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GENERAL INFORMATION

2019 ICD Implementation

On October 1, 2018, Texas Medicaid & Healthcare Partnership (TMHP) applied the 2018 annual *International Classification of Diseases* (ICD) updates that are effective for dates of service on or after October 1, 2018. The annual ICD updates include the following:

- ICD-10 Clinical Modification (ICD-10-CM)
- ICD-10 Procedure Coding System (ICD-10-PCS)

This combined Special Bulletin includes the ICD updates for Texas Medicaid and the Children with Special Health Care Needs (CSHCN) Services Program. This bulletin is intended to notify providers of program and coding changes related to the 2019 updates for ICD and Current Procedural Terminology (CPT®).

All providers are encouraged to review the “General Information” section of this bulletin. Policy updates for a specific program or provider type are discussed in designated sections of the bulletin. ■

Claims Filing

The new 2019 ICD diagnosis codes and inpatient hospital surgical procedure codes may be billed beginning October 1, 2018. For billing on or after October 1, 2018, 2019 ICD codes **must** be billed for dates of service on or after October 1, 2018 and **may** be billed for dates of service prior to October 1, 2018.

Important: *To avoid fraudulent billing, providers must submit the ICD codes that are most appropriate for the services provided.*

The ICD-10-PCS procedure codes are inpatient hospital surgical procedure codes and must be submitted, as applicable, only on inpatient hospital claims.

Note: *For professional and outpatient procedures and services, providers must continue to use the American Medical Association (AMA) Current Procedural Terminology (CPT) manual and the Centers for Medicare & Medicaid Services (CMS) Health Care Common Procedure Coding System (HCPCS) manual.*



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MEDICAID FEE-FOR-SERVICE AND MANAGED CARE PROVIDERS

Texas Medicaid ICD Updates

The 2019 ICD updates for Texas Medicaid are included in the ICD tables in the “All Code Changes” section of this bulletin beginning on page 13. The 2019 ICD deletions and replacements are effective October 1, 2018, for dates of service on or after October 1, 2018, for Texas Medicaid. Providers may refer to the “General Information” section for more information.

Texas Medicaid Benefit Changes

The following Texas Medicaid benefit changes have been made to support the 2019 ICD-CM diagnosis code updates and are effective for dates of service on or after October 1, 2018. For more information, call the TMHP Contact Center at 1-800-925-9126.

Note: *These changes apply to Texas Medicaid fee-for-service and Medicaid managed care claims and authorization requests that are submitted to TMHP for processing.*

The policy articles in this bulletin contain the following information:

- **Revised:** The description has been revised for these diagnosis codes. Providers may refer to the appropriate copyright holder for the revised descriptions.
- **Discontinued:** Discontinued diagnosis codes are no longer reimbursed after September 30, 2018.
- **Added:** Added diagnosis codes are new diagnosis codes added by the Centers for Medicare & Medicaid Services (CMS).

Clinician-Administered Drug – Colony Stimulating Factors

The following diagnosis codes may be reimbursed for procedure codes J1442, J1447, J2505, J2820, and Q5101:

Added Diagnosis Codes							
C43111	C43112	C43121	C43122	C4A111	C4A112	C4A121	C4A122
D03111	D03112	D03121	D03122	D04111	D04112	D04121	D04122
Discontinued Diagnosis Codes							
C4311	C4312	C4A11	C4A12	D0311	D0312	D0411	D0412

Refer to: The current *Texas Medicaid Provider Procedures Manual, Clinician-Administered Drugs Handbook*, subsection 20, “Colony Stimulating Factors (Filgrastim, Pegfilgrastim, Sargramostim),” for more information.

Clinician-Administered Drug – Vitamin B12 Injections

The following diagnosis codes may be reimbursed when submitted with procedure code J3420:

Added Diagnosis Codes	
E7281	E7289
Discontinued Diagnosis Code	
E728	

Refer to: The current *Texas Medicaid Provider Procedures Manual, Clinician-Administered Drugs Handbook*, section 41, “Vitamin B12 (Cyanocobalamin) Injections,” for more information.

Cytogenetics Testing

The following diagnosis codes may be reimbursed for procedure codes 88230, 88233, 88235, 88237, 88239, 88245, 88248, 88249, 88261, 88262, 88263, 88264, 88271, 88272, 88273, 88274, 88275, 88280, 88283, 88285, 88289, and 88291:

Added Diagnosis Codes						
Q5120	Q5121	Q5122	Q5128	Q9351	Q9359	Q9382
Discontinued Diagnosis Codes						
Q512	Q935					

Refer to: The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, subsection 9.2.39.6, “Cytogenetics Testing,” for more information.

