OVERVIEW OF THE FY 2017 IPPS FINAL RULE

Published in the Federal Register August 22nd
Rule to take effect October 1st
MS-DRG CHANGES

- Two procedure codes were omitted from MS-DRGs 001 and 002 (Heart Transplant)
  - 02RK0JZ and 02RL0JZ (Biventricular heart replacements)
- Mechanical complications of the nervous system including devices, implants, grafts, implanted electronic neurostimulator of the brain will be moved from MS-DRGs 919-921 (Complications of Treatment) to MS-DRG 91-93 (Other Disorders of the Nervous System)

<table>
<thead>
<tr>
<th>FY 2016</th>
<th>FY 2017</th>
<th>RW Change</th>
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<tbody>
<tr>
<td>919 (1.7611)</td>
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<td>(0.1847)</td>
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<tr>
<td>920 (0.9991)</td>
<td>092 (0.9201)</td>
<td>(0.0690)</td>
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<tr>
<td>921 (0.6960)</td>
<td>093 (0.7064)</td>
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</tbody>
</table>
MS-DRG CHANGES

- MS-DRGs 606-607 (Minor Skin Disorders): Diagnosis code R22.2 (Localized swelling, trunk) moved from MDC 4 (Respiratory) to MDC 9 (Skin, Subcutaneous Tissue, and Breast)
- Procedure codes 06CV3ZZ and 06CY3zz moved from DRGs 268 and 269 (Aortic and Heart Assist Procedures Except Pulsation Balloon) to 270, 271, and 272 (Other Major Cardiovascular Procedures)

<table>
<thead>
<tr>
<th>FY 2016</th>
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<tbody>
<tr>
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<td>269 (3.9041)</td>
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<tr>
<td>272 (2.3120)</td>
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<td>(1.5921)</td>
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</table>
MS-DRG CHANGES

• MS-DRGs 242-244 (Permanent Cardiac Pacemaker Implant) added procedures that were missed due to replication error

• Update to logic for pacemakers
  • Insertion requires an inserting a generator and lead(s)
  • Replacement requires insertion of a generator
  • Revision requires codes from insertion, removal, revision, or insertion of hemodynamic devices

• Updated ICD-10-PCS code titles for these procedures
MS-DRG CHANGES

- MS-DRG 228-229 (Other Cardiothoracic Procedures)
  - Delete MS-DRG 230 (Other Cardiothoracic Procedures) from FY 2016

<table>
<thead>
<tr>
<th>FY 2016</th>
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<th>RW Change</th>
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<td>273 (3.5499)</td>
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<tr>
<td>274 (2.4197)</td>
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<td>2.3262</td>
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</tbody>
</table>

- MitraClip (02UG3JZ) will be reassigned from 273/274 (Percutaneous Intracardiac Procedures) to 228/229 (Other Cardiothoracic Procedures)
MS-DRG CHANGES

- MS-DRGs 270-272 (Other Major Cardiothoracic Procedures)
  - Reclassify the bypass of the portal vein to lower vein with transluminal device, percutaneous approach (06183DY) from 270-272 to MS-DRGs 405-407 (Pancreas, Liver & Shunt Procedures)
  - Also known as TIPS procedure

<table>
<thead>
<tr>
<th>FY 2016</th>
<th>FY 2017</th>
<th>RW Change</th>
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<tbody>
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<td>272 (2.2508)</td>
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</table>
MS-DRG CHANGES

• MS-DRGs 347-349 (Anal and Stomal Procedures)
  • Excision of duodenum and ileum are moved from MS-DRGs 347-349 (Anal and stomal procedures) to MS-DRGs 329-331 (Major small and large bowel procedures)

<table>
<thead>
<tr>
<th>FY 2016</th>
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<tr>
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MS-DRG CHANGES

• MS-DRGs 466-468 (Revision of Hip/Knee Replacements)
  • Removal of spacer and replacement of joint procedures added to the methodology
  • There were 58 combinations added due to replication error

<table>
<thead>
<tr>
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<th>FY 2017</th>
<th>RW Changes</th>
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<td>0.0423</td>
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</table>

