetermined, initial encounter
T65.831A	Toxic effect of fiberglass, accidental (unintentional), initial encounter
T65.832A	Toxic effect of fiberglass, intentional self-harm, initial encounter
T65.833A	Toxic effect of fiberglass, assault, initial encounter
T65.834A	Toxic effect of fiberglass, undetermined, initial encounter
T65.891A	Toxic effect of other specified substances, accidental (unintentional), initial encounter
T65.892A	Toxic effect of other specified substances, intentional self-harm, initial encounter
T65.893A	Toxic effect of other specified substances, assault, initial encounter
T65.894A	Toxic effect of other specified substances, undetermined, initial encounter
T78.1XXA	Other adverse food reactions, not elsewhere classified, initial encounter
*V47.0XXA	*Car driver injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.1XXA	*Car passenger injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.3XXA	*Unspecified car occupant injured in collision with fixed or stationary object in nontraffic accident, initial encounter
*V47.5XXA	*Car driver injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.6XXA	*Car passenger injured in collision with fixed or stationary object in traffic accident, initial encounter
*V47.9XXA	*Unspecified car occupant injured in collision with fixed or stationary object in traffic accident, initial encounter
*Z05.0	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1	*Observation and evaluation of newborn for suspected infectious condition ruled out



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Code	Description
*Z05.2	*Observation and evaluation of newborn for suspected neurological condition ruled out
*Z05.3	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41	*Observation and evaluation of newborn for suspected genetic condition ruled out
*Z05.42	*Observation and evaluation of newborn for suspected metabolic condition ruled out
*Z05.43	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
*Z05.6	*Observation and evaluation of newborn for suspected genitourinary condition ruled out
*Z05.71	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
*Z05.73	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9	*Observation and evaluation of newborn for unspecified suspected condition ruled out
Z08	Encounter for follow-up examination after completed treatment for malignant neoplasm
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
*Z19.1	*Hormone sensitive malignancy status
*Z19.2	*Hormone resistant malignancy status
*Z29.11	*Encounter for prophylactic immunotherapy for respiratory syncytial virus (RSV)
Z48.23	Encounter for aftercare following liver transplant
Z79.01	Long term (current) use of anticoagulants
Z79.02	Long term (current) use of antithrombotics/antiplatelets
Z79.1	Long term (current) use of non-steroidal anti-inflammatories (NSAID)
Z79.2	Long term (current) use of antibiotics



Code	Description
Z79.3	Long term (current) use of hormonal contraceptives
*Z79.84	*Long term (current) use of oral hypoglycemic drugs
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
Z94.4	Liver transplant status

Indications

1. To provide information about known or suspected hepatobiliary disease, for example:
 - a. Following chronic alcohol or drug ingestion
 - b. Following exposure to hepatotoxins
 - c. When using medication known to have a potential for causing liver toxicity (e.g., following the drug manufacturer's recommendations)
 - d. Following infection (e.g., viral hepatitis and other specific infections such as amebiasis, tuberculosis, psittacosis, and similar infections)
2. To assess liver injury/function following diagnosis of primary or secondary malignant neoplasms
3. To assess liver injury/function in a wide variety of disorders and diseases known to cause liver involvement (e.g., diabetes mellitus, malnutrition, disorders of iron and mineral metabolism, sarcoidosis, amyloidosis, lupus, and hypertension)
4. To assess liver function related to gastrointestinal disease
5. To assess liver function related to pancreatic disease
6. To assess liver function in patients subsequent to liver transplantation
7. To differentiate between the different sources of elevated alkaline phosphatase activity

Limitations

When used to assess liver dysfunction secondary to existing non-hepatobiliary disease with no change in signs, symptoms, or treatment, it is generally not necessary to repeat a GGT determination after a normal result has been obtained unless new indications are present.

If the GGT is the only "liver" enzyme abnormally high, it is generally not necessary to pursue further evaluation for liver disease for this specific indication.

When used to determine if other abnormal enzyme tests reflect liver abnormality rather than other tissue, it generally is not necessary to repeat a GGT more than one time per week.

Because of the extreme sensitivity of GGT as a marker for cytochrome oxidase induction or cell membrane permeability, it is generally not useful in monitoring patients with known liver disease.



ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Ockner, R.K., "Clinical approach to liver disease," in Wyngaarden, J.B., and Smith, L.H. (eds.), Cecil Textbook of Medicine (18th ed.), 1988, W.B. Saunders, pp. 808-809.

Ockner, R.K., "Laboratory tests in liver disease," in Wyngaarden, J.B., and Smith, L.H. (eds.), Cecil Textbook of Medicine (18th ed.), 1988, W.B. Saunders, pp. 814-817.

Gornall, A.G., and Goldberg, D.M., "Hepatobiliary Disorders," in Gornall, A.G. (ed.), Applied Biochemistry of Clinical Disorders (2nd ed.), 1986, J.B. Lippincott, pp. 211-246.

Scharschmidt, B.F., "Parasitic, bacterial, fungal, and granulomatous liver disease," in Wyngaarden, J.B., and Smith, L.H. (eds.), Cecil Textbook of Medicine (18th ed.), 1988, W.B. Saunders, pp. 834-838.

Pincus, M.R., & Schaffner, J.A., "Assessment of liver function," Henry, J.B. (ed.), Clinical Diagnosis & Management by Laboratory Methods (19th ed.), 1996, WB Saunders, pp. 253-267.

Bordley, D.R., Nattinger, A.B., et al., "Gastrointestinal, Hepatobiliary, and Pancreatic Problems," in Panzer, R.J., Black, E.R., and Griner, P.F. (eds.), Diagnostic Strategies for Common Medical Problems, 1991, American College of Physicians, pp. 94-185.

Tietz, N.W. (ed.), Clinical Guide to Laboratory Tests (3rd ed.), 1995, pp. 286-287.

Zakim, D., and Boyer, T.D., Hepatology (2nd ed.), 1990, W.B. Saunders.

Dufour, D.R., Clinical Use of Laboratory Data: A Practical Guide, 1998, Williams & Wilkins, pp. 142-155.

Harrison's Principles of Internal Medicine (14th ed.), 1998, McGraw Hill

Wallach, J., Interpretation of Diagnostic Tests, 1996, Little Brown and Co.

Illustrated Guide to Diagnostic Tests (2nd ed.), 1997, Springhouse Corporation.

Sleisenger and Fordtrans's Gastrointestinal and Liver Disease (6th ed.), 1997, W.B. Saunders.



190.33 - Hepatitis Panel/Acute Hepatitis Panel

Description

This panel consists of the following tests:

- Hepatitis A antibody (HAAb), IgM antibody;
- Hepatitis B core antibody (HBcAb), IgM antibody;
- Hepatitis B surface antigen (HBsAg); and
- Hepatitis C antibody.

Hepatitis is an inflammation of the liver resulting from viruses, drugs, toxins, and other etiologies. Viral hepatitis can be due to one of at least five different viruses, designated hepatitis A, B, C, and E. Most cases are caused by hepatitis A virus (HAV), hepatitis B virus (HBV), or hepatitis C virus (HCV).

HAV is the most common cause of hepatitis in children and adolescents in the United States. Prior exposure is indicated by a positive IgG anti-HAV. Acute HAV is diagnosed by IgM anti-HAV, which typically appears within four weeks of exposure, and which disappears within three months of its appearance. IgG anti-HAV is similar in the timing of its appearance, but it persists indefinitely. Its detection indicates prior effective immunization or recovery from infection. Although HAV is spread most commonly by fecal-oral exposure, standard immune globulin may be effective as a prophylaxis.

HBV produces three separate antigens (surface, core, and e (envelope) antigens) when it infects the liver, although only hepatitis B surface antigen (HBsAg) is included as part of this panel. Following exposure, the body normally responds by producing antibodies to each of these antigens; one of which is included in this panel: hepatitis B surface antibody (HBsAb)-IgM antibody. HBsAg is the earlier marker, appearing in serum four to eight weeks after exposure, and typically disappearing within six months after its appearance. If HBsAg remains detectable for greater than six months, this indicates chronic HBV infection. HBcAb, in the form of both IgG and IgM antibodies, are next to appear in serum, typically becoming detectable two to three months following exposure. The IgM antibody gradually declines or disappears entirely one to two years following exposure, but the IgG usually remains detectable for life. Because HBsAg is present for a relatively short period and usually displays a low titer, a negative result does not exclude an HBV diagnosis. HBcAb, on the other hand, rises to a much higher titer and remains elevated for a longer period of time, but a positive result is not diagnostic of acute disease, since it may be the result of a prior infection. The last marker to appear in the course of a typical infection is HBsAb, which appears in serum four to six months following exposure to infected blood or body fluids; in the U.S., sexual transmission accounts for 30% to 60% of new cases of HBV infection.

The diagnosis of acute HBV infection is best established by documentation of positive IgM antibody against the core antigen (HBcAb-IgM) and by identification of a positive hepatitis B surface antigen (HBsAg). The diagnosis of chronic HBV infection is established primarily by



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identifying a positive hepatitis B surface antigen (HBsAg) and demonstrating positive IgG antibody directed against the core antigen (HBcAb-IgG). Additional tests such as hepatitis B e antigen (HBeAg) and hepatitis B e antibody (HBeAb), the envelope antigen and antibody, are not included in the hepatitis panel, but may be of importance in assessing the infectivity of patients with HBV. Following completion of a HBV vaccination series, HBsAb alone may be used monthly for up to six months, or until a positive result is obtained, to verify an adequate antibody response.

HCV is the most common cause of post-transfusion hepatitis; overall HCV is responsible for 15% to 20% of all cases of acute hepatitis, and is the most common cause of chronic liver disease. The test most commonly used to identify HCV measures HCV antibodies, which appear in blood two to four months after infection. False positive HCV results can occur. For example, a patient with a recent yeast infection may produce a false positive anti-HCV result. For this reason, at present positive results usually are confirmed by a more specific technique. Like HBV, HCV is spread exclusively through exposure to infected blood or body fluids.

This panel of tests is used for differential diagnosis in a patient with symptoms of liver disease or injury. When the time of exposure or the stage of the disease is not known, a patient with continued symptoms of liver disease despite a completely negative hepatitis panel may need a repeat panel approximately two weeks to two months later to exclude the possibility of hepatitis. Once a diagnosis is established, specific tests can be used to monitor the course of the disease.