Diagnostic Doppler Sonography

The following diagnosis codes may be reimbursed for Extracranial Arterial Doppler Studies procedure codes 93880 and 93882:

Added Diagnosis Codes			
I6381	I6389	I67850	I67858
Discontinued Diagnosis Code			
I638			

The following diagnosis codes may be reimbursed for Transcranial Doppler Studies procedure codes 93886, 93888, 93890, 93892, and 93893:

Added Diagnosis Codes			
I6381	I6389	I67850	I67858
Discontinued Diagnosis Code			
I638			

Refer to: The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physicians Handbook*, subsection 9.2.26, “Diagnostic Doppler Sonography” for more information.

Echoencephalography

The following diagnosis codes may be reimbursed when submitted with procedure code 76506:

Added Diagnosis Codes			
I6381	I6389	I67850	I67858

Refer to: The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, section 9.2.25.5 "Echoencephalography," for more information.

Evoked Response Tests and Neuromuscular Procedures

The following diagnosis codes may be reimbursed for electromyography (EMG) and nerve conduction studies (NCS) procedure codes:

Added Diagnosis Codes							
E7281	E7289	E7841	E7849	G5131	G5132	G5133	G5139
G7100	G7101	G7102	G7109	M7910	M7911	M7912	M7918
Discontinued Diagnosis Codes							
G513	G710	M791					

Refer to: The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, subsection 9.2.27.2, "Electromyography and Nerve Conduction Studies," for more information.

Inpatient Behavioral Health

The following diagnosis codes may be reimbursed for psychological and neurological testing procedure codes 96101 and 96118:

Added Diagnosis Codes							
E7526	F1223	F1293	F530	F531	F68A	I6381	I6389
I67850	I67858	T7451XA	T7451XD	T7451XS	T7452XA	T7452XD	T7452XS
T7461XA	T7461XD	T7461XS	T7462XA	T7462XD	T7462XS	T7651XA	T7651XD
T7651XS	T7652XA	T7652XD	T7652XS	T7661XA	T7661XD	T7661XS	T7662XA
T7662XD	T7662XS						
Discontinued Diagnosis Code							
F53							

The following diagnosis codes may be reimbursed for psychotherapy and psychiatric diagnostic evaluation procedure codes 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90847, and 90853:

Added Diagnosis Codes							
F1223	F1293	F530	F531	F68A	T7451XA	T7451XD	T7451XS
T7452XA	T7452XD	T7452XS	T7461XA	T7461XD	T7461XS	T7462XA	T7462XD
T7462XS	T7651XA	T7651XD	T7651XS	T7652XA	T7652XD	T7652XS	T7661XA

Added Diagnosis Codes					
T7661XD	T7661XS	T7662XA	T7662XD	T7662XS	Z62813
Discontinued Diagnosis Code					
F53					

Refer to: The current *Texas Medicaid Provider Procedures Manual, Behavioral Health and Case Management Services Handbook*, for more information.

Mental Health Rehabilitation Services

The following diagnosis codes may be reimbursed for procedure codes H0034, H2012, H2014, and H2017:

Added Diagnosis Codes							
F530	F531	F68A	T7452XA	T7452XD	T7452XS	T7462XA	T7462XD
T7462XS	T7652XA	T7652XD	T7652XS	T7662XA	T7662XD	T7662XS	
Discontinued Diagnosis Code							
F53							

Refer to: The current *Texas Medicaid Provider Procedures Manual, Behavioral Health and Case Management Services Handbook*, subsection 5.2.3, "Mental Health Rehabilitative Services," for more information.

Mental Health Targeted Case Management

The following diagnosis code may be reimbursed when submitted with mental health targeted case management procedure code T1017:

Added Diagnosis Codes							
F530	F531	F68A	T7452XA	T7452XD	T7452XS	T7462XA	T7462XD
T7462XS	T7652XA	T7652XD	T7652XS	T7662XA	T7662XD	T7662XS	
Discontinued Diagnosis Code							
F53							

Refer to: The current *Texas Medicaid Provider Procedures Manual, Behavioral Health and Case Management Services Handbook*, subsection 5.2.2 "Mental Health Targeted Case Management (MHTCM)," for more information.