• MS-DRG 885 (Organic Disturbances and Mental Retardation) title will change to Organic Disturbances and intellectual Disabilities
MS-DRG CHANGES

- **MS-DRGs 456-458 (Spinal Fusion Except Cervical)**
  - The following diagnoses will be removed from the secondary diagnosis list from MS-DRGs 456-458
    - M40.50 (Lordosis, unspecified, unspecified site)
    - M40.55 (Lordosis, unspecified, thoracolumbar)
    - M40.56 (Lordosis, unspecified, lumbar)
    - M40.57 (Lordosis, unspecified, lumbosacral)

- **MS-DRGs 332-334 (Rectal Resection); 734-735 (Pelvic Evisceration)**
  - Procedure clusters for the resection of bladder, urethra, bilateral ovaries, bilateral fallopian tubes, uterus, cervix, and vagina will be removed from MDC 6 (Digestive System), MS-DRGs 332-334 (Rectal Resection)
  - These clusters will be maintained in MDC 13 (Female Reproductive System), MS-DRGs 734-735 (Pelvic Evisceration, Rad Hysterectomy & Rad Vulvectomy)
MS-DRG CHANGES

• **Collapse** coding for MS-DRGs 228-230 (Other Cardiothoracic Procedures) from three severity levels to two

• **Modify** title of MS-DRG 229 to reflect a “without MCC” designation
  • *If finalized, delete* codes 02UG3JZ and 35.97 from Percutaneous Transluminal Coronary Artery (PTCA) list in MS-DRGs 231-232 (Coronary Bypass w/ PTCA)
MS-DRG REPLICATION ISSUES

- Angioplasty of extracranial vessel
  - 41 codes with open approach grouped to 981-983 (Extensive O.R. Procedure Unrelated to Principal Diagnosis) and should have grouped 037-039 (Extracranial Procedures)

<table>
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<th>FY 2016</th>
<th>FY 2017</th>
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<tr>
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<tr>
<td>983 (1.7615)</td>
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</table>

- Excision of abdominal arteries (38.86)
  - 34 codes (aneurysmectomy) in V33 were assigned to 981-983. MDC 5 (Circulatory) replication was appropriate, but these codes should have been added to MDCs 6 (Digestive), 11 (Kidney and Urinary Tract), 21 (Injury and Poisoning), 24 (Multiple Significant Trauma)
**MS-DRG REPLICATION ISSUES**

- **Excision of retroperitoneal tissue (54.4)**
  - Codes 0WBH0ZZ, 0WBH3ZZ, and 0WBH4ZZ were assigned to 981-983 (Extensive O.R. Procedure Unrelated to Principal Diagnosis), but should have been assigned to 356-358 (Other Digestive System O.R. Procedures)

<table>
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<tr>
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<td>983 (1.7615)</td>
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<td>(0.4065)</td>
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</tbody>
</table>

- **Procedure on Vascular Bodies- Chemoreceptors (39.89)**
  - 234 procedure codes omitted from MS-DRG 252-254 (Other Vascular Procedures)
MS-DRG REPLICATION ISSUES

• Occlusion of Esophageal Varices (42.91)
  • Codes 06L30CZ and 06L30DZ should have been assigned to 423-425 (Other Hepatobiliary or Pancreas O.R. Procedures) were assigned to 981-983 (Extensive O.R. Procedure Unrelated to Principal Diagnosis)

<table>
<thead>
<tr>
<th>FY 2016</th>
<th>FY 2017</th>
<th>RW Change</th>
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<tr>
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</table>

• Repair of Intestine (46.79)
  • Procedure codes 0DQF0ZZ, 0DQG0ZZ, 0DQL0ZZ, and 0DQM0ZZ omitted from MS-DRGs 329-331 (Major Small & Large Bowel Procedure)
MS-DRG REPLICATION ISSUES

- Obstetric laceration repair
  - Multiple ICD-10-PCS codes were assigned to 987-989 (Non-Extensive O.R. Procedure Unrelated to Principal Diagnosis), but should have been assigned to 774 (Vaginal Delivery w/ Complicating Diagnosis)