HCPCS Codes (Alphanumeric, CPT® AMA)

Code	Description
80074	Acute Hepatitis Panel

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at
<http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
*A92.5	*Zika virus disease
B15.0	Hepatitis A with hepatic coma
B15.9	Hepatitis A without hepatic coma
B16.0	Acute hepatitis B with delta-agent with hepatic coma
B16.1	Acute hepatitis B with delta-agent without hepatic coma
B16.2	Acute hepatitis B without delta-agent with hepatic coma
B16.9	Acute hepatitis B without delta-agent and without hepatic coma
B17.0	Acute delta-(super) infection of hepatitis B carrier

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Code	Description
B17.10	Acute hepatitis C without hepatic coma
B17.11	Acute hepatitis C with hepatic coma
B17.2	Acute hepatitis E
B17.8	Other specified acute viral hepatitis
B17.9	Acute viral hepatitis, unspecified
B18.0	Chronic viral hepatitis B with delta-agent
B18.1	Chronic viral hepatitis B without delta-agent
B18.2	Chronic viral hepatitis C
B18.8	Other chronic viral hepatitis
B18.9	Chronic viral hepatitis, unspecified
B19.0	Unspecified viral hepatitis with hepatic coma
B19.10	Unspecified viral hepatitis B without hepatic coma
B19.11	Unspecified viral hepatitis B with hepatic coma
B19.20	Unspecified viral hepatitis C without hepatic coma
B19.21	Unspecified viral hepatitis C with hepatic coma
B19.9	Unspecified viral hepatitis without hepatic coma
G93.3	Postviral fatigue syndrome
I85.00	Esophageal varices without bleeding
I85.01	Esophageal varices with bleeding
I85.10	Secondary esophageal varices without bleeding
I85.11	Secondary esophageal varices with bleeding
K70.41	Alcoholic hepatic failure with coma
K71.0	Toxic liver disease with cholestasis
K71.10	Toxic liver disease with hepatic necrosis, without coma
K71.11	Toxic liver disease with hepatic necrosis, with coma
K71.2	Toxic liver disease with acute hepatitis
K71.3	Toxic liver disease with chronic persistent hepatitis
K71.4	Toxic liver disease with chronic lobular hepatitis
K71.50	Toxic liver disease with chronic active hepatitis without ascites
K71.51	Toxic liver disease with chronic active hepatitis with ascites



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Code	Description
K71.6	Toxic liver disease with hepatitis, not elsewhere classified
K71.7	Toxic liver disease with fibrosis and cirrhosis of liver
K71.8	Toxic liver disease with other disorders of liver
K71.9	Toxic liver disease, unspecified
K72.00	Acute and subacute hepatic failure without coma
K72.01	Acute and subacute hepatic failure with coma
K72.10	Chronic hepatic failure without coma
K72.11	Chronic hepatic failure with coma
K72.90	Hepatic failure, unspecified without coma
K72.91	Hepatic failure, unspecified with coma
K74.0	Hepatic fibrosis
K74.60	Unspecified cirrhosis of liver
K74.69	Other cirrhosis of liver
K75.0	Abscess of liver
K75.1	Phlebitis of portal vein
K75.2	Nonspecific reactive hepatitis
K75.3	Granulomatous hepatitis, not elsewhere classified
K75.81	Nonalcoholic steatohepatitis (NASH)
K75.89	Other specified inflammatory liver diseases
K75.9	Inflammatory liver disease, unspecified
K76.2	Central hemorrhagic necrosis of liver
K76.4	Peliosis hepatis
K76.6	Portal hypertension
K76.7	Hepatorenal syndrome
K76.81	Hepatopulmonary syndrome
*M04.1	*Periodic fever syndromes
R10.0	Acute abdomen
R10.10	Upper abdominal pain, unspecified
R10.11	Right upper quadrant pain
R10.12	Left upper quadrant pain



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Code	Description
R10.13	Epigastric pain
R10.2	Pelvic and perineal pain
R10.30	Lower abdominal pain, unspecified
R10.31	Right lower quadrant pain
R10.32	Left lower quadrant pain
R10.33	Periumbilical pain
R10.811	Right upper quadrant abdominal tenderness
R10.821	Right upper quadrant rebound abdominal tenderness
R10.83	Colic
R10.84	Generalized abdominal pain
R10.9	Unspecified abdominal pain
R11.0	Nausea
R11.10	Vomiting, unspecified
R11.11	Vomiting without nausea
R11.12	Projectile vomiting
R11.14	Bilious vomiting
R11.2	Nausea with vomiting, unspecified
R16.0	Hepatomegaly, not elsewhere classified
R16.2	Hepatomegaly with splenomegaly, not elsewhere classified
R17	Unspecified jaundice
*R40.2410	*Glasgow coma scale score 13-15, unspecified time
*R40.2411	*Glasgow coma scale score 13-15, in the field [EMT or ambulance]
*R40.2412	*Glasgow coma scale score 13-15, at arrival to emergency department
*R40.2413	*Glasgow coma scale score 13-15, at hospital admission
*R40.2414	*Glasgow coma scale score 13-15, 24 hours or more after hospital admission
*R40.2420	*Glasgow coma scale score 9-12, unspecified time
*R40.2421	*Glasgow coma scale score 9-12, in the field [EMT or ambulance]
*R40.2422	*Glasgow coma scale score 9-12, at arrival to emergency department
*R40.2423	*Glasgow coma scale score 9-12, at hospital admission
*R40.2424	*Glasgow coma scale score 9-12, 24 hours or more after hospital admission



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Code	Description
*R40.2430	*Glasgow coma scale score 3-8, unspecified time
*R40.2431	*Glasgow coma scale score 3-8, in the field [EMT or ambulance]
*R40.2432	*Glasgow coma scale score 3-8, at arrival to emergency department
*R40.2433	*Glasgow coma scale score 3-8, at hospital admission
*R40.2434	*Glasgow coma scale score 3-8, 24 hours or more after hospital admission
*R40.2440	*Other coma, without documented Glasgow coma scale score, or with partial score reported, unspecified time
*R40.2441	*Other coma, without documented Glasgow coma scale score, or with partial score reported, in the field [EMT or ambulance]
*R40.2442	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at arrival to emergency department
*R40.2443	*Other coma, without documented Glasgow coma scale score, or with partial score reported, at hospital admission
*R40.2444	*Other coma, without documented Glasgow coma scale score, or with partial score reported, 24 hours or more after hospital admission
R53.0	Neoplastic (malignant) related fatigue
R53.1	Weakness
R53.2	Functional quadriplegia
R53.81	Other malaise
R53.82	Chronic fatigue, unspecified
R53.83	Other fatigue
R56.00	Simple febrile convulsions
R56.01	Complex febrile convulsions
R56.1	Post traumatic seizures
R62.0	Delayed milestone in childhood
R62.50	Unspecified lack of expected normal physiological development in childhood
R62.51	Failure to thrive (child)
R62.52	Short stature (child)
R62.59	Other lack of expected normal physiological development in childhood
R63.0	Anorexia
R63.1	Polydipsia
R63.2	Polyphagia

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Code	Description
R63.3	Feeding difficulties
R63.4	Abnormal weight loss
R63.5	Abnormal weight gain
R63.6	Underweight
*R73.03	*Prediabetes
R74.0	Nonspecific elevation of levels of transaminase and lactic acid dehydrogenase [LDH]
R94.5	Abnormal results of liver function studies
T86.40	Unspecified complication of liver transplant
T86.41	Liver transplant rejection
T86.42	Liver transplant failure
T86.43	Liver transplant infection
T86.49	Other complications of liver transplant
Z01.89	Encounter for other specified special examinations
*Z05.0	*Observation and evaluation of newborn for suspected cardiac condition ruled out
*Z05.1	*Observation and evaluation of newborn for suspected infectious condition ruled out
*Z05.2	*Observation and evaluation of newborn for suspected neurological condition ruled out
*Z05.3	*Observation and evaluation of newborn for suspected respiratory condition ruled out
*Z05.41	*Observation and evaluation of newborn for suspected genetic condition ruled out
*Z05.42	*Observation and evaluation of newborn for suspected metabolic condition ruled out
*Z05.43	*Observation and evaluation of newborn for suspected immunologic condition ruled out
*Z05.5	*Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
*Z05.6	*Observation and evaluation of newborn for suspected genitourinary condition ruled out
*Z05.71	*Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out
*Z05.72	*Observation and evaluation of newborn for suspected musculoskeletal condition ruled out



Code	Description
*Z05.73	*Observation and evaluation of newborn for suspected connective tissue condition ruled out
*Z05.8	*Observation and evaluation of newborn for other specified suspected condition ruled out
*Z05.9	*Observation and evaluation of newborn for unspecified suspected condition ruled out
*Z19.1	*Hormone sensitive malignancy status
*Z19.2	*Hormone resistant malignancy status
*Z29.11	*Encounter for prophylactic immunotherapy for respiratory syncytial virus (RSV)
*Z84.82	*Family history of sudden infant death syndrome

Indications

1. To detect viral hepatitis infection when there are abnormal liver function test results, with or without signs or symptoms of hepatitis.
2. Prior to and subsequent to liver transplantation.

Limitations

After a hepatitis diagnosis is established, only individual tests are needed.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Ockner, R.K., "Approaches to the diagnosis of jaundice," in Wyngaarden, J.B., and Smith, L.H. (eds.), Cecil Textbook of Medicine (18th ed.), 1988, W.B. Saunders, pp. 817-818.

Ockner, R.K., "Acute viral hepatitis," in Wyngaarden, J.B., and Smith, L.H. (eds.), Cecil Textbook of Medicine (18th ed.), 1988, W.B. Saunders, pp. 818-826.

Ockner, R.K., "Chronic hepatitis," in Wyngaarden, J.B., and Smith, L.H. (eds.), Cecil Textbook of Medicine (18th ed.), 1988, W.B. Saunders, pp. 830-834.

Arvan, D.A., "Acute viral hepatitis," in Panzer, R.J., Black, E.R., & Griner, P.F. (eds.), Diagnostic Strategies for Common Medical Problems, 1991, American College of Physicians, pp. 141-151.

Goldberg, D.M., "Diagnostic Enzymology," in Gornall, A.G. (ed.), Applied Biochemistry of Clinical Disorders (2nd ed.), 1986, J.B. Lippincott, pp. 33-51.

Pincus, M.R., & Schaffner, J.A., "Assessment of liver function," in Henry J.B.(ed.), Clinical Diagnosis & Management by Laboratory Methods (19th ed.), 1996, W.B. Saunders, pp 253-267.

Tietz, N.W. (ed.), Clinical Guide to Laboratory Tests (3rd ed.), 1995, pp. 320-327.

Zakim, D., and Boyer, T.D., Hepatology (2nd ed.), 1990, W.B. Saunders.

Harrison's Principles of Internal Medicine (14th ed.), 1998, McGraw Hill.



**Medicare National Coverage Determinations (NCD)
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Wallach, J., *Interpretation of Diagnostic Tests*, 1996, Little Brown and Co.

Illustrated Guide to Diagnostic Tests (2nd ed.), 1997, Springhouse Corporation.