Outpatient Mental Health Services

The following diagnosis codes may be reimbursed for psychological, neurobehavioral and neuropsychological testing procedure codes 96101, 96116, and 96118:

Added Diagnosis Codes							
E7526	F1223	F1293	F530	F531	F68A	I6381	I6389
I67850	I67858	T7451XA	T7451XD	T7451XS	T7452XA	T7452XD	T7452XS
T7461XA	T7461XD	T7461XS	T7462XA	T7462XD	T7462XS	T7651XA	T7651XD
T7651XS	T7652XA	T7652XD	T7652XS	T7661XA	T7661XD	T7661XS	T7662XA
T7662XD	T7662XS						
Discontinued Diagnosis Code							
F53							

The following diagnosis codes may be reimbursed for psychotherapy and psychiatric diagnostic evaluation procedure codes 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90846, 90847, and 90853:

Added Diagnosis Codes							
F1223	F1293	F530	F531	F68A	T7451XA	T7451XD	T7451XS
T7452XA	T7452XD	T7452XS	T7461XA	T7461XD	T7461XS	T7462XA	T7462XD
T7462XS	T7651XA	T7651XD	T7651XS	T7652XA	T7652XD	T7652XS	T7661XA
T7661XD	T7661XS	T7662XA	T7662XD	T7662XS	Z62813		
Discontinued Diagnosis Code							
F53							

Refer to: The current *Texas Medicaid Provider Procedures Manual, Behavioral Health and Case Management Services Handbook*, subsection 4.2, "Services, Benefits, Limitations," for more information.

Pathology and Laboratory Services – Urinalysis/Chemistry

The following diagnosis codes may be reimbursed for procedure code 83698:

Added Diagnosis Codes	
E7841	E7849
Discontinued Diagnosis Code	
E784	

Refer to: The current *Texas Medicaid Provider Procedures Manual, Radiology and Laboratory Services Handbook*, subsection 2.2.16, "Urinalysis and Chemistry," for more information.

Sleep Studies

The following diagnosis codes may be reimbursed for procedure codes 95782, 95783, 95808, 95810, and 95811:

Added Diagnosis Codes			
G7100	G7101	G7102	G7109
Discontinued Diagnosis Code			
G710			

Refer to: The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physicians Assistants Handbook*, subsection 9.2.67.3, "Polysomnography," for more information.

Substance Use Disorder Services

The following diagnosis codes may be reimbursed for procedure codes H0004 and H0005:

Added Diagnosis Codes	
F1223	F1293

Refer to: The current *Texas Medicaid Provider Procedures Manual, Behavioral Health and Case Management Services Handbook*, subsection 8.6.2, "Ambulatory (Outpatient) Treatment Services," for more information.

Therapeutic Apheresis

The following diagnosis codes may be reimbursed when submitted with procedure codes 36511, 36512, 36513, 36514, and 36516:

Added Diagnosis Codes	
E7841	E7849

Refer to: The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physicians Assistants Handbook*, subsection 9.2.71, "Therapeutic Apheresis," for more information.

Vision Services - Nonsurgical

The following diagnosis codes may be reimbursed when submitted with polycarbonate lens procedure code V2784:

Added Diagnosis Codes			
G7100	G7101	G7102	G7109
Discontinued Diagnosis Code			
G710			

Refer to: The current *Texas Medicaid Provider Procedures Manual, Vision and Hearing Services Handbook*, subsection 4.3.6.1, "Eyeglass Lenses and Frames," for more information. ■

HOME HEALTH AND COMPREHENSIVE CARE PROGRAM (CCP) PROVIDERS

CCP Services Benefit Changes

The following Texas Medicaid CCP benefit changes have been made to support the 2019 ICD updates and are effective for dates of service on or after October 1, 2018. For more information, call the TMHP Contact Center at 1-800-925-9126.

Nutritional Products – CCP

Nutritional products may be reimbursed without prior authorization when they are submitted with the following diagnosis codes:

Added Diagnosis Codes							
E7289	E7526	E8802	P7422	P7432	P7441	P74422	P7449
Discontinued Diagnosis Codes							
E728	E784						

Refer to: The current *Texas Medicaid Provider Procedures Manual, Durable Medical Equipment, Medical Supplies, and Nutritional Products Handbook*, subsection 2.2.17.2.2, "Clients who are 20 years of age and younger," for more information. ■

HEALTHY TEXAS WOMEN (HTW) PROVIDERS

HTW Providers Benefit Changes

The following HHSC family planning benefit changes have been made to support the 2019 ICD updates and are effective for dates of service on or after October 1, 2018. For more information, call the TMHP Contact Center at 1-800-925-9126.

No benefit changes have been made to the Healthy Texas Women (HTW) program in response to the 2019 ICD updates. ■

CHILDREN WITH SPECIAL HEALTH CARE NEEDS (CSHCN) SERVICES PROGRAM PROVIDERS

CSHCN Services Program Updates

The 2019 ICD updates for the CSHCN Services Program are included in the ICD tables in the "All Code Changes" section of this bulletin beginning on page "All Code Changes: Added, Revised, and Discontinued" on page 13. The 2019 ICD deletions are effective October 1, 2018, for dates of service on or after October 1, 2018, for the CSHCN Services Program. Providers may refer to the "General Information" section for more information.

CSHCN Services Program Benefit Changes

The following CSHCN Services Program benefit changes have been made to support the 2019 ICD updates and are effective for dates of service on or after October 1, 2018. For more information, call the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.