<table>
<thead>
<tr>
<th>FY 2016</th>
<th>FY 2017</th>
<th>RW Change</th>
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<td>989 (1.0425)</td>
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<td>(0.2463)</td>
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</tbody>
</table>

- Procedures on Breast (86.59)
  - Codes 0HQVXZZ AND 0HQYXZZ (assigned to MS-DRGs 981-983: Extensive O.R. Procedure Unrelated to Principal Diagnosis) are not longer OR procedures
**MS-DRG REPLICATION ISSUES**

- **Excision of Vulva (71.3)**
  - Code 0UBMXZZ was assigned to 981-983 (Extensive O.R. Procedure Unrelated to Principal Diagnosis), but should have been assigned to 746-747 (Vagina, Cervix & Vulva Procedures)

<table>
<thead>
<tr>
<th>FY 2016</th>
<th>FY 2017</th>
<th>RW Change</th>
</tr>
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<tbody>
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<tr>
<td>983 (1.7615)</td>
<td>747 (2.3553)</td>
<td>(0.8251)</td>
</tr>
</tbody>
</table>

- **Shoulder Replacement (78.42)**
  - Codes 0PRCOJZ AND 0PRDOJZ were omitted from MS-DRGs 492-494 (Lower Extremity and Humerus Proc Except Hip, Foot, and Femur)
MS-DRG REPLICATION ISSUES

• Lymph node biopsy (40.11)
  • Codes 07B74ZX, 07B70ZX, and 07B73ZX were assigned to 987-989 (Non-Extensive O.R. Procedure Unrelated to Principle Diagnosis), but should have been assigned to 166-168 (Other Resp System O.R. Procedures)

<table>
<thead>
<tr>
<th>FY 2016</th>
<th>FY 2017</th>
<th>RW Change</th>
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<tbody>
<tr>
<td>987 (3.2123)</td>
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<tr>
<td>988 (1.7533)</td>
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<td>989 (1.0425)</td>
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</table>

• Reposition (81.66)
  • Codes 0PRC0JZ, 0PS43ZZ, 0QS02ZZ, AND 0QS13ZZ were omitted from MS-DRGs 515-517 (Other Musculoskeletal System & Connective Tissue O.R. Procedure)
MS-DRG REPLICATION ISSUES

• Excision of Subcutaneous Tissue and Fascia (86.3)
  • 19 codes were omitted from MS-DRGs 579-581 (Other Skin and Subcutaneous Tissue and Breast Procedures)

• Insertion of Infusion Pump (86.06)
  • 16 codes now added as OR procedures

• Procedures on Bursa
  • Codes 0M850ZZ, 0M853ZZ, 0M854ZZ, 0M860ZZ, 0M863ZZ, and 0M864ZZ omitted from MS-DRGs 500-502 (Soft Tissue Procedures)
MS-DRG REPLICATION ISSUES

• Bladder Neck Repair (57.89)
  • Codes 0TQC0ZZ, 0TQC3ZZ, 0TQC4ZZ, 0TQC7ZZ, 0TQC8ZZ were omitted
    • MDC 11 (Kidney)– MS-DRGs 653-655 (Major Bladder Procedures)
    • MDC 13 (Female Reproductive) – MS-DRGs 749-750 (Other Female Reproductive System O.R. Procedures)

• Ungroupable Diagnosis (674.32)
  • Diagnosis code O90.2 will be assigned to MS-DRGs 769-776 Postpartum & Post Abortion Diagnoses) and not MS-DRG 999 (Ungroupable)
MS-DRG REPLICATION ISSUES

- Drainage of Pleural Cavity (34.06)
  - Codes 0W9940Z, 0W994ZZ, 0W9B40Z, and 0W9B4ZZ were not recognized as OR procedures
  - Codes will be added to MS-DRGs 166-168 (Other Resp System O.R. Procedures)

- Drainage of Cerebral Ventricle (02.22)
  - 18 codes were not recognized as procedures
  - These codes will be added to MS-DRGs 023-027 (Cranio w/ Major Dev Impl/Acute Complex CNS PDX)

