

On Oct. 1, 142 new codes take effect, many of them five-digit codes that allow for more specific reporting.

This year's diagnosis code changes come with good news: There are fewer changes than last year. The person charged with updating your superbill and billing system before the changes go into effect on Oct. 1 will surely appreciate that.

For the record, there are 142 new diagnosis codes for 2007-2008, 17 invalid diagnosis codes and five revised diagnosis codes (down from 211, 29 and 55, respectively, last year). Most of the new diagnosis codes are five-digit codes that allow for more specific reporting of conditions. All of the codes deemed no longer valid are four-digit codes that have been expanded to five digits.

A list of this year's changes is available as an Excel file or a Word document on the *FPM* Web site. Updated versions of the short and long versions of *FPM*'s "ICD-9 Codes for Family Medicine" are also available there in multiple formats (see "ICD-9 coding tools" on page 18). For the highlights of this year's update that are most pertinent to family medicine, read on.

ICD-9 CHANGES:

New Codes of Note

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The new V codes

The 20 V codes that have been added for 2007-2008 deal with personal or family history, encounters for particular services, or genetic susceptibility. Three new codes stand out as those most likely to be used by family physicians:

- V68.01 Disability examination,
- V25.04 Counseling and instruction in natural family planning to avoid pregnancy,
- V26.41 Procreative counseling and advice using natural family planning.

Other significant V codes to note include the following:

- V13.22 Personal history of cervical dysplasia,
- V68.09 Other issue of medical certificates,
- V84.89 Genetic susceptibility to other disease.

The last two codes listed above – V68.09 and

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V84.89 – replace two V codes that are now invalid. The eliminated codes are V68.0 “Issue of medical certificates” and V84.8 “Genetic susceptibility to other disease.”

Taking it to the fifth

As mentioned above, the majority of this year’s new codes are five-digit codes that replace four-digit codes.

Signs and symptoms. Family physicians should note two invalid codes in this section – 787.2 for “dysphagia” and 789.5 for “ascites” – that have been replaced by multiple five-digit codes. These are the new code options for diagnosing dysphagia:

- 787.20 Dysphagia, unspecified,
- 787.21 Dysphagia, oral phase,
- 787.22 Dysphagia, oropharyngeal phase,
- 787.23 Dysphagia, pharyngeal phase,
- 787.24 Dysphagia, pharyngoesophageal phase,
- 787.29 Other dysphagia.

There are two new codes for ascites:

- 789.51 Malignant ascites,
- 789.59 Other ascites.

Infectious diseases and influenza. Code 005.1, which previously was listed simply as “botulism,” is now described as “botulism food poisoning.” This revision helps distinguish the old code from two new related codes:

040.41 for “infant botulism” and 040.42 for “wound botulism.”

There are new codes to choose from when reporting roseola infantum. Previously, it was lumped under code 057.8, “other specified viral exanthemata,” which remains a valid code. Now you should report one of the following codes:

- 058.10 Roseola infantum, unspecified,
- 058.11 Roseola infantum due to human herpes virus 6,
- 058.12 Roseola infantum due to human herpes virus 7.

Other infections and encephalitis due to human herpes viruses should be reported with the following codes:

- 058.21 Human herpes virus 6 encephalitis,
- 058.29 Other human herpes virus encephalitis,
- 058.81 Human herpes virus 6 infection,
- 058.82 Human herpes virus 7 infection,
- 058.89 Other human herpes virus infection.


The final addition to the infectious and parasitic disease category is a code for “parvovirus B19 infection other than fifth disease.” The new code, 079.83, will be reported first when associated with arthropathy (code 711.5).

Bird flu is now in the book as code 488, “influenza due to identified avian influenza virus.” Let’s hope it is never reported.

Endocrine and blood conditions. Fifth-digit coding also allows for more specific reporting of corticoadrenal insufficiency based on the glucocorticoid or mineralocorticoid deficiency. Code 255.4 is no longer valid. Report the following codes starting Oct. 1:

- 255.41 Glucocorticoid deficiency,
- 255.42 Mineralocorticoid deficiency.

Updating your code lists

Each year, *FPM* provides tools to assist family physicians with the ICD-9 code changes. Take advantage of these resources now so the changes will cause no delay in your payment for services. 

Send comments to fpmedit@aafp.org.

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It’s time to update your superbill to make sure it reflects this year’s ICD-9 changes.

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This year’s update includes new V codes for disability exams and natural family planning.

ICD-9 CODING TOOLS

FPM’s ICD-9 coding references have been updated to comply with the ICD-9 codes that take effect Oct. 1.

You’ll find an updated version of “ICD-9 Codes for Family Medicine: The Short List” on the following page. Both it and “ICD-9 Codes for Family Medicine: The Long List” are online at <http://www.aafp.org/fpm/icd9>. The lists were developed by Allen Daugird, MD, MBA, Donald Spencer, MD, MBA, and Philip S. Whitecar, MD.

You’ll also find an easy-to-search database of ICD-9 codes for use with personal digital assistants (PDAs) at <http://www.aafp.org/fpm/icd9>. The PDA reference was adapted from *FPM*’s “Long List” by Robert M. Wolfe, MD.