

## **DIAGNOSIS CODES**

# Are You Ready for the New ICD-10-CM Diagnosis Codes Effective October 1, 2024?

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As a service to our readers, this author provides a summary of the new/revised wound care diagnosis and procedure code updates that will go into effect on October 1 every year when they are released by the National Center for Health Statistics. The new 2025 ICD-10-CM codes and guidelines are to be used from October 1, 2024 through September 30, 2025.

Now is an excellent time to take a moment and review both the guidelines and the new ICD-10-CM codes for fiscal year 2025 with your staff. In addition, it is essential to ensure that all forms, superbills, electronic medical records (EMRs), etc., have been updated to reflect any of the new codes.

The Acute Inpatient Prospective Payment Final Rule was published on August 1, 2024.<sup>1</sup> All the new codes in this article are referenced in the tables in the Final Rule. <u>Tables 6A-6K and Tables 6P.1a-6P.4d</u> (downloads as a ZIP file):

- Table 6A-New Diagnosis Codes
- Table 6B-New Procedure Codes
- Table 6C—Invalid Diagnosis Codes
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- Table 6E—Revised Diagnosis Code Titles
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- Table 6G.1—Secondary Diagnosis Order Additions to the CC Exclusions List
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- Table 61-Complete MCC List
- Table 6I.1-Additions to the MCC List
- Table 6J—Complete CC List
- Table 6J.1—Additions to the CC List
- Table 6J.2—Deletions to the CC List
- Table 6K-Complete CC Exclusions List

## **New Additions**

There were no Coding Guidelines that changed for wound care this year.

The 2025 IPPS final rule includes more than 250 new ICD-10-CM/PCS codes. CMS made hundreds of ICD-10-CM code changes in the 2025 Hospital Inpatient Prospective Payment System (IPPS) final rule:

- 252 new codes
- 13 revised codes
- · 36 invalidated codes

Highlights of the code additions include codes to report the following conditions or to report them with additional specificity:

- · Anal, rectal, and anorecta fistula
- Eating disorders (ie, anorexia nervosa, bulimia nervosa, binge eating disorder)
- Follicular lymphoma classifications
- Hypoglycemia
- · Insufficient health insurance or welfare support
- Intervertebral disc degeneration
- · Sepsis aftercare
- · Synovitis and tenosynovitis (unspecified)
- Type 1 diabetes mellitus, presymptomatic

# Diagnosis Changes Effective 10/1/2024

This article will focus on the new codes that could be used in wound care. Let's turn our attention to some of the new ICD-10-CM/PCS codes that go into effect on October 1, 2024.

1. **Diabetes Category E08-E13 had added instruction.** Use additional code to identify control using: Add injectable non-insulin antidiabetic drugs (Z79.85)

# 2. New Diabetes Type 1, presymptomatic codes

E10.A0 Type 1 diabetes mellitus, presymptomatic, unspecified

**E10.A1** Type 1 diabetes mellitus, presymptomatic, Stage 1—Multiple confirmed islet autoantibodies with normoglycemia

**E10.A2** Type 1 diabetes mellitus, presymptomatic, Stage 2—Confirmed islet autoimmunity with dysglycemia

**New Hypoglycemia codes.** Use additional code for hypoglycemia level, if applicable (E16.A-) was added under all diabetes codes in the tabular index.

**E16.A1** Hypoglycemia level 1 — defined as a glucose concentration < 70 mg/dL and should be used as an "alert value" to help individuals avoid more severe hypoglycemia

**E16.A2** Hypoglycemia level 2—defined as a glucose concentration < 54 mg/dL. This is the threshold at which neuroglycopenic symptoms begin to occur

E16.A3 Hypoglycemia level 3—defined as a severe event characterized by altered mental and/or physical functioning independently of the glycemic value, which requires third party assistance to treat (eg, the person experiencing this cannot treat their symptoms without assistance)

