



INSURANCE

ICD-10 Diagnosis Code Updates

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Question: *When do the 2022-23 diagnosis codes take effect? I want to make sure I'm on top of any changes so my claims don't get denied.*

As is the case every year, diagnosis codes updated on Oct. 1. There are 1,176 new codes, 28 revised codes and 287 deleted codes. The total codes now in ICD-10-CM is 73,639. As always, let's focus on the chiropractic-centric ones.

Last year, we did have an update that specifically affected chiropractors, as there were changes to the codes for lower back pain and a new code for cervicogenic headaches. Considering 85 million Americans experience lower back pain daily, this coding change affected chiropractic because the most commonly billed codes for chiropractic are likely codes for the lumbar spine. This year also has changes that affect chiropractic coding, including new codes for lumbar and lumbosacral disc, and new codes for spinal muscle weakness and atrophy.

New Disc Codes



For the lower back, there are new codes specifically to identify annulus fibrosus defect (disc) of the lumbar and lumbosacral spines. These new codes are as follows and do not replace any codes; they simply allow for more specific diagnoses:

- *M51.A0* Intervertebral annulus fibrosus defect, lumbar region, unspecified size
- *M51.A1* Intervertebral annulus fibrosus defect, small, lumbar region
- *M51.A2* Intervertebral annulus fibrosus defect, large, lumbar region
- *M51.A3* Intervertebral annulus fibrosus defect, lumbosacral region, unspecified size
- *M51.A4* Intervertebral annulus fibrosus defect, small, lumbosacral region
- *M51.A5* Intervertebral annulus fibrosus defect, large, lumbosacral region

These codes identify the effects of the annulus fibrosus of intervertebral discs where the nucleus pulposus tissue herniates. The annulus makes up about 40 percent of the disc, with the peripheral fibers of the annulus fibrosus having the function of anchoring the intervertebral disc to the vertebra. There are existing codes for disc displacement of the lumbar and lumbosacral spine; however, these codes provide more specificity when the annulus can be identified.

It is interesting to note the following; "Defects in the annulus fibrosus (AF) of intervertebral discs allow nucleus pulposus tissue to herniate causing painful disability. Microdiscectomy procedures remove herniated tissue fragments, but unrepaired defects remain allowing reherniation or progressive degeneration." (Cruz MA, et al. Cell-seeded adhesive biomaterial for repair of annulus fibrosus defects in intervertebral discs. [Tissue Eng Part A](#), 2018 Feb 1;24(3-4):187-198.)

The prior coding set did not identify this specific condition, so to properly code, you would have to use an unspecified disc disorder and then identify the annulus fibrosus defect more specifically in the notes. The new specific coding eliminates the need for additional information to be provided.

Spinal Muscle Wasting and Atrophy

There are also several new codes for spinal muscle wasting and atrophy:

- *M62.5A0* Muscle wasting and atrophy, not elsewhere classified, back, cervical
- *M62.5A1* Muscle wasting and atrophy, not elsewhere classified, back, thoracic
- *M62.5A2* Muscle wasting and atrophy, not elsewhere classified, back, lumbosacral
- *M62.5A9* Muscle wasting and atrophy, not elsewhere classified, back, unspecified

These new codes now specifically identify spinal regions; prior, there were no codes specific to the spine, while other body regions (including extremities) did have specific coding.

Post-Viral Fatigue Syndrome

There is also a new code for post-viral fatigue syndrome: *G93.31*. While not a code used directly for reimbursement,, this syndrome may be a factor that inhibits the patient's recovery from commonly treated chiropractic conditions. It is important to note complicating conditions and comorbidities in the record for insurers such as American Specialty Health, Evcicare, Optum Health, etc. All indicate the importance of identifying complicating conditions and comorbidities that can affect the recovery of the patient.

Concussion

Concussion also has new codes to identify a concussion with unknown loss of consciousness. The prior coding for concussion only identified no loss of consciousness, loss of consciousness of 30 minutes or more, and a generic unspecified code. Here are the new codes:

- *S06.0XAA* Concussion with loss of consciousness status unknown, initial encounter
- *S06.0XAD* Concussion with loss of consciousness status unknown, subsequent encounter
- *S06.0XAS* Concussion with loss of consciousness status unknown, sequela

Other Code Updates

Other codes that were updated or added, but unlikely to affect common chiropractic coding, include endometriosis, dementia, substance abuse, tachycardia, aneurysm rupture, slipped femoral epiphysis, maternal malformations, traumatic brain hemorrhage, and poisoning by methamphetamines.

One last note: Have you ever had a patient or known someone not getting the care they need because they cannot afford it? There is now a code for it: *Z91.190 Patient's noncompliance with other medical treatment and regimen due to financial hardship*. This is the bridge I hope chiropractic can provide to their patients - an affordable visit compared to the medical model. Chiropractic has an important role in providing care that is not only effective, but also accessible and affordable. Best wishes for success in the coming new year.

Editor's Note: Have a billing question? Submit it via email to Sam at sam@hjrossnetwork.com. Your question may be the subject of a future column. Note that submission of a question is acknowledgment that it may be referenced (anonymously) in his column.

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