Sleisenger and Fordtrans's *Gastrointestinal and Liver Disease* (6th ed.), 1997, W.B. Saunders.



190.34 - Fecal Occult Blood Test

Description

The Fecal Occult Blood Test (FOBT) detects the presence of trace amounts of blood in stool. The procedure is performed by testing one or several small samples of one, two or three different stool specimens.

This test may be performed with or without evidence of iron deficiency anemia, which may be related to gastrointestinal blood loss. The range of causes for blood loss include inflammatory causes, including acid-peptic disease, non-steroidal anti-inflammatory drug use, hiatal hernia, Crohn's disease, ulcerative colitis, gastroenteritis, and colon ulcers. It is also seen with infectious causes, including hookworm, strongyloides, ascariasis, tuberculosis, and enteroamebiasis. Vascular causes include angiodysplasia, hemangiomas, varices, blue rubber bleb nevus syndrome, and watermelon stomach. Tumors and neoplastic causes include lymphoma, leiomyosarcoma, lipomas, adenocarcinoma and primary and secondary metastases to the GI tract. Drugs such as nonsteroidal anti-inflammatory drugs also cause bleeding. There are extra gastrointestinal causes such as hemoptysis, epistaxis, and oropharyngeal bleeding. Artifactual causes include hematuria, and menstrual bleeding. In addition, there may be other causes such as coagulopathies, gastrostomy tubes or other appliances, factitial causes, and long distance running.

Three basic types of fecal hemoglobin assays exist, each directed at a different component of the hemoglobin molecule.

1. Immunoassays recognize antigenic sites on the globin portion and are least affected by diet or proximal gut bleeding, but the antigen may be destroyed by fecal flora.
2. The heme-porphyrin assay measures heme-derived porphyrin and is least influenced by enterocolic metabolism or fecal storage. This assay does not discriminate dietary from endogenous heme. The capacity to detect proximal gut bleeding reduces its specificity for colorectal cancer screening but makes it more useful for evaluating overall GI bleeding in case finding for iron deficiency anemia.
3. The guaiac-based test is the most widely used. It requires the peroxidase activity of an intact heme moiety to be reactive. Positivity rates fall with storage. Fecal hydration such as adding a drop of water increases the test reactivity but also increases false positivity.

Of these three tests, the guaiac-based test is the most sensitive for detecting lower bowel bleeding. Because of this sensitivity, it is advisable, when it is used for screening, to defer the guaiac-based test if other studies of the colon are performed prior to the test. Similarly, this test's sensitivity may result in a false positive if the patient has recently ingested meat. Both of these cautions are appropriate when the test is used for screening, but when appropriate indications are present, the test should be done despite its limitations.



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HCPSC Codes (Alphanumeric, CPT® AMA)

Code	Description
82272	Blood, occult, by peroxidase activity (e.g., guaiac), qualitative, feces, 1-3 simultaneous determinations, performed for other than colorectal neoplasm screening

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at
<http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

Code	Description
A02.0	Salmonella enteritis
A02.1	Salmonella sepsis
A03.0	Shigellosis due to Shigella dysenteriae
A03.1	Shigellosis due to Shigella flexneri
A03.2	Shigellosis due to Shigella boydii
A03.3	Shigellosis due to Shigella sonnei
A03.8	Other shigellosis
A03.9	Shigellosis, unspecified
A04.5	Campylobacter enteritis
A04.6	Enteritis due to Yersinia enterocolitica
A04.7	Enterocolitis due to Clostridium difficile
A04.8	Other specified bacterial intestinal infections
A05.0	Foodborne staphylococcal intoxication
A05.1	Botulism food poisoning
A05.2	Foodborne Clostridium perfringens [Clostridium welchii] intoxication
A05.3	Foodborne Vibrio parahaemolyticus intoxication
A05.4	Foodborne Bacillus cereus intoxication
A05.5	Foodborne Vibrio vulnificus intoxication
A05.8	Other specified bacterial foodborne intoxications
A05.9	Bacterial foodborne intoxication, unspecified
A06.0	Acute amebic dysentery



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Code	Description
A06.1	Chronic intestinal amebiasis
A06.2	Amebic nondysenteric colitis
A06.3	Ameboma of intestine
A06.4	Amebic liver abscess
A06.5	Amebic lung abscess
A06.6	Amebic brain abscess
A06.7	Cutaneous amebiasis
A06.81	Amebic cystitis
A06.82	Other amebic genitourinary infections
A06.89	Other amebic infections
A06.9	Amebiasis, unspecified
A07.0	Balantidiasis
A07.1	Giardiasis [lambliaosis]
A07.2	Cryptosporidiosis
A07.3	Isosporiasis
A07.4	Cyclosporiasis
A07.8	Other specified protozoal intestinal diseases
A07.9	Protozoal intestinal disease, unspecified
A09	Infectious gastroenteritis and colitis, unspecified
A18.31	Tuberculous peritonitis
A18.32	Tuberculous enteritis
A18.39	Retroperitoneal tuberculosis
A18.83	Tuberculosis of digestive tract organs, not elsewhere classified
A52.74	Syphilis of liver and other viscera
A54.00	Gonococcal infection of lower genitourinary tract, unspecified
A54.02	Gonococcal vulvovaginitis, unspecified
A54.09	Other gonococcal infection of lower genitourinary tract
A54.1	Gonococcal infection of lower genitourinary tract with periurethral and accessory gland abscess
A54.6	Gonococcal infection of anus and rectum
A54.83	Gonococcal heart infection

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Code	Description
B25.2	Cytomegaloviral pancreatitis
B68.0	Taenia solium taeniasis
B68.1	Taenia saginata taeniasis
B68.9	Taeniasis, unspecified
B69.0	Cysticercosis of central nervous system
B69.1	Cysticercosis of eye
B69.81	Myositis in cysticercosis
B69.89	Cysticercosis of other sites
B69.9	Cysticercosis, unspecified
B70.0	Diphyllobothriasis
B70.1	Sparganosis
B71.0	Hymenolepiasis
B71.1	Dipylidiasis
B71.8	Other specified cestode infections
B71.9	Cestode infection, unspecified
B75	Trichinellosis
B77.0	Ascariasis with intestinal complications
B77.81	Ascariasis pneumonia
B77.89	Ascariasis with other complications
B77.9	Ascariasis, unspecified
B78.0	Intestinal strongyloidiasis
B78.7	Disseminated strongyloidiasis
B78.9	Strongyloidiasis, unspecified
B79	Trichuriasis
B80	Enterobiasis
B81.0	Anisakiasis
B81.1	Intestinal capillariasis
B81.2	Trichostrongyliasis
B81.3	Intestinal angiostrongyliasis
B81.4	Mixed intestinal helminthiasis

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Code	Description
B81.8	Other specified intestinal helminthiases
B82.0	Intestinal helminthiasis, unspecified
B92	Sequelae of leprosy
B94.2	Sequelae of viral hepatitis
B94.8	Sequelae of other specified infectious and parasitic diseases
B94.9	Sequelae of unspecified infectious and parasitic disease
C15.3	Malignant neoplasm of upper third of esophagus
C15.4	Malignant neoplasm of middle third of esophagus
C15.5	Malignant neoplasm of lower third of esophagus
C15.8	Malignant neoplasm of overlapping sites of esophagus
C15.9	Malignant neoplasm of esophagus, unspecified
C16.0	Malignant neoplasm of cardia
C16.1	Malignant neoplasm of fundus of stomach
C16.2	Malignant neoplasm of body of stomach
C16.3	Malignant neoplasm of pyloric antrum
C16.4	Malignant neoplasm of pylorus
C16.5	Malignant neoplasm of lesser curvature of stomach, unspecified
C16.6	Malignant neoplasm of greater curvature of stomach, unspecified
C16.8	Malignant neoplasm of overlapping sites of stomach
C16.9	Malignant neoplasm of stomach, unspecified
C17.0	Malignant neoplasm of duodenum
C17.1	Malignant neoplasm of jejunum
C17.2	Malignant neoplasm of ileum
C17.3	Meckel's diverticulum, malignant
C17.8	Malignant neoplasm of overlapping sites of small intestine
C17.9	Malignant neoplasm of small intestine, unspecified
C18.0	Malignant neoplasm of cecum
C18.1	Malignant neoplasm of appendix
C18.2	Malignant neoplasm of ascending colon
C18.3	Malignant neoplasm of hepatic flexure

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Code	Description
C18.4	Malignant neoplasm of transverse colon
C18.5	Malignant neoplasm of splenic flexure
C18.6	Malignant neoplasm of descending colon
C18.7	Malignant neoplasm of sigmoid colon
C18.8	Malignant neoplasm of overlapping sites of colon
C18.9	Malignant neoplasm of colon, unspecified
C19	Malignant neoplasm of rectosigmoid junction
C20	Malignant neoplasm of rectum
C21.0	Malignant neoplasm of anus, unspecified
C21.1	Malignant neoplasm of anal canal
C21.2	Malignant neoplasm of cloacogenic zone
C21.8	Malignant neoplasm of overlapping sites of rectum, anus and anal canal
C22.0	Liver cell carcinoma
C22.1	Intrahepatic bile duct carcinoma
C22.2	Hepatoblastoma
C22.3	Angiosarcoma of liver
C22.4	Other sarcomas of liver
C22.7	Other specified carcinomas of liver
C22.8	Malignant neoplasm of liver, primary, unspecified as to type
C22.9	Malignant neoplasm of liver, not specified as primary or secondary
C23	Malignant neoplasm of gallbladder
C24.0	Malignant neoplasm of extrahepatic bile duct
C24.1	Malignant neoplasm of ampulla of Vater
C24.8	Malignant neoplasm of overlapping sites of biliary tract
C24.9	Malignant neoplasm of biliary tract, unspecified
C25.0	Malignant neoplasm of head of pancreas
C25.1	Malignant neoplasm of body of pancreas
C25.2	Malignant neoplasm of tail of pancreas
C25.3	Malignant neoplasm of pancreatic duct
C25.4	Malignant neoplasm of endocrine pancreas