The policy articles below contain the following information:

- **Revised:** The description has been revised for these diagnosis codes. Providers may refer to the appropriate copyright holder for the revised descriptions.
- **Discontinued:** Discontinued diagnosis codes are no longer reimbursed after September 30, 2018.
- **Added:** Added diagnosis codes are new procedure codes added by the Centers for Medicare & Medicaid Services (CMS).

Botulinum Toxin Type A and Type B

The following diagnosis codes may be reimbursed for procedure code J0585:

Added Diagnosis Codes			
G5131	G5132	G5133	G5139
Discontinued Diagnosis Code			
G513			

Refer to: The current *CSHCN Services Program Provider Manual*, subsection 31.2.25.7, "Botulinum Toxin (Type A and Type B)," for more information.

Cytogenetics Testing

The following diagnosis codes may be reimbursed when submitted with procedure codes 88230, 88233, 88237, 88239, 88245, 88248, 88249, 88261, 88262, 88263, 88264, 88271, 88272, 88273, 88274, 88275, 88280, 88283, 88285, 88289, and 88291:

Added Diagnosis Codes						
Q5120	Q5121	Q5122	Q5128	Q9351	Q9359	Q9382

Discontinued Diagnosis Codes

Q512	Q935
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Refer to: The current *CSHCN Services Program Provider Manual*, subsection 25.2.5.2, "Cytogenetics Testing," for more information.

Echoencephalography

The following diagnosis codes may be reimbursed for procedure code 76506:

Added Diagnosis Codes

I6381	I6389	I67850	I67858
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Refer to: The current *CSHCN Services Program Provider Manual*, subsection 31.2.17, "Echoencephalography," for more information.

Evoked Response Tests and Neuromuscular Procedures

The following diagnosis codes may be reimbursed for electromyography (EMG) and nerve conduction studies (NCS) procedure codes:

Added Diagnosis Codes

E7281	E7289	E7841	E7849	G5131	G5132	G5133	G5139
G7100	G7101	G7102	G7109	M7910	M7911	M7912	M7918

Discontinued Diagnosis Codes

G513	G710	M791
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Refer to: The current *CSHCN Services Program Provider Manual*, subsection 31.2.19.2, "Electromyography and Nerve Conduction Studies," for more information.

Expendable Medical Supplies

The following diagnosis codes may be reimbursed when submitted with the appropriate diapers, briefs, pull-ups, or liners procedure code:

Added Diagnosis Codes

G7100	G7101	G7102	G7109	N35016	N35116	N35811	N35812
N35813	N35814	N35816	N35819	N3582	N35911	N35912	N35913
N35914	N35916	N35919	N3592	N99116			

Discontinued Diagnosis Codes

G710	N358	N359
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Refer to: The current *CSHCN Services Program Provider Manual*, section 18.2.4, "Diapers, Briefs, Pull-ups, and Liners," for more information.

Medical Foods

The following diagnosis code may be reimbursed when submitted with procedure codes S9434 and S9435:

Added Diagnosis Code
E7289

Refer to: The current *CSHCN Services Program Provider Manual*, section 26.3, "Medical Foods," for more information.

Positron Emission Tomography (PET)

Positron Emission Tomography (PET) procedure codes 78811, 78812, 78113, 78815, and 78816 may be reimbursed when submitted with one of the following diagnosis codes:

Added Diagnosis Codes							
C43111	C43112	C43121	C43122	C441021	C441022	C441091	
C441092	C441121	C441122	C441191	C441192	C441221	C441222	
C441291	C441292	C441921	C441922	C441991	C441992	D03111	
D03112	D03121	D03122					
Discontinued Diagnosis Codes							
C4311	C4312	C44102	C44109	C44112	C44119	C44122	
C44129	C44192	C44199	D0311	D0312			

Refer to: The current *CSHCN Services Program Provider Manual*, subsection 16.2.9, "Positron Emission Tomography (PET)," for more information.

Therapeutic Apheresis

The following diagnosis codes may be reimbursed when submitted with procedure codes 36511, 36512, 36513, 36514, and 36516:

Added Diagnosis Codes	
E7841	E7849

Refer to: The current *CSHCN Services Program Provider Manual*, subsection 31.2.40, "Therapeutic Apheresis," for more information.