#### **New Obesity in Adults Class Codes**

E66.811	Obesity, class 1
E66.812	Obesity, class 2
E66.813	Obesity, class 3

E66.89 Other obesity not elsewhere classified

E88.82 Obesity due to disruption of MC4R pathway

#### New Disruption or Dehiscence Codes (Conditions Treated After Original Surgery)

- **T81.321A** Disruption or dehiscence of closure of internal operation (surgical) wound of abdominal wall muscle or fascia, initial encounter
- **T81.321D** Disruption or dehiscence of closure of internal operation (surgical) wound of abdominal wall muscle or fascia, subsequent encounter
- **T81.321S** Disruption or dehiscence of closure of internal operation (surgical) wound of abdominal wall muscle or fascia, sequela
- **T81.328A** Disruption or dehiscence of closure of other specified internal operation (surgical) wound, initial encounter
- **T81.328D** Disruption or dehiscence of closure of other specified internal operation (surgical) wound, subsequent encounter
- **T81.328S** Disruption or dehiscence of closure of other specified internal operation (surgical) wound, sequela
- **T81.329A** Deep disruption or dehiscence of operation wound, unspecified, initial encounter
- **T81.329D** Deep disruption or dehiscence of operation wound, unspecified, subsequent
- encounter
- T81.329S Deep disruption or dehiscence of operation wound, unspecified, sequela

# New Z Codes (Status)

These will be factors that can impact on the patient's care and should be reported.

- Z59.71 Insufficient health insurance coverage
- **Z59.72** Insufficient welfare support

#### Added Complication/Comorbidity (CC) Codes

Please note that the codes listed below were added to the complication/comorbidity list and are significant for DRG assignment. In addition, note that there were many Z codes added a CCs.

- **T81.320A** Disruption or dehiscence of gastrointestinal tract anastomosis, repair, or closure, initial encounter
- **T81.321A** Disruption or dehiscence of closure of internal operation (surgical) wound of abdominal wall muscle or fascia, initial encounter
- **T81.328A** Disruption or dehiscence of closure of other specified internal operation (surgical) wound, initial encounter
- T81.329A Deep disruption or dehiscence of operation wound, unspecified, initial encounter
- **Z59.10** Inadequate housing, unspecified
- **Z59.11** Inadequate housing environmental temperature
- **Z59.12** Inadequate housing utilities
- **Z59.19** Other inadequate housing
- **Z59.811** Housing instability, housed, with risk of homelessness
- **Z59.812** Housing instability, housed, homelessness in past 12 months
- **Z59.819** Housing instability, housed unspecified

#### **Deleted CCs**

**T81.32XA** Disruption of internal operation (surgical) wound, not elsewhere classified, initial encounter

#### **New ICD-10-PCS Procedure Codes**

New codes were added for skin replacement with genetically engineered Autologous Cell Therapy. These all are in the New Technology Group 10 DRG.

XHR0XGA Replacement of Head and Neck Skin with Prademagene Zamikeracel, Genetically

Engineered Autologous Cell Therapy, External Approach, New Technology Group 10

XHR1XGA Replacement of Chest Skin with Prademagene Zamikeracel, Genetically
Engineered Autologous Cell Therapy, External Approach, New Technology Group 10

XHR2XGA Replacement of Abdomen Skin with Prademagene Zamikeracel, Genetically
Engineered Autologous Cell Therapy, External Approach, New Technology Group 10

XHR3XGA Replacement of Back Skin with Prademagene Zamikeracel, Genetically
Engineered Autologous Cell Therapy, External Approach, New Technology Group 10

XHR4XGA Replacement of Right Upper Extremity Skin with Prademagene Zamikeracel,
Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10

XHR5XGA Replacement of Left Upper Extremity Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group XHR6XGA\* Replacement of Right Lower Extremity Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10

XHR7XGA\* Replacement of Left Lower Extremity Skin with Prademagene Zamikeracel, Genetically Engineered Autologous Cell Therapy, External Approach, New Technology Group 10

## In Conclusion

Please be sure to review these new codes and check to see if any of these codes would be seen frequently in your practice. As you already know, ICD-10-CM/PCS affords us the ability to be as specific as possible with diagnoses. Checking these codes within your practice will help your data reporting, research and billing for your office as well as the facilities.

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#### Reference

1. Centers for Medicare and Medicaid Services. FY 2025 IPPS Final Rule Home Page.