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Code	Description
C25.7	Malignant neoplasm of other parts of pancreas
C25.8	Malignant neoplasm of overlapping sites of pancreas
C25.9	Malignant neoplasm of pancreas, unspecified
C26.0	Malignant neoplasm of intestinal tract, part unspecified
C26.1	Malignant neoplasm of spleen
C26.9	Malignant neoplasm of ill-defined sites within the digestive system
C46.4	Kaposi's sarcoma of gastrointestinal sites
C78.4	Secondary malignant neoplasm of small intestine
C78.5	Secondary malignant neoplasm of large intestine and rectum
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct
C78.80	Secondary malignant neoplasm of unspecified digestive organ
C78.89	Secondary malignant neoplasm of other digestive organs
C7A.010	Malignant carcinoid tumor of the duodenum
C7A.011	Malignant carcinoid tumor of the jejunum
C7A.012	Malignant carcinoid tumor of the ileum
C7A.019	Malignant carcinoid tumor of the small intestine, unspecified portion
C7A.020	Malignant carcinoid tumor of the appendix
C7A.021	Malignant carcinoid tumor of the cecum
C7A.022	Malignant carcinoid tumor of the ascending colon
C7A.023	Malignant carcinoid tumor of the transverse colon
C7A.024	Malignant carcinoid tumor of the descending colon
C7A.025	Malignant carcinoid tumor of the sigmoid colon
C7A.026	Malignant carcinoid tumor of the rectum
C7A.029	Malignant carcinoid tumor of the large intestine, unspecified portion
C7B.00	Secondary carcinoid tumors, unspecified site
C7B.01	Secondary carcinoid tumors of distant lymph nodes
C7B.02	Secondary carcinoid tumors of liver
C7B.03	Secondary carcinoid tumors of bone
C7B.04	Secondary carcinoid tumors of peritoneum
C7B.09	Secondary carcinoid tumors of other sites

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Code	Description
C7B.1	Secondary Merkel cell carcinoma
C7B.8	Other secondary neuroendocrine tumors
C80.0	Disseminated malignant neoplasm, unspecified
C91.00	Acute lymphoblastic leukemia not having achieved remission
C91.01	Acute lymphoblastic leukemia, in remission
C91.02	Acute lymphoblastic leukemia, in relapse
C91.10	Chronic lymphocytic leukemia of B-cell type not having achieved remission
C91.11	Chronic lymphocytic leukemia of B-cell type in remission
C91.12	Chronic lymphocytic leukemia of B-cell type in relapse
C91.30	Prolymphocytic leukemia of B-cell type not having achieved remission
C91.31	Prolymphocytic leukemia of B-cell type, in remission
C91.32	Prolymphocytic leukemia of B-cell type, in relapse
C91.50	Adult T-cell lymphoma/leukemia (HTLV-1-associated) not having achieved remission
C91.51	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in remission
C91.52	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in relapse
C91.60	Prolymphocytic leukemia of T-cell type not having achieved remission
C91.61	Prolymphocytic leukemia of T-cell type, in remission
C91.62	Prolymphocytic leukemia of T-cell type, in relapse
C91.90	Lymphoid leukemia, unspecified not having achieved remission
C91.91	Lymphoid leukemia, unspecified, in remission
C91.92	Lymphoid leukemia, unspecified, in relapse
C91.A0	Mature B-cell leukemia Burkitt-type not having achieved remission
C91.A1	Mature B-cell leukemia Burkitt-type, in remission
C91.A2	Mature B-cell leukemia Burkitt-type, in relapse
C91.Z0	Other lymphoid leukemia not having achieved remission
C91.Z1	Other lymphoid leukemia, in remission
C91.Z2	Other lymphoid leukemia, in relapse
C92.00	Acute myeloblastic leukemia, not having achieved remission
C92.01	Acute myeloblastic leukemia, in remission
C92.02	Acute myeloblastic leukemia, in relapse

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Code	Description
C92.10	Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission
C92.11	Chronic myeloid leukemia, BCR/ABL-positive, in remission
C92.12	Chronic myeloid leukemia, BCR/ABL-positive, in relapse
C92.20	Atypical chronic myeloid leukemia, BCR/ABL-negative, not having achieved remission
C92.21	Atypical chronic myeloid leukemia, BCR/ABL-negative, in remission
C92.22	Atypical chronic myeloid leukemia, BCR/ABL-negative, in relapse
C92.30	Myeloid sarcoma, not having achieved remission
C92.31	Myeloid sarcoma, in remission
C92.32	Myeloid sarcoma, in relapse
C92.40	Acute promyelocytic leukemia, not having achieved remission
C92.41	Acute promyelocytic leukemia, in remission
C92.42	Acute promyelocytic leukemia, in relapse
C92.50	Acute myelomonocytic leukemia, not having achieved remission
C92.51	Acute myelomonocytic leukemia, in remission
C92.52	Acute myelomonocytic leukemia, in relapse
C92.60	Acute myeloid leukemia with 11q23-abnormality not having achieved remission
C92.61	Acute myeloid leukemia with 11q23-abnormality in remission
C92.62	Acute myeloid leukemia with 11q23-abnormality in relapse
C92.90	Myeloid leukemia, unspecified, not having achieved remission
C92.91	Myeloid leukemia, unspecified in remission
C92.92	Myeloid leukemia, unspecified in relapse
C92.A0	Acute myeloid leukemia with multilineage dysplasia, not having achieved remission
C92.A1	Acute myeloid leukemia with multilineage dysplasia, in remission
C92.A2	Acute myeloid leukemia with multilineage dysplasia, in relapse
C92.Z0	Other myeloid leukemia not having achieved remission
C92.Z1	Other myeloid leukemia, in remission
C92.Z2	Other myeloid leukemia, in relapse
C93.00	Acute monoblastic/monocytic leukemia, not having achieved remission
C93.01	Acute monoblastic/monocytic leukemia, in remission
C93.02	Acute monoblastic/monocytic leukemia, in relapse

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Code	Description
C93.10	Chronic myelomonocytic leukemia not having achieved remission
C93.11	Chronic myelomonocytic leukemia, in remission
C93.12	Chronic myelomonocytic leukemia, in relapse
C93.30	Juvenile myelomonocytic leukemia, not having achieved remission
C93.31	Juvenile myelomonocytic leukemia, in remission
C93.32	Juvenile myelomonocytic leukemia, in relapse
C93.90	Monocytic leukemia, unspecified, not having achieved remission
C93.91	Monocytic leukemia, unspecified in remission
C93.92	Monocytic leukemia, unspecified in relapse
C93.Z0	Other monocytic leukemia, not having achieved remission
C93.Z1	Other monocytic leukemia, in remission
C93.Z2	Other monocytic leukemia, in relapse
C94.00	Acute erythroid leukemia, not having achieved remission
C94.01	Acute erythroid leukemia, in remission
C94.02	Acute erythroid leukemia, in relapse
C94.20	Acute megakaryoblastic leukemia not having achieved remission
C94.21	Acute megakaryoblastic leukemia, in remission
C94.22	Acute megakaryoblastic leukemia, in relapse
C94.30	Mast cell leukemia not having achieved remission
C94.31	Mast cell leukemia, in remission
C94.32	Mast cell leukemia, in relapse
C94.80	Other specified leukemias not having achieved remission
C94.81	Other specified leukemias, in remission
C94.82	Other specified leukemias, in relapse
C95.00	Acute leukemia of unspecified cell type not having achieved remission
C95.01	Acute leukemia of unspecified cell type, in remission
C95.02	Acute leukemia of unspecified cell type, in relapse
C95.10	Chronic leukemia of unspecified cell type not having achieved remission
C95.11	Chronic leukemia of unspecified cell type, in remission
C95.12	Chronic leukemia of unspecified cell type, in relapse

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Code	Description
C95.90	Leukemia, unspecified not having achieved remission
C95.91	Leukemia, unspecified, in remission
C95.92	Leukemia, unspecified, in relapse
D00.2	Carcinoma in situ of stomach
D01.0	Carcinoma in situ of colon
D01.1	Carcinoma in situ of rectosigmoid junction
D01.2	Carcinoma in situ of rectum
D01.3	Carcinoma in situ of anus and anal canal
D01.40	Carcinoma in situ of unspecified part of intestine
D01.49	Carcinoma in situ of other parts of intestine
D01.5	Carcinoma in situ of liver, gallbladder and bile ducts
D01.7	Carcinoma in situ of other specified digestive organs
D01.9	Carcinoma in situ of digestive organ, unspecified
D12.0	Benign neoplasm of cecum
D12.1	Benign neoplasm of appendix
D12.2	Benign neoplasm of ascending colon
D12.3	Benign neoplasm of transverse colon
D12.4	Benign neoplasm of descending colon
D12.5	Benign neoplasm of sigmoid colon
D12.6	Benign neoplasm of colon, unspecified
D12.7	Benign neoplasm of rectosigmoid junction
D12.8	Benign neoplasm of rectum
D12.9	Benign neoplasm of anus and anal canal
D13.0	Benign neoplasm of esophagus
D13.1	Benign neoplasm of stomach
D13.2	Benign neoplasm of duodenum
D13.30	Benign neoplasm of unspecified part of small intestine
D13.39	Benign neoplasm of other parts of small intestine
D13.4	Benign neoplasm of liver
D13.5	Benign neoplasm of extrahepatic bile ducts

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Code	Description
D13.6	Benign neoplasm of pancreas
D13.7	Benign neoplasm of endocrine pancreas
D13.9	Benign neoplasm of ill-defined sites within the digestive system
D18.03	Hemangioma of intra-abdominal structures
D19.1	Benign neoplasm of mesothelial tissue of peritoneum
D20.0	Benign neoplasm of soft tissue of retroperitoneum
D20.1	Benign neoplasm of soft tissue of peritoneum
D37.1	Neoplasm of uncertain behavior of stomach
D37.2	Neoplasm of uncertain behavior of small intestine
D37.3	Neoplasm of uncertain behavior of appendix
D37.4	Neoplasm of uncertain behavior of colon
D37.5	Neoplasm of uncertain behavior of rectum
D37.8	Neoplasm of uncertain behavior of other specified digestive organs
D37.9	Neoplasm of uncertain behavior of digestive organ, unspecified
D3A.010	Benign carcinoid tumor of the duodenum
D3A.011	Benign carcinoid tumor of the jejunum
D3A.012	Benign carcinoid tumor of the ileum
D3A.019	Benign carcinoid tumor of the small intestine, unspecified portion
D3A.020	Benign carcinoid tumor of the appendix
D3A.021	Benign carcinoid tumor of the cecum
D3A.022	Benign carcinoid tumor of the ascending colon
D3A.023	Benign carcinoid tumor of the transverse colon
D3A.024	Benign carcinoid tumor of the descending colon
D3A.025	Benign carcinoid tumor of the sigmoid colon
D3A.026	Benign carcinoid tumor of the rectum
D3A.029	Benign carcinoid tumor of the large intestine, unspecified portion
D45	Polycythemia vera
D49.0	Neoplasm of unspecified behavior of digestive system
D50.0	Iron deficiency anemia secondary to blood loss (chronic)
D50.1	Sideropenic dysphagia