Vision Services – Nonsurgical

The following diagnosis codes may be reimbursed for corneal topography procedure code 92025:

Added Diagnosis Codes			
H10821	H10822	H10823	H10829

Refer to: The current *CSHCN Services Program Provider Manual*, subsection 40.2.3.3, "Corneal Topography," for more information. ■

ALL CODE CHANGES: ADDED, REVISED, AND DISCONTINUED**2019 ICD Diagnosis Code Additions**

The following is a list of new ICD diagnosis codes:

Added Diagnosis Codes						
C43111	C43112	C43121	C43122	C4A111	C4A112	C4A121
C4A122	C441021	C441022	C441091	C441092	C441121	C441122
C441191	C441192	C441221	C441222	C441291	C441292	C44131
C441321	C441322	C441391	C441392	C441921	C441922	C441991
C441992	D03111	D03112	D03121	D03122	D04111	D04112
D04121	D04122	D22111	D22112	D22121	D22122	D23111
D23112	D23121	D23122	E7281	E7289	E7526	E7841
E7849	E8802	F1223	F1293	F530	F531	F68A
G5131	G5132	G5133	G5139	G7100	G7101	G7102
G7109	H0100A	H0100B	H0101A	H0101B	H0102A	H0102B
H02151	H02152	H02153	H02154	H02155	H02156	H02159
H0220A	H0220B	H0220C	H0221A	H0221B	H0221C	H0222A
H0222B	H0222C	H0223A	H0223B	H0223C	H02881	H02882
H02883	H02884	H02885	H02886	H02889	H0288A	H0288B
H10821	H10822	H10823	H10829	H57811	H57812	H57813
H57819	H5789	I6381	I6389	I67850	I67858	K3520
K3521	K3530	K3531	K3532	K3533	K35890	K35891
K6131	K6139	K615	K82A1	K82A2	K8301	K8309
M7910	M7911	M7912	M7918	N35016	N35116	N35811
N35812	N35813	N35814	N35816	N35819	N3582	N35911
N35912	N35913	N35914	N35916	N35919	N3592	N99116
O30131	O30132	O30133	O30139	O30231	O30232	O30233
O30239	O30831	O30832	O30833	O30839	O8600	O8601
O8602	O8603	O8604	O8609	P0270	P0278	P0411
P0412	P0413	P0414	P0415	P0416	P0417	P041A
P0418	P0419	P0440	P0442	P0481	P0489	P354
P7421	P7422	P7431	P7432	P7441	P74421	P74422
P7449	Q5120	Q5121	Q5122	Q5128	Q9351	Q9359
Q9382	R82991	R82992	R82993	R82994	R82998	R93811
R93812	R93813	R93819	R9389	T43641A	T43641D	T43641S
T43642A	T43642D	T43642S	T43643A	T43643D	T43643S	T43644A
T43644D	T43644S	T7451XA	T7451XD	T7451XS	T7452XA	T7452XD
T7452XS	T7461XA	T7461XD	T7461XS	T7462XA	T7462XD	T7462XS
T7651XA	T7651XD	T7651XS	T7652XA	T7652XD	T7652XS	T7661XA
T7661XD	T7661XS	T7662XA	T7662XD	T7662XS	T8140XA	T8140XD

Added Diagnosis Codes						
T8140XS	T8141XA	T8141XD	T8141XS	T8142XA	T8142XD	T8142XS
T8143XA	T8143XD	T8143XS	T8144XA	T8144XD	T8144XS	T8149XA
T8149XD	T8149XS	Y076	Z0481	Z0482	Z0489	Z1330
Z1331	Z1332	Z1339	Z1340	Z1341	Z1342	Z1349
Z20821	Z2883	Z62813	Z83430	Z83438	Z9142	

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413. ■

Discontinued Diagnosis Codes

The 2019 ICD discontinued diagnosis codes are no longer valid for claims submitted with dates of service on or after October 1, 2018. The following is a list of diagnosis codes that have been discontinued:

Discontinued Diagnosis Codes						
C4311	C4312	C44102	C44109	C44112	C44119	C44122
C44129	C44192	C44199	C4A11	C4A12	D0311	D0312
D0411	D0412	D2211	D2212	D2311	D2312	E728
E784	F53	G513	G710	H578	I638	K352
K353	K3589	K613	K830	M791	N358	N359
O860	P027	P041	P048	P742	P743	P744
Q512	Q935	R8299	R938	T814XXA	T814XXD	T814XXS
Z048	Z134					

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413. ■

Diagnosis Code Description Changes

Effective for dates of service on or after October 1, 2018, the following diagnosis code descriptions have changed:

Revised Diagnosis Codes						
E671	E7253	F6810	F6811	F6812	F6813	H04201
H04202	H04203	H04209	H04221	H04222	H04223	H04229
I63219	I63239	I63333	I63343	J84848	K435	L98495
L98496	L98498	M26621	M5001	M5011	M5021	M5031
M5081	M5091	M86621	M86622	M86629	N630	O00212
Q6689	R402330	R402331	R402332	R402333	R402334	S62626A
S62626B	S62626D	S62626G	S62626K	S62626P	S62626S	S62627A
S62627B	S62627D	S62627G	S62627K	S62627P	S62627S	S62628A
S62628B	S62628D	S62628G	S62628K	S62628P	S62628S	S62629A

