

New ICD Codes Incorporate Chiropractic Terminology

SEVEN YEARS IN THE WORKS

Steve Kelly, managing editor

The World Health Organization (WHO), founded in 1948, is an autonomous agency that has as its goal the attainment of the highest level of health on a worldwide basis.

The WHO promotes health services, monitors disease control, fights malnutrition, promotes and develops research, sets standards for pharmaceuticals and pesticides, and gathers statistics on mortality and morbidity rates.

The WHO also produces the International Statistical Classification of Diseases and Related Health Problems (ICD) code book.

These diagnostic codes have never reflected the terminology of chiropractic. Indeed, chiropractors had never been invited to give their input until an invitation to participate was sent to the ACA and ICA in 1985. The ACA/ICA joined forces: Drs. Michael Pedigo, Sid Williams, Fred Barge, Kenneth Luedtke, Vincent Lucido, Arnold Cianciulli, Dennis Semlow, Richard Herfert, and Ron Hendrickson, to name a few, worked together to develop recommendations for the code book.

The first problem was to agree on a definition of subluxation. That process alone took two years. At the ACA/ICA joint conference in Carmel, California in 1987, a written agreement of the definition of subluxation was reached, a first for the profession.

It was agreed that a chairman was needed to do the legwork necessary to pursue the long process of getting chiropractic terminology included in the new ICD-CM code book. Dr. Murkowski took on that responsibility and has worked toward that goal the past seven years. During that period, he has submitted over 150 recommendations for the ICD code book regarding chiropractic lexicon and new code numbers.

In the ICD-9 code book, the 730.9xx series lists the objectionable language, "nonallopathic lesion not elsewhere classified." This terminology, although put in originally to apply to the osteopaths, soon became identified with chiropractic. Insurance companies, like Blue Cross/Blue Shield have mandated that DCs use the 730.9xx definition when they make their diagnoses. Dr. Murkowski makes the point that the osteopaths often choose not to use the 730.9xx diagnostic codes and usually opt instead for the 830.9xx series. Chiropractors are pigeonholed to the 730.9xx, and when that number is seen by an insurance company, they know immediately they're dealing with a chiropractor, and Dr. Murkowski believes, that results in a lower reimbursement rate for DCs.

Dr. Murkowski goals were to eliminate the nonallopathic lesion verbiage; expand the definition of subluxation in the 830.00 series; and expand the areas that DCs can diagnose related to the subluxation complex and component parts.

On May 5, 1994, Robert Israel, Dr. Murkowski's liaison with the WHO, and associate director of International Statistics for the National Center for Health Statistics (under the Department of

Health and Human Services), informed Dr. Murkowski by letter that the ICD-10CM category that previously referred to non-allopathic lesion had been replaced with category M99, "Biomechanical lesions not elsewhere classified."

The new code book will be in print "around July 1," of this year, according to Mr. Israel, and will be in effect for at least five years and possibly as long as ten years.

The new ICD-10CM code book is reformatted alphanumerically. The 739.xx series has been replaced with category M99, "Diseases of the Musculoskeletal System and Connective Tissue."

Below is reprinted section M99.

M99 Biomechanical lesions, not elsewhere classified

Note: This category should not be used if the condition can be classified elsewhere.

The following supplementary subclassification to indicate the site of lesions is provided for optional use with appropriate subcategories in M99.

0. Head region occipitocervical
1. Cervical region cervicothoracic
2. Thoracic region thoracolumbar
3. Lumbar region lumbosacral
4. Sacral region sacrococcygeal, sacroiliac
5. Pelvic region hip, pubic
6. Lower extremity
7. Upper extremity acromioclavicular, sternoclavicular
8. Rib cage costochondral, costovertebral, sternochondral
9. Abdomen and other M99.

- 0 Segmental and somatic dysfunction M99.
- 1 Subluxation complex (vertebral) M99.
- 2 Subluxation stenosis of neural canal M99.
- 3 Osseous stenosis of neural canal M99.
- 4 Connective tissue stenosis of neural canal M99.
- 5 Intervertebral disc stenosis of neural canal M99.
- 6 Osseous and subluxation stenosis of intervertebral foramina M99.
- 7 Connective tissue and disc stenosis of intervertebral foramina M99.
- 8 Other biomechanical lesions M99.
- 9 Biomechanical lesion, unspecified

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