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Code	Description
D50.8	Other iron deficiency anemias
D50.9	Iron deficiency anemia, unspecified
D61.82	Myelophthisis
D62	Acute posthemorrhagic anemia
D63.0	Anemia in neoplastic disease
D63.1	Anemia in chronic kidney disease
D63.8	Anemia in other chronic diseases classified elsewhere
D64.0	Hereditary sideroblastic anemia
D64.1	Secondary sideroblastic anemia due to disease
D64.2	Secondary sideroblastic anemia due to drugs and toxins
D64.3	Other sideroblastic anemias
D64.4	Congenital dyserythropoietic anemia
D64.81	Anemia due to antineoplastic chemotherapy
D64.89	Other specified anemias
D64.9	Anemia, unspecified
D65	Disseminated intravascular coagulation [defibrination syndrome]
D66	Hereditary factor VIII deficiency
D67	Hereditary factor IX deficiency
D68.0	Von Willebrand's disease
D68.1	Hereditary factor XI deficiency
D68.2	Hereditary deficiency of other clotting factors
D68.311	Acquired hemophilia
D68.312	Antiphospholipid antibody with hemorrhagic disorder
D68.318	Other hemorrhagic disorder due to intrinsic circulating anticoagulants, antibodies, or inhibitors
D68.32	Hemorrhagic disorder due to extrinsic circulating anticoagulants
D68.4	Acquired coagulation factor deficiency
D68.8	Other specified coagulation defects
D68.9	Coagulation defect, unspecified
D69.0	Allergic purpura
D69.1	Qualitative platelet defects

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Code	Description
D69.2	Other nonthrombocytopenic purpura
D69.3	Immune thrombocytopenic purpura
D69.41	Evans syndrome
D69.42	Congenital and hereditary thrombocytopenia purpura
D69.49	Other primary thrombocytopenia
D69.51	Posttransfusion purpura
D69.59	Other secondary thrombocytopenia
D69.6	Thrombocytopenia, unspecified
D69.8	Other specified hemorrhagic conditions
D69.9	Hemorrhagic condition, unspecified
G89.3	Neoplasm related pain (acute) (chronic)
G93.3	Postviral fatigue syndrome
I78.0	Hereditary hemorrhagic telangiectasia
I85.00	Esophageal varices without bleeding
I85.01	Esophageal varices with bleeding
I85.10	Secondary esophageal varices without bleeding
I85.11	Secondary esophageal varices with bleeding
J86.0	Pyothorax with fistula
K20.0	Eosinophilic esophagitis
K20.8	Other esophagitis
K20.9	Esophagitis, unspecified
K21.0	Gastro-esophageal reflux disease with esophagitis
K21.9	Gastro-esophageal reflux disease without esophagitis
K22.10	Ulcer of esophagus without bleeding
K22.11	Ulcer of esophagus with bleeding
K22.2	Esophageal obstruction
K22.3	Perforation of esophagus
K22.4	Dyskinesia of esophagus
K22.5	Diverticulum of esophagus, acquired
K22.6	Gastro-esophageal laceration-hemorrhage syndrome

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Code	Description
K22.70	Barrett's esophagus without dysplasia
K22.710	Barrett's esophagus with low grade dysplasia
K22.711	Barrett's esophagus with high grade dysplasia
K22.719	Barrett's esophagus with dysplasia, unspecified
K22.8	Other specified diseases of esophagus
K22.9	Disease of esophagus, unspecified
K23	Disorders of esophagus in diseases classified elsewhere
K25.0	Acute gastric ulcer with hemorrhage
K25.1	Acute gastric ulcer with perforation
K25.2	Acute gastric ulcer with both hemorrhage and perforation
K25.3	Acute gastric ulcer without hemorrhage or perforation
K25.4	Chronic or unspecified gastric ulcer with hemorrhage
K25.5	Chronic or unspecified gastric ulcer with perforation
K25.6	Chronic or unspecified gastric ulcer with both hemorrhage and perforation
K25.7	Chronic gastric ulcer without hemorrhage or perforation
K25.9	Gastric ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K26.0	Acute duodenal ulcer with hemorrhage
K26.1	Acute duodenal ulcer with perforation
K26.2	Acute duodenal ulcer with both hemorrhage and perforation
K26.3	Acute duodenal ulcer without hemorrhage or perforation
K26.4	Chronic or unspecified duodenal ulcer with hemorrhage
K26.5	Chronic or unspecified duodenal ulcer with perforation
K26.6	Chronic or unspecified duodenal ulcer with both hemorrhage and perforation
K26.7	Chronic duodenal ulcer without hemorrhage or perforation
K26.9	Duodenal ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K27.0	Acute peptic ulcer, site unspecified, with hemorrhage
K27.1	Acute peptic ulcer, site unspecified, with perforation
K27.2	Acute peptic ulcer, site unspecified, with both hemorrhage and perforation
K27.3	Acute peptic ulcer, site unspecified, without hemorrhage or perforation
K27.4	Chronic or unspecified peptic ulcer, site unspecified, with hemorrhage



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Code	Description
K27.5	Chronic or unspecified peptic ulcer, site unspecified, with perforation
K27.6	Chronic or unspecified peptic ulcer, site unspecified, with both hemorrhage and perforation
K27.7	Chronic peptic ulcer, site unspecified, without hemorrhage or perforation
K27.9	Peptic ulcer, site unspecified, unspecified as acute or chronic, without hemorrhage or perforation
K28.0	Acute gastrojejunal ulcer with hemorrhage
K28.1	Acute gastrojejunal ulcer with perforation
K28.2	Acute gastrojejunal ulcer with both hemorrhage and perforation
K28.3	Acute gastrojejunal ulcer without hemorrhage or perforation
K28.4	Chronic or unspecified gastrojejunal ulcer with hemorrhage
K28.5	Chronic or unspecified gastrojejunal ulcer with perforation
K28.6	Chronic or unspecified gastrojejunal ulcer with both hemorrhage and perforation
K28.7	Chronic gastrojejunal ulcer without hemorrhage or perforation
K28.9	Gastrojejunal ulcer, unspecified as acute or chronic, without hemorrhage or perforation
K29.00	Acute gastritis without bleeding
K29.01	Acute gastritis with bleeding
K29.20	Alcoholic gastritis without bleeding
K29.21	Alcoholic gastritis with bleeding
K29.30	Chronic superficial gastritis without bleeding
K29.31	Chronic superficial gastritis with bleeding
K29.40	Chronic atrophic gastritis without bleeding
K29.41	Chronic atrophic gastritis with bleeding
K29.50	Unspecified chronic gastritis without bleeding
K29.51	Unspecified chronic gastritis with bleeding
K29.60	Other gastritis without bleeding
K29.61	Other gastritis with bleeding
K29.70	Gastritis, unspecified, without bleeding
K29.71	Gastritis, unspecified, with bleeding
K29.80	Duodenitis without bleeding
K29.81	Duodenitis with bleeding
K29.90	Gastroduodenitis, unspecified, without bleeding

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Code	Description
K29.91	Gastroduodenitis, unspecified, with bleeding
K30	Functional dyspepsia
K31.1	Adult hypertrophic pyloric stenosis
K31.4	Gastric diverticulum
K31.5	Obstruction of duodenum
K31.6	Fistula of stomach and duodenum
K31.7	Polyp of stomach and duodenum
K31.811	Angiodysplasia of stomach and duodenum with bleeding
K31.819	Angiodysplasia of stomach and duodenum without bleeding
K31.82	Dieulafoy lesion (hemorrhagic) of stomach and duodenum
K31.89	Other diseases of stomach and duodenum
K31.9	Disease of stomach and duodenum, unspecified
K50.00	Crohn's disease of small intestine without complications
K50.011	Crohn's disease of small intestine with rectal bleeding
K50.012	Crohn's disease of small intestine with intestinal obstruction
K50.013	Crohn's disease of small intestine with fistula
K50.014	Crohn's disease of small intestine with abscess
K50.018	Crohn's disease of small intestine with other complication
K50.019	Crohn's disease of small intestine with unspecified complications
K50.10	Crohn's disease of large intestine without complications
K50.111	Crohn's disease of large intestine with rectal bleeding
K50.112	Crohn's disease of large intestine with intestinal obstruction
K50.113	Crohn's disease of large intestine with fistula
K50.114	Crohn's disease of large intestine with abscess
K50.118	Crohn's disease of large intestine with other complication
K50.119	Crohn's disease of large intestine with unspecified complications
K50.80	Crohn's disease of both small and large intestine without complications
K50.811	Crohn's disease of both small and large intestine with rectal bleeding
K50.812	Crohn's disease of both small and large intestine with intestinal obstruction
K50.813	Crohn's disease of both small and large intestine with fistula

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Code	Description
K50.814	Crohn's disease of both small and large intestine with abscess
K50.818	Crohn's disease of both small and large intestine with other complication
K50.819	Crohn's disease of both small and large intestine with unspecified complications
K50.90	Crohn's disease, unspecified, without complications
K50.911	Crohn's disease, unspecified, with rectal bleeding
K50.912	Crohn's disease, unspecified, with intestinal obstruction
K50.913	Crohn's disease, unspecified, with fistula
K50.914	Crohn's disease, unspecified, with abscess
K50.918	Crohn's disease, unspecified, with other complication
K50.919	Crohn's disease, unspecified, with unspecified complications
K51.00	Ulcerative (chronic) pancolitis without complications
K51.011	Ulcerative (chronic) pancolitis with rectal bleeding
K51.012	Ulcerative (chronic) pancolitis with intestinal obstruction
K51.013	Ulcerative (chronic) pancolitis with fistula
K51.014	Ulcerative (chronic) pancolitis with abscess
K51.018	Ulcerative (chronic) pancolitis with other complication
K51.019	Ulcerative (chronic) pancolitis with unspecified complications
K51.20	Ulcerative (chronic) proctitis without complications
K51.211	Ulcerative (chronic) proctitis with rectal bleeding
K51.212	Ulcerative (chronic) proctitis with intestinal obstruction
K51.213	Ulcerative (chronic) proctitis with fistula
K51.214	Ulcerative (chronic) proctitis with abscess
K51.218	Ulcerative (chronic) proctitis with other complication
K51.219	Ulcerative (chronic) proctitis with unspecified complications
K51.30	Ulcerative (chronic) rectosigmoiditis without complications
K51.311	Ulcerative (chronic) rectosigmoiditis with rectal bleeding
K51.312	Ulcerative (chronic) rectosigmoiditis with intestinal obstruction
K51.313	Ulcerative (chronic) rectosigmoiditis with fistula
K51.314	Ulcerative (chronic) rectosigmoiditis with abscess
K51.318	Ulcerative (chronic) rectosigmoiditis with other complication