Revised Diagnosis Codes						
S62629B	S62629D	S62629G	S62629K	S62629P	S62629S	S62654A
S62654B	S62654D	S62654G	S62654K	S62654P	S62654S	S62655A
S62655B	S62655D	S62655G	S62655K	S62655P	S62655S	S62656A
S62656B	S62656D	S62656G	S62656K	S62656P	S62656S	S62657A
S62657B	S62657D	S62657G	S62657K	S62657P	S62657S	S62658A
S62658B	S62658D	S62658G	S62658K	S62658P	S62658S	S62659A
S62659B	S62659D	S62659G	S62659K	S62659P	S62659S	S99101A
S99101B	S99101D	S99101G	S99101K	S99101P	S99101S	S99132A
S99132B	S99132D	S99132G	S99132K	S99132P	S99132S	T8111XA
T8111XD	T8111XS	V00821A	V00821D	V00821S	V00822A	V00822D
V00822S	V00828A	V00828D	V00828S	Y92000	Y9323	Z4003
Z6843	Z77123	Z7729				

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413. ■

INPATIENT HOSPITAL ICD-10-PCS SURGICAL PROCEDURE CODE UPDATES

Inpatient Hospital ICD-10-PCS Surgical Procedure Code Updates

The ICD-10-PCS procedure codes are inpatient hospital surgical procedure codes and must be submitted, as applicable, only on inpatient hospital claims.

Note: For professional and outpatient procedures and services, providers must continue to use the American Medical Association (AMA) Current Procedural Terminology (CPT) manual and the CMS Health Care Common Procedure Coding System (HCPCS) manual.

This section lists the ICD-10-PCS inpatient hospital surgical procedure code changes for inpatient hospital providers. Providers should refer to the appropriate copyright holder’s code listing for the new, discontinued, and revised descriptions for the procedure codes indicated below. All discontinued codes will not be reimbursed for dates of service on or after October 1, 2018.

The following table lists all of the new, discontinued, and revised surgical procedure codes:

Note: These procedure codes are surgical codes used to assign the proper DRG for an inpatient hospital stay and are processed as informational only.

Added Procedure Codes						
001U072	001U0J2	001U0K2	001U372	001U3J2	001U3K2	001U472
001U474	001U476	001U477	001U479	001U4J2	001U4J4	001U4J6
001U4J7	001U4J9	001U4K2	001U4K4	001U4K6	001U4K7	001U4K9
021W08F	021W08G	021W08H	021W08V	021W09F	021W09G	021W09H
021W09V	021W0AF	021W0AG	021W0AH	021W0AV	021W0JF	021W0JV
021W0KF	021W0KV	031509T	03150AT	03150JT	03150KT	03150ZT
031609T	03160AT	03160JT	03160KT	03160ZT	031H09Y	031H0AY
031H0JY	031H0KY	031H0ZY	031J09Y	031J0AY	031J0JY	031J0KY
031J0ZY	03700D1	03700Z1	03703D1	03703Z1	03704D1	03704Z1
03710D1	03710Z1	03713D1	03713Z1	03714D1	03714Z1	03720D1
03720Z1	03723D1	03723Z1	03724D1	03724Z1	03730D1	03730Z1
03733D1	03733Z1	03734D1	03734Z1	03740D1	03740Z1	03743D1
03743Z1	03744D1	03744Z1	03750D1	03750Z1	03753D1	03753Z1
03754D1	03754Z1	03760D1	03760Z1	03763D1	03763Z1	03764D1
03764Z1	03770D1	03770Z1	03773D1	03773Z1	03774D1	03774Z1
03780D1	03780Z1	03783D1	03783Z1	03784D1	03784Z1	03790D1
03790Z1	03793D1	03793Z1	03794D1	03794Z1	037A0D1	037A0Z1
037A3D1	037A3Z1	037A4D1	037A4Z1	037B0D1	037B0Z1	037B3D1
037B3Z1	037B4D1	037B4Z1	037C0D1	037C0Z1	037C3D1	037C3Z1