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Code	Description
K51.319	Ulcerative (chronic) rectosigmoiditis with unspecified complications
K51.40	Inflammatory polyps of colon without complications
K51.411	Inflammatory polyps of colon with rectal bleeding
K51.412	Inflammatory polyps of colon with intestinal obstruction
K51.413	Inflammatory polyps of colon with fistula
K51.414	Inflammatory polyps of colon with abscess
K51.418	Inflammatory polyps of colon with other complication
K51.419	Inflammatory polyps of colon with unspecified complications
K51.50	Left sided colitis without complications
K51.511	Left sided colitis with rectal bleeding
K51.512	Left sided colitis with intestinal obstruction
K51.513	Left sided colitis with fistula
K51.514	Left sided colitis with abscess
K51.518	Left sided colitis with other complication
K51.519	Left sided colitis with unspecified complications
K51.80	Other ulcerative colitis without complications
K51.811	Other ulcerative colitis with rectal bleeding
K51.812	Other ulcerative colitis with intestinal obstruction
K51.813	Other ulcerative colitis with fistula
K51.814	Other ulcerative colitis with abscess
K51.818	Other ulcerative colitis with other complication
K51.819	Other ulcerative colitis with unspecified complications
K51.90	Ulcerative colitis, unspecified, without complications
K51.911	Ulcerative colitis, unspecified with rectal bleeding
K51.912	Ulcerative colitis, unspecified with intestinal obstruction
K51.913	Ulcerative colitis, unspecified with fistula
K51.914	Ulcerative colitis, unspecified with abscess
K51.918	Ulcerative colitis, unspecified with other complication
K51.919	Ulcerative colitis, unspecified with unspecified complications
K52.0	Gastroenteritis and colitis due to radiation

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Code	Description
K52.1	Toxic gastroenteritis and colitis
K52.21	Food protein-induced enterocolitis syndrome
K52.22	Food protein-induced enteropathy
K52.29	Other allergic and dietetic gastroenteritis and colitis
*K52.3	*Indeterminate colitis
K52.81	Eosinophilic gastritis or gastroenteritis
K52.82	Eosinophilic colitis
*K52.831	*Collagenous colitis
*K52.832	*Lymphocytic colitis
*K52.838	*Other microscopic colitis
*K52.839	*Microscopic colitis, unspecified
K52.89	Other specified noninfective gastroenteritis and colitis
K52.9	Noninfective gastroenteritis and colitis, unspecified
K55.011	Focal (segmental) acute (reversible) ischemia of small intestine
K55.012	Diffuse acute (reversible) ischemia of small intestine
K55.019	Acute (reversible) ischemia of small intestine, extent unspecified
K55.021	Focal (segmental) acute infarction of small intestine
K55.022	Diffuse acute infarction of small intestine
K55.029	Acute infarction of small intestine, extent unspecified
K55.031	Focal (segmental) acute (reversible) ischemia of large intestine
K55.032	Diffuse acute (reversible) ischemia of large intestine
K55.039	Acute (reversible) ischemia of large intestine, extent unspecified
K55.041	Focal (segmental) acute infarction of large intestine
K55.042	Diffuse acute infarction of large intestine
K55.049	Acute infarction of large intestine, extent unspecified
K55.051	Focal (segmental) acute (reversible) ischemia of intestine, part unspecified
K55.052	Diffuse acute (reversible) ischemia of intestine, part unspecified
K55.059	Acute (reversible) ischemia of intestine, part and extent unspecified
K55.061	Focal (segmental) acute infarction of intestine, part unspecified
K55.062	Diffuse acute infarction of intestine, part unspecified

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Code	Description
K55.069	Acute infarction of intestine, part and extent unspecified
K55.1	Chronic vascular disorders of intestine
K55.20	Angiodysplasia of colon without hemorrhage
K55.21	Angiodysplasia of colon with hemorrhage
*K55.30	*Necrotizing enterocolitis, unspecified
*K55.31	*Stage 1 necrotizing enterocolitis
*K55.32	*Stage 2 necrotizing enterocolitis
*K55.33	*Stage 3 necrotizing enterocolitis
K55.8	Other vascular disorders of intestine
K55.9	Vascular disorder of intestine, unspecified
K56.0	Paralytic ileus
K56.1	Intussusception
K56.2	Volvulus
K56.3	Gallstone ileus
K56.41	Fecal impaction
K56.49	Other impaction of intestine
K56.7	Ileus, unspecified
K57.20	Diverticulitis of large intestine with perforation and abscess without bleeding
K57.21	Diverticulitis of large intestine with perforation and abscess with bleeding
K57.30	Diverticulosis of large intestine without perforation or abscess without bleeding
K57.31	Diverticulosis of large intestine without perforation or abscess with bleeding
K57.32	Diverticulitis of large intestine without perforation or abscess without bleeding
K57.33	Diverticulitis of large intestine without perforation or abscess with bleeding
K57.40	Diverticulitis of both small and large intestine with perforation and abscess without bleeding
K57.41	Diverticulitis of both small and large intestine with perforation and abscess with bleeding
K57.50	Diverticulosis of both small and large intestine without perforation or abscess without bleeding
K57.51	Diverticulosis of both small and large intestine without perforation or abscess with bleeding
K57.52	Diverticulitis of both small and large intestine without perforation or abscess without bleeding



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Code	Description
K57.53	Diverticulitis of both small and large intestine without perforation or abscess with bleeding
K57.80	Diverticulitis of intestine, part unspecified, with perforation and abscess without bleeding
K57.81	Diverticulitis of intestine, part unspecified, with perforation and abscess with bleeding
K57.90	Diverticulosis of intestine, part unspecified, without perforation or abscess without bleeding
K57.91	Diverticulosis of intestine, part unspecified, without perforation or abscess with bleeding
K57.92	Diverticulitis of intestine, part unspecified, without perforation or abscess without bleeding
K57.93	Diverticulitis of intestine, part unspecified, without perforation or abscess with bleeding
K58.0	Irritable bowel syndrome with diarrhea
*K58.1	*Irritable bowel syndrome with constipation
*K58.2	*Mixed irritable bowel syndrome
*K58.8	*Other irritable bowel syndrome
K58.9	Irritable bowel syndrome without diarrhea
K59.00	Constipation, unspecified
K59.01	Slow transit constipation
K59.02	Outlet dysfunction constipation
*K59.04	*Chronic idiopathic constipation
K59.09	Other constipation
K59.1	Functional diarrhea
K59.2	Neurogenic bowel, not elsewhere classified
*K59.31	*Toxic megacolon
K59.39	Other megacolon
K59.4	Anal spasm
K59.8	Other specified functional intestinal disorders
K59.9	Functional intestinal disorder, unspecified
K60.0	Acute anal fissure
K60.1	Chronic anal fissure
K60.2	Anal fissure, unspecified
K60.3	Anal fistula
K60.4	Rectal fistula
K60.5	Anorectal fistula



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Code	Description
K62.0	Anal polyp
K62.1	Rectal polyp
K62.2	Anal prolapse
K62.3	Rectal prolapse
K62.5	Hemorrhage of anus and rectum
K62.6	Ulcer of anus and rectum
K62.7	Radiation proctitis
K62.81	Anal sphincter tear (healed) (nontraumatic) (old)
K62.82	Dysplasia of anus
K62.89	Other specified diseases of anus and rectum
K62.9	Disease of anus and rectum, unspecified
K63.1	Perforation of intestine (nontraumatic)
K63.3	Ulcer of intestine
K63.5	Polyp of colon
K63.81	Dieulafoy lesion of intestine
K64.0	First degree hemorrhoids
K64.1	Second degree hemorrhoids
K64.2	Third degree hemorrhoids
K64.3	Fourth degree hemorrhoids
K64.4	Residual hemorrhoidal skin tags
K64.5	Perianal venous thrombosis
K64.8	Other hemorrhoids
K64.9	Unspecified hemorrhoids
K70.0	Alcoholic fatty liver
K70.10	Alcoholic hepatitis without ascites
K70.11	Alcoholic hepatitis with ascites
K70.2	Alcoholic fibrosis and sclerosis of liver
K70.30	Alcoholic cirrhosis of liver without ascites
K70.31	Alcoholic cirrhosis of liver with ascites
K70.40	Alcoholic hepatic failure without coma

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Code	Description
K70.41	Alcoholic hepatic failure with coma
K70.9	Alcoholic liver disease, unspecified
K73.0	Chronic persistent hepatitis, not elsewhere classified
K73.1	Chronic lobular hepatitis, not elsewhere classified
K73.2	Chronic active hepatitis, not elsewhere classified
K73.8	Other chronic hepatitis, not elsewhere classified
K73.9	Chronic hepatitis, unspecified
K74.0	Hepatic fibrosis
K74.1	Hepatic sclerosis
K74.2	Hepatic fibrosis with hepatic sclerosis
K74.3	Primary biliary cirrhosis
K74.4	Secondary biliary cirrhosis
K74.5	Biliary cirrhosis, unspecified
K74.60	Unspecified cirrhosis of liver
K74.69	Other cirrhosis of liver
K75.4	Autoimmune hepatitis
K75.81	Nonalcoholic steatohepatitis (NASH)
K76.0	Fatty (change of) liver, not elsewhere classified
K76.89	Other specified diseases of liver
K76.9	Liver disease, unspecified
K85.00	Idiopathic acute pancreatitis without necrosis or infection
K85.01	Idiopathic acute pancreatitis with uninfected necrosis
K85.02	Idiopathic acute pancreatitis with infected necrosis
K85.10	Biliary acute pancreatitis without necrosis or infection
K85.11	Biliary acute pancreatitis with uninfected necrosis
K85.12	Biliary acute pancreatitis with infected necrosis
K85.20	Alcohol induced acute pancreatitis without necrosis or infection
K85.21	Alcohol induced acute pancreatitis with uninfected necrosis
K85.22	Alcohol induced acute pancreatitis with infected necrosis
K85.30	Drug induced acute pancreatitis without necrosis or infection

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Code	Description
K85.31	Drug induced acute pancreatitis with uninfected necrosis
K85.32	Drug induced acute pancreatitis with infected necrosis
K85.80	Other acute pancreatitis without necrosis or infection
K85.81	Other acute pancreatitis with uninfected necrosis
K85.82	Other acute pancreatitis with infected necrosis
K85.90	Acute pancreatitis without necrosis or infection, unspecified
K85.91	Acute pancreatitis with uninfected necrosis, unspecified
K85.92	Acute pancreatitis with infected necrosis, unspecified
K86.0	Alcohol-induced chronic pancreatitis
K86.1	Other chronic pancreatitis
K86.2	Cyst of pancreas
K86.3	Pseudocyst of pancreas
K86.81	Exocrine pancreatic insufficiency
K86.89	Other specified diseases of pancreas
K86.9	Disease of pancreas, unspecified
K87	Disorders of gallbladder, biliary tract and pancreas in diseases classified elsewhere
K90.0	Celiac disease
K90.41	Non-celiac gluten sensitivity
K90.49	Malabsorption due to intolerance, not elsewhere classified
K90.81	Whipple's disease
K90.89	Other intestinal malabsorption
K91.0	Vomiting following gastrointestinal surgery
K91.1	Postgastric surgery syndromes
K91.89	Other postprocedural complications and disorders of digestive system
K92.0	Hematemesis
K92.1	Melena
K92.2	Gastrointestinal hemorrhage, unspecified
K94.30	Esophagostomy complications, unspecified
K94.31	Esophagostomy hemorrhage
K94.32	Esophagostomy infection

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Code	Description
K94.33	Esophagostomy malfunction
K94.39	Other complications of esophagostomy
N32.1	Vesicointestinal fistula
N80.5	Endometriosis of intestine
R10.0	Acute abdomen
R10.10	Upper abdominal pain, unspecified
R10.11	Right upper quadrant pain
R10.12	Left upper quadrant pain
R10.13	Epigastric pain
R10.2	Pelvic and perineal pain
R10.30	Lower abdominal pain, unspecified
R10.31	Right lower quadrant pain
R10.32	Left lower quadrant pain
R10.33	Periumbilical pain
R10.811	Right upper quadrant abdominal tenderness
R10.812	Left upper quadrant abdominal tenderness
R10.813	Right lower quadrant abdominal tenderness
R10.814	Left lower quadrant abdominal tenderness
R10.815	Periumbilic abdominal tenderness
R10.816	Epigastric abdominal tenderness
R10.817	Generalized abdominal tenderness
R10.819	Abdominal tenderness, unspecified site
R10.821	Right upper quadrant rebound abdominal tenderness
R10.822	Left upper quadrant rebound abdominal tenderness
R10.823	Right lower quadrant rebound abdominal tenderness
R10.824	Left lower quadrant rebound abdominal tenderness
R10.825	Periumbilic rebound abdominal tenderness
R10.826	Epigastric rebound abdominal tenderness
R10.827	Generalized rebound abdominal tenderness
R10.829	Rebound abdominal tenderness, unspecified site

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Code	Description
R10.83	Colic
R10.84	Generalized abdominal pain
R10.9	Unspecified abdominal pain
R11.0	Nausea
R11.10	Vomiting, unspecified
R11.11	Vomiting without nausea
R11.12	Projectile vomiting
R11.13	Vomiting of fecal matter
R11.14	Bilious vomiting
R11.2	Nausea with vomiting, unspecified
R12	Heartburn
R13.0	Aphagia
R13.10	Dysphagia, unspecified
R13.11	Dysphagia, oral phase
R13.12	Dysphagia, oropharyngeal phase
R13.13	Dysphagia, pharyngeal phase
R13.14	Dysphagia, pharyngoesophageal phase
R13.19	Other dysphagia
R18.0	Malignant ascites
R18.8	Other ascites
R19.00	Intra-abdominal and pelvic swelling, mass and lump, unspecified site
R19.01	Right upper quadrant abdominal swelling, mass and lump
R19.02	Left upper quadrant abdominal swelling, mass and lump
R19.03	Right lower quadrant abdominal swelling, mass and lump
R19.04	Left lower quadrant abdominal swelling, mass and lump
R19.05	Periumbilic swelling, mass or lump
R19.06	Epigastric swelling, mass or lump
R19.07	Generalized intra-abdominal and pelvic swelling, mass and lump
R19.09	Other intra-abdominal and pelvic swelling, mass and lump
R19.30	Abdominal rigidity, unspecified site

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Code	Description
R19.31	Right upper quadrant abdominal rigidity
R19.32	Left upper quadrant abdominal rigidity
R19.33	Right lower quadrant abdominal rigidity
R19.34	Left lower quadrant abdominal rigidity
R19.35	Periumbilic abdominal rigidity
R19.36	Epigastric abdominal rigidity
R19.37	Generalized abdominal rigidity
R19.4	Change in bowel habit
R19.5	Other fecal abnormalities
R19.7	Diarrhea, unspecified
R19.8	Other specified symptoms and signs involving the digestive system and abdomen
R53.0	Neoplastic (malignant) related fatigue
R53.1	Weakness
R53.2	Functional quadriplegia
R53.81	Other malaise
R53.82	Chronic fatigue, unspecified
R53.83	Other fatigue
R63.0	Anorexia
R63.4	Abnormal weight loss
R79.1	Abnormal coagulation profile
R93.5	Abnormal findings on diagnostic imaging of other abdominal regions, including retroperitoneum
R94.5	Abnormal results of liver function studies
S28.0XXA	Crushed chest, initial encounter
S31.001A	Unspecified open wound of lower back and pelvis with penetration into retroperitoneum, initial encounter
S31.609A	Unspecified open wound of abdominal wall, unspecified quadrant with penetration into peritoneal cavity, initial encounter
S35.00XA	Unspecified injury of abdominal aorta, initial encounter
S35.01XA	Minor laceration of abdominal aorta, initial encounter
S35.02XA	Major laceration of abdominal aorta, initial encounter

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Code	Description
S35.09XA	Other injury of abdominal aorta, initial encounter
S35.10XA	Unspecified injury of inferior vena cava, initial encounter
S35.11XA	Minor laceration of inferior vena cava, initial encounter
S35.12XA	Major laceration of inferior vena cava, initial encounter
S35.19XA	Other injury of inferior vena cava, initial encounter
S35.211A	Minor laceration of celiac artery, initial encounter
S35.212A	Major laceration of celiac artery, initial encounter
S35.218A	Other injury of celiac artery, initial encounter
S35.219A	Unspecified injury of celiac artery, initial encounter
S35.221A	Minor laceration of superior mesenteric artery, initial encounter
S35.222A	Major laceration of superior mesenteric artery, initial encounter
S35.228A	Other injury of superior mesenteric artery, initial encounter
S35.229A	Unspecified injury of superior mesenteric artery, initial encounter
S35.231A	Minor laceration of inferior mesenteric artery, initial encounter
S35.232A	Major laceration of inferior mesenteric artery, initial encounter
S35.238A	Other injury of inferior mesenteric artery, initial encounter
S35.239A	Unspecified injury of inferior mesenteric artery, initial encounter
S35.291A	Minor laceration of branches of celiac and mesenteric artery, initial encounter
S35.292A	Major laceration of branches of celiac and mesenteric artery, initial encounter
S35.298A	Other injury of branches of celiac and mesenteric artery, initial encounter
S35.299A	Unspecified injury of branches of celiac and mesenteric artery, initial encounter
S35.311A	Laceration of portal vein, initial encounter
S35.318A	Other specified injury of portal vein, initial encounter
S35.319A	Unspecified injury of portal vein, initial encounter
S35.321A	Laceration of splenic vein, initial encounter
S35.328A	Other specified injury of splenic vein, initial encounter
S35.329A	Unspecified injury of splenic vein, initial encounter
S35.331A	Laceration of superior mesenteric vein, initial encounter
S35.338A	Other specified injury of superior mesenteric vein, initial encounter
S35.339A	Unspecified injury of superior mesenteric vein, initial encounter

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Code	Description
S35.341A	Laceration of inferior mesenteric vein, initial encounter
S35.348A	Other specified injury of inferior mesenteric vein, initial encounter
S35.349A	Unspecified injury of inferior mesenteric vein, initial encounter
S35.401A	Unspecified injury of right renal artery, initial encounter
S35.402A	Unspecified injury of left renal artery, initial encounter
S35.403A	Unspecified injury of unspecified renal artery, initial encounter
S35.404A	Unspecified injury of right renal vein, initial encounter
S35.405A	Unspecified injury of left renal vein, initial encounter
S35.406A	Unspecified injury of unspecified renal vein, initial encounter
S35.411A	Laceration of right renal artery, initial encounter
S35.412A	Laceration of left renal artery, initial encounter
S35.413A	Laceration of unspecified renal artery, initial encounter
S35.414A	Laceration of right renal vein, initial encounter
S35.415A	Laceration of left renal vein, initial encounter
S35.416A	Laceration of unspecified renal vein, initial encounter
S35.491A	Other specified injury of right renal artery, initial encounter
S35.492A	Other specified injury of left renal artery, initial encounter
S35.493A	Other specified injury of unspecified renal artery, initial encounter
S35.494A	Other specified injury of right renal vein, initial encounter
S35.495A	Other specified injury of left renal vein, initial encounter
S35.496A	Other specified injury of unspecified renal vein, initial encounter
S35.50XA	Injury of unspecified iliac blood vessel(s), initial encounter
S35.511A	Injury of right iliac artery, initial encounter
S35.512A	Injury of left iliac artery, initial encounter
S35.513A	Injury of unspecified iliac artery, initial encounter
S35.514A	Injury of right iliac vein, initial encounter
S35.515A	Injury of left iliac vein, initial encounter
S35.516A	Injury of unspecified iliac vein, initial encounter
S35.531A	Injury of right uterine artery, initial encounter
S35.532A	Injury of left uterine artery, initial encounter

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Code	Description
S35.533A	Injury of unspecified uterine artery, initial encounter
S35.534A	Injury of right uterine vein, initial encounter
S35.535A	Injury of left uterine vein, initial encounter
S35.536A	Injury of unspecified uterine vein, initial encounter
S35.59XA	Injury of other iliac blood vessels, initial encounter
S35.8X1A	Laceration of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.8X8A	Other specified injury of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.8X9A	Unspecified injury of other blood vessels at abdomen, lower back and pelvis level, initial encounter
S35.90XA	Unspecified injury of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S35.91XA	Laceration of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S35.99XA	Other specified injury of unspecified blood vessel at abdomen, lower back and pelvis level, initial encounter
S36.112A	Contusion of liver, initial encounter
S36.113A	Laceration of liver, unspecified degree, initial encounter
S36.114A	Minor laceration of liver, initial encounter
S36.115A	Moderate laceration of liver, initial encounter
S36.116A	Major laceration of liver, initial encounter
S36.118A	Other injury of liver, initial encounter
S36.119A	Unspecified injury of liver, initial encounter
S36.200A	Unspecified injury of head of pancreas, initial encounter
S36.201A	Unspecified injury of body of pancreas, initial encounter
S36.202A	Unspecified injury of tail of pancreas, initial encounter
S36.209A	Unspecified injury of unspecified part of pancreas, initial encounter
S36.220A	Contusion of head of pancreas, initial encounter
S36.221A	Contusion of body of pancreas, initial encounter
S36.222A	Contusion of tail of pancreas, initial encounter
S36.229A	Contusion of unspecified part of pancreas, initial encounter