Added Procedure Codes						
037C4D1	037C4Z1	03CG3Z7	03CH3Z7	03CJ3Z7	03CK3Z7	03CL3Z7
03CM3Z7	03CN3Z7	03CP3Z7	03CQ3Z7	041K3JQ	041K3JS	041L3JQ
041L3JS	041M3JQ	041M3JS	041N3JQ	041N3JS	041P0JQ	041P0JS
041P3JQ	041P3JS	041P4JQ	041P4JS	041Q0JQ	041Q0JS	041Q3JQ
041Q3JS	041Q4JQ	041Q4JS	041R0JQ	041R0JS	041R3JQ	041R3JS
041R4JQ	041R4JS	041S0JQ	041S0JS	041S3JQ	041S3JS	041S4JQ
041S4JS	041T3JQ	041T3JS	041U3JQ	041U3JS	041V3JQ	041V3JS
041W3JQ	041W3JS	05730D1	05730Z1	05733D1	05733Z1	05734D1
05734Z1	05740D1	05740Z1	05743D1	05743Z1	05744D1	05744Z1
05750D1	05750Z1	05753D1	05753Z1	05754D1	05754Z1	05760D1
05760Z1	05763D1	05763Z1	05764D1	05764Z1	05770D1	05770Z1
05773D1	05773Z1	05774D1	05774Z1	05780D1	05780Z1	05783D1
05783Z1	05784D1	05784Z1	05790D1	05790Z1	05793D1	05793Z1
05794D1	05794Z1	057A0D1	057A0Z1	057A3D1	057A3Z1	057A4D1
057A4Z1	057B0D1	057B0Z1	057B3D1	057B3Z1	057B4D1	057B4Z1
057C0D1	057C0Z1	057C3D1	057C3Z1	057C4D1	057C4Z1	057D0D1
057D0Z1	057D3D1	057D3Z1	057D4D1	057D4Z1	057F0D1	057F0Z1
057F3D1	057F3Z1	057F4D1	057F4Z1	093K7ZZ	093K8ZZ	0F500ZF
0F503ZF	0F504ZF	0F510ZF	0F513ZF	0F514ZF	0F520ZF	0F523ZF
0F524ZF	0F5G0ZF	0F5G3ZF	0F5G4ZF	0FD03ZX	0FD04ZX	0FD13ZX
0FD14ZX	0FD23ZX	0FD24ZX	0FD43ZX	0FD44ZX	0FD48ZX	0FD53ZX
0FD54ZX	0FD58ZX	0FD63ZX	0FD64ZX	0FD68ZX	0FD73ZX	0FD74ZX
0FD78ZX	0FD83ZX	0FD84ZX	0FD88ZX	0FD93ZX	0FD94ZX	0FD98ZX
0FDC3ZX	0FDC4ZX	0FDC8ZX	0FDD3ZX	0FDD4ZX	0FDD8ZX	0FDF3ZX
0FDF4ZX	0FDF8ZX	0FDG3ZX	0FDG4ZX	0FDG8ZX	0SP90EZ	0SPB0EZ
0SPC0EZ	0SPC0LZ	0SPC0MZ	0SPC0NZ	0SPC3LZ	0SPC3MZ	0SPC3NZ
0SPC4LZ	0SPC4MZ	0SPC4NZ	0SPD0EZ	0SPD0LZ	0SPD0MZ	0SPD0NZ
0SPD3LZ	0SPD3MZ	0SPD3NZ	0SPD4LZ	0SPD4MZ	0SPD4NZ	0SR90EZ
0SRB0EZ	0SRC0EZ	0SRC0M9	0SRC0MA	0SRC0MZ	0SRC0N9	0SRC0NA
0SRC0NZ	0SRD0EZ	0SRD0M9	0SRD0MA	0SRD0MZ	0SRD0N9	0SRD0NA
0SRD0NZ	0UY90Z0	0UY90Z1	0UY90Z2	0VXT0ZD	0VXT0ZS	0VXTXZD
0VXTXZS	0W190JW	0W193J9	0W193JB	0W193JG	0W193JJ	0W193JW
0W193JY	0W194JW	0W1B0JW	0W1B3J9	0W1B3JB	0W1B3JG	0W1B3JJ
0W1B3JW	0W1B3JY	0W1B4JW	0W1G0JW	0W1G3J9	0W1G3JB	0W1G3JG
0W1G3JJ	0W1G3JW	0W1G3JY	0W1G4JW	0W1J0JW	0W1J3J9	0W1J3JB
0W1J3JG	0W1J3JJ	0W1J3JW	0W1J3JY	0W1J4JW	3E02340	5A1522F
5A1522G	5A1522H	XV508A4	XW033G4	XW033H4	XW043G4	XW043H4

The following table lists all of the discontinued surgical procedure codes:

Discontinued Procedure Codes						
ORG00Z0	ORG00Z1	ORG00ZJ	ORG03Z0	ORG03Z1	ORG03ZJ	ORG04Z0
ORG04Z1	ORG04ZJ	ORG10Z0	ORG10Z1	ORG10ZJ	ORG13Z0	ORG13Z1
ORG13ZJ	ORG14Z0	ORG14Z1	ORG14ZJ	ORG20Z0	ORG20Z1	ORG20ZJ
ORG23Z0	ORG23Z1	ORG23ZJ	ORG24Z0	ORG24Z1	ORG24ZJ	ORG40Z0
ORG40Z1	ORG40ZJ	ORG43Z0	ORG43Z1	ORG43ZJ	ORG44Z0	ORG44Z1
ORG44ZJ	ORG60Z0	ORG60Z1	ORG60ZJ	ORG63Z0	ORG63Z1	ORG63ZJ
ORG64Z0	ORG64Z1	ORG64ZJ	ORG70Z0	ORG70Z1	ORG70ZJ	ORG73Z0
ORG73Z1	ORG73ZJ	ORG74Z0	ORG74Z1	ORG74ZJ	ORG80Z0	ORG80Z1
ORG80ZJ	ORG83Z0	ORG83Z1	ORG83ZJ	ORG84Z0	ORG84Z1	ORG84ZJ
ORGA0Z0	ORGA0Z1	ORGA0ZJ	ORGA3Z0	ORGA3Z1	ORGA3ZJ	ORGA4Z0
ORGA4Z1	ORGA4ZJ	ORGC0ZZ	ORGC3ZZ	ORGC4ZZ	ORGD0ZZ	ORGD3ZZ
ORGD4ZZ	ORGE0ZZ	ORGE3ZZ	ORGE4ZZ	ORGF0ZZ	ORGF3ZZ	ORGF4ZZ
ORGG0ZZ	ORGG3ZZ	ORGG4ZZ	ORGH0ZZ	ORGH3ZZ	ORGH4ZZ	ORGJ0ZZ
ORGJ3ZZ	ORGJ4ZZ	ORGK0ZZ	ORGK3ZZ	ORGK4ZZ	ORGL0ZZ	ORGL3ZZ
ORGL4ZZ	ORGM0ZZ	ORGM3ZZ	ORGM4ZZ	ORGN0ZZ	ORGN3ZZ	ORGN4ZZ
ORGP0ZZ	ORGP3ZZ	ORGP4ZZ	ORGQ0ZZ	ORGQ3ZZ	ORGQ4ZZ	ORGR0ZZ
ORGR3ZZ	ORGR4ZZ	ORGS0ZZ	ORGS3ZZ	ORGS4ZZ	ORGT0ZZ	ORGT3ZZ
ORGT4ZZ	ORGU0ZZ	ORGU3ZZ	ORGU4ZZ	ORGV0ZZ	ORGV3ZZ	ORGV4ZZ
ORGW0ZZ	ORGW3ZZ	ORGW4ZZ	ORGX0ZZ	ORGX3ZZ	ORGX4ZZ	OSG00Z0
OSG00Z1	OSG00ZJ	OSG03Z0	OSG03Z1	OSG03ZJ	OSG04Z0	OSG04Z1
OSG04ZJ	OSG10Z0	OSG10Z1	OSG10ZJ	OSG13Z0	OSG13Z1	OSG13ZJ
OSG14Z0	OSG14Z1	OSG14ZJ	OSG30Z0	OSG30Z1	OSG30ZJ	OSG33Z0
OSG33Z1	OSG33ZJ	OSG34Z0	OSG34Z1	OSG34ZJ	OSG50ZZ	OSG53ZZ
OSG54ZZ	OSG60ZZ	OSG63ZZ	OSG64ZZ	OSG70ZZ	OSG73ZZ	OSG74ZZ
OSG80ZZ	OSG83ZZ	OSG84ZZ	OSG90ZZ	OSG93ZZ	OSG94ZZ	OSGB0ZZ
OSGB3ZZ	OSGB4ZZ	OSGC0ZZ	OSGC3ZZ	OSGC4ZZ	OSGD0ZZ	OSGD3ZZ
OSGD4ZZ	OSGF0ZZ	OSGF3ZZ	OSGF4ZZ	OSGG0ZZ	OSGG3ZZ	OSGG4ZZ
OSGH0ZZ	OSGH3ZZ	OSGH4ZZ	OSGJ0ZZ	OSGJ3ZZ	OSGJ4ZZ	OSGK0ZZ
OSGK3ZZ	OSGK4ZZ	OSGL0ZZ	OSGL3ZZ	OSGL4ZZ	OSGM0ZZ	OSGM3ZZ
OSGM4ZZ	OSGN0ZZ	OSGN3ZZ	OSGN4ZZ	OSGP0ZZ	OSGP3ZZ	OSGP4ZZ
OSGQ0ZZ	OSGQ3ZZ	OSGQ4ZZ	OW4M0Z0	OW4N0Z1	5A15223	

The following table lists all of the revised surgical procedure codes:

Revised Procedure Codes						
0SRC0L9	0SRC0LA	0SRC0LZ	0SRD0L9	0SRD0LA	0SRD0LZ	10D00Z0
10D00Z1						

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP CSHCN Services Program Contact Center at 1-800-568-2413. ■