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Code	Description
S36.230A	Laceration of head of pancreas, unspecified degree, initial encounter
S36.231A	Laceration of body of pancreas, unspecified degree, initial encounter
S36.232A	Laceration of tail of pancreas, unspecified degree, initial encounter
S36.239A	Laceration of unspecified part of pancreas, unspecified degree, initial encounter
S36.240A	Minor laceration of head of pancreas, initial encounter
S36.241A	Minor laceration of body of pancreas, initial encounter
S36.242A	Minor laceration of tail of pancreas, initial encounter
S36.249A	Minor laceration of unspecified part of pancreas, initial encounter
S36.250A	Moderate laceration of head of pancreas, initial encounter
S36.251A	Moderate laceration of body of pancreas, initial encounter
S36.252A	Moderate laceration of tail of pancreas, initial encounter
S36.259A	Moderate laceration of unspecified part of pancreas, initial encounter
S36.260A	Major laceration of head of pancreas, initial encounter
S36.261A	Major laceration of body of pancreas, initial encounter
S36.262A	Major laceration of tail of pancreas, initial encounter
S36.269A	Major laceration of unspecified part of pancreas, initial encounter
S36.290A	Other injury of head of pancreas, initial encounter
S36.291A	Other injury of body of pancreas, initial encounter
S36.292A	Other injury of tail of pancreas, initial encounter
S36.299A	Other injury of unspecified part of pancreas, initial encounter
S36.30XA	Unspecified injury of stomach, initial encounter
S36.32XA	Contusion of stomach, initial encounter
S36.33XA	Laceration of stomach, initial encounter
S36.39XA	Other injury of stomach, initial encounter
S36.400A	Unspecified injury of duodenum, initial encounter
S36.408A	Unspecified injury of other part of small intestine, initial encounter
S36.409A	Unspecified injury of unspecified part of small intestine, initial encounter
S36.410A	Primary blast injury of duodenum, initial encounter
S36.418A	Primary blast injury of other part of small intestine, initial encounter
S36.419A	Primary blast injury of unspecified part of small intestine, initial encounter

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Code	Description
S36.420A	Contusion of duodenum, initial encounter
S36.428A	Contusion of other part of small intestine, initial encounter
S36.429A	Contusion of unspecified part of small intestine, initial encounter
S36.430A	Laceration of duodenum, initial encounter
S36.438A	Laceration of other part of small intestine, initial encounter
S36.439A	Laceration of unspecified part of small intestine, initial encounter
S36.490A	Other injury of duodenum, initial encounter
S36.498A	Other injury of other part of small intestine, initial encounter
S36.499A	Other injury of unspecified part of small intestine, initial encounter
S36.500A	Unspecified injury of ascending [right] colon, initial encounter
S36.501A	Unspecified injury of transverse colon, initial encounter
S36.502A	Unspecified injury of descending [left] colon, initial encounter
S36.503A	Unspecified injury of sigmoid colon, initial encounter
S36.508A	Unspecified injury of other part of colon, initial encounter
S36.509A	Unspecified injury of unspecified part of colon, initial encounter
S36.510A	Primary blast injury of ascending [right] colon, initial encounter
S36.511A	Primary blast injury of transverse colon, initial encounter
S36.512A	Primary blast injury of descending [left] colon, initial encounter
S36.513A	Primary blast injury of sigmoid colon, initial encounter
S36.518A	Primary blast injury of other part of colon, initial encounter
S36.519A	Primary blast injury of unspecified part of colon, initial encounter
S36.520A	Contusion of ascending [right] colon, initial encounter
S36.521A	Contusion of transverse colon, initial encounter
S36.522A	Contusion of descending [left] colon, initial encounter
S36.523A	Contusion of sigmoid colon, initial encounter
S36.528A	Contusion of other part of colon, initial encounter
S36.529A	Contusion of unspecified part of colon, initial encounter
S36.530A	Laceration of ascending [right] colon, initial encounter
S36.531A	Laceration of transverse colon, initial encounter
S36.532A	Laceration of descending [left] colon, initial encounter

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Code	Description
S36.533A	Laceration of sigmoid colon, initial encounter
S36.538A	Laceration of other part of colon, initial encounter
S36.539A	Laceration of unspecified part of colon, initial encounter
S36.590A	Other injury of ascending [right] colon, initial encounter
S36.591A	Other injury of transverse colon, initial encounter
S36.592A	Other injury of descending [left] colon, initial encounter
S36.593A	Other injury of sigmoid colon, initial encounter
S36.598A	Other injury of other part of colon, initial encounter
S36.599A	Other injury of unspecified part of colon, initial encounter
S36.60XA	Unspecified injury of rectum, initial encounter
S36.61XA	Primary blast injury of rectum, initial encounter
S36.62XA	Contusion of rectum, initial encounter
S36.63XA	Laceration of rectum, initial encounter
S36.69XA	Other injury of rectum, initial encounter
S36.899A	Unspecified injury of other intra-abdominal organs, initial encounter
S36.90XA	Unspecified injury of unspecified intra-abdominal organ, initial encounter
S37.001A	Unspecified injury of right kidney, initial encounter
S37.002A	Unspecified injury of left kidney, initial encounter
S37.009A	Unspecified injury of unspecified kidney, initial encounter
S37.011A	Minor contusion of right kidney, initial encounter
S37.012A	Minor contusion of left kidney, initial encounter
S37.019A	Minor contusion of unspecified kidney, initial encounter
S37.021A	Major contusion of right kidney, initial encounter
S37.022A	Major contusion of left kidney, initial encounter
S37.029A	Major contusion of unspecified kidney, initial encounter
S37.031A	Laceration of right kidney, unspecified degree, initial encounter
S37.032A	Laceration of left kidney, unspecified degree, initial encounter
S37.039A	Laceration of unspecified kidney, unspecified degree, initial encounter
S37.041A	Minor laceration of right kidney, initial encounter
S37.042A	Minor laceration of left kidney, initial encounter

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S37.049A	Minor laceration of unspecified kidney, initial encounter
S37.051A	Moderate laceration of right kidney, initial encounter
S37.052A	Moderate laceration of left kidney, initial encounter
S37.059A	Moderate laceration of unspecified kidney, initial encounter
S37.061A	Major laceration of right kidney, initial encounter
S37.062A	Major laceration of left kidney, initial encounter
S37.069A	Major laceration of unspecified kidney, initial encounter
S37.091A	Other injury of right kidney, initial encounter
S37.092A	Other injury of left kidney, initial encounter
S37.099A	Other injury of unspecified kidney, initial encounter
S38.1XXA	Crushing injury of abdomen, lower back, and pelvis, initial encounter
T45.511A	Poisoning by anticoagulants, accidental (unintentional), initial encounter
T45.512A	Poisoning by anticoagulants, intentional self-harm, initial encounter
T45.513A	Poisoning by anticoagulants, assault, initial encounter
T45.514A	Poisoning by anticoagulants, undetermined, initial encounter
T45.521A	Poisoning by antithrombotic drugs, accidental (unintentional), initial encounter
T45.522A	Poisoning by antithrombotic drugs, intentional self-harm, initial encounter
T45.523A	Poisoning by antithrombotic drugs, assault, initial encounter
T45.524A	Poisoning by antithrombotic drugs, undetermined, initial encounter
T50.905A	Adverse effect of unspecified drugs, medicaments and biological substances, initial encounter
T88.52XA	Failed moderate sedation during procedure, initial encounter
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z79.01	Long term (current) use of anticoagulants
Z79.02	Long term (current) use of antithrombotics/antiplatelets
Z79.1	Long term (current) use of non-steroidal anti-inflammatories (NSAID)
Z79.3	Long term (current) use of hormonal contraceptives
Z79.51	Long term (current) use of inhaled steroids
Z79.52	Long term (current) use of systemic steroids
Z79.82	Long term (current) use of aspirin

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Code	Description
*Z79.84	*Long term (current) use of oral hypoglycemic drugs
Z79.891	Long term (current) use of opiate analgesic
Z79.899	Other long term (current) drug therapy
Z85.00	Personal history of malignant neoplasm of unspecified digestive organ
Z85.01	Personal history of malignant neoplasm of esophagus
Z85.028	Personal history of other malignant neoplasm of stomach
Z85.038	Personal history of other malignant neoplasm of large intestine
Z85.048	Personal history of other malignant neoplasm of rectum, rectosigmoid junction, and anus
Z85.05	Personal history of malignant neoplasm of liver
Z85.068	Personal history of other malignant neoplasm of small intestine
Z85.07	Personal history of malignant neoplasm of pancreas
Z85.09	Personal history of malignant neoplasm of other digestive organs
Z85.810	Personal history of malignant neoplasm of tongue
Z85.818	Personal history of malignant neoplasm of other sites of lip, oral cavity, and pharynx
Z85.819	Personal history of malignant neoplasm of unspecified site of lip, oral cavity, and pharynx
Z86.010	Personal history of colonic polyps
Z86.19	Personal history of other infectious and parasitic diseases

Indications

1. To evaluate known or suspected alimentary tract conditions that might cause bleeding into the intestinal tract.
2. To evaluate unexpected anemia.
3. To evaluate abnormal signs, symptoms, or complaints that might be associated with loss of blood.
4. To evaluate patient complaints of black or red-tinged stools.

Limitations

1. The FOBT is reported once for the testing of up to three separate specimens (comprising either one or two tests per specimen).
2. In patients who are taking non-steroidal anti-inflammatory drugs and have a history of gastrointestinal bleeding but no other signs, symptoms, or complaints associated with gastrointestinal blood loss, testing for occult blood may generally be appropriate no more than once every three months.



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When testing is done for the purpose of screening for colorectal cancer in the absence of signs, symptoms, conditions, or complaints associated with gastrointestinal blood loss, report the HCPCS code for colorectal cancer screening; fecal-occult blood test, 1-3 simultaneous determinations should be used.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

Sources of Information

Ahlquist, D.A., "Approach to the patient with occult gastrointestinal bleeding," in Tadatake, Y. (ed.), *Textbook of Gastroenterology* (2nd ed.), 1995, J.B. Lippincott, pp. 699-717.

Tietz, N.W. (ed.), *Clinical guide to Laboratory Tests* (3rd ed.), 1995, pp.452-454.

Schleisenger, M.H., Wall, S.D., et al., "Part X. Gastrointestinal Diseases" in Wyngaarden, J.B., & Smith, L.H. (eds.), *Cecil Textbook of Medicine* (18th ed.), 1988, W.B. Saunders, pp. 656-807.

Harrison's Principles of Internal Medicine (14th ed.), 1998, McGraw Hill.

Wallach, J., *Interpretation of Diagnostic Tests*, 1996, Little Brown and Co.

Illustrated Guide to Diagnostic Tests (2nd ed.), 1997, Springhouse Corporation.

Sleisenger and Fordtrans's *Gastrointestinal and Liver Disease* (6th ed.), 1997, W.B. Saunders.