- Insertion of Infusion Device (86.06)
  - 49 codes for insertion of infusion device into a joint or disc were omitted from the grouper logic
• Non-covered Procedures
  • Radical Prostatectomy– procedures on vas deferens will be removed when principal or secondary
diagnosis is without Z30.2 (Encounter for sterilization)

• Unacceptable Principal Diagnosis
  • Liveborn infant – Z38.4 and Z38.7 to be removed
  • High risk pregnancy – supervision of elderly primi/multigravida were not removed
    • However, there is an update for category O09
  • Multiple gestation – remove codes regarding multiple gestation and amniotic sac/cords

• Procedures Not Covered
  • Replication error with 00.62– Endovascular Mechanical Thrombectomy
  • 03CG3ZZ, 03CG4ZZ, 05CL3ZZ, 05CL4ZZ removed
• Newborn definition changed to Perinatal/NB Age=0 to Age <28 days from Age=0
• Pediatric Diagnosis (Age 0 – 17)
  • 12 codes removed from range F90 – F98
  • H26 (infantile or juvenile cataract) added
  • BMI codes removed due to age conflict (2 – 20) associated with codes
  • R62.50 and R62.59 (Development in childhood) removed
  • Y93.6A (Activity, physical games typically associated with recess) removed
• Female Codes
  • Z79.890 (Hormone replacement) removed
  • Z44.30 – Z44.32 (Fitting/adj – breast prosthesis) removed
  • Z45.811 – Z45.819 (adj/removal – breast implants) removed
MEDICARE CODE EDITOR

• Procedure Inconsistent with LOS
  • PCS code 5A1955Z only coded when LOS is >4 *consecutive* days
  • Title of MS-DRG 208 revised to Respiratory System Diagnosis with Vent Support <=96 Hours

• Maternity Diagnosis Codes
  • The following codes have been added to age conflict with maternity diagnosis: C58 (Malignancy of placenta), D39.2 (Neoplasm of uncertain behavior of placenta), and F53 (Puerperal psychosis)

• Manifestation Codes Not Allowed as PDx
  • All diagnoses from subcategory M02.8 (Other reactive arthropathies) have been added to this edit
• Removal of Questionable Admissions
  • T81.81XA (Complication of inhalation therapy)
  • T88.4XXA (Failed or difficult intubation)
  • T88.7XXA (Unspecified drug adverse effect)
  • T88.8XXA (Other specified complications of medical care)
  • T88.9XXA (Complication of medical/surgical care, unspecified)
ICD-10 CONVERSION

• Ending “code freeze”, resuming annual updates to ICD-10 Coding sets

• 1900 new ICD-10-CM diagnosis and nearly 3650 new ICD-10-PCS procedure codes are expected to be implemented October 1, 2016.

• More information available in the appendix.
ICD-10 CHANGES

- **Assign** the following ICD-10 codes to different MS-DRGs
  - ICD-10-PCS code clusters 02RK0JZ and 02RL0JZ to MS-DRG 001-002 (Heart Transplant or Implant of Heart Assist System)
  - ICD-10-CM codes T85.610A, T85.620A, T85.630A, T85.690A to MS-DRGs 091-093 (Other Disorders of Nervous System)
  - ICD-10-CM code R22.2 to MS-DRGs 606-607 under MDC 9
  - ICD-10-PCS codes 0JH602Z, 0JH632Z, 0JWT02Z, and 0JWT32Z to MS-DRGs 040-042 (Periph/Cranial Nerve & Other Nerv System Procedures), 260-262 (Cardiac Pacemaker Revision Except Device Replacement), 579-581 (Other Skin, Subcut Tiss & Breast Procedure), 907-909 (, 957-959
  - ICD-10-PCS codes for endovascular thrombectomy of lower limbs to MS-DRGs 270-272
  - ICD-9-CM code 35.97 and ICD-10-PCS code 02UG3JZ from MS-DRGs 273-274 to MS-DRGs 228-229
ICD-10 CHANGES

- Assign the following ICD-10 codes to different MS-DRGs

<table>
<thead>
<tr>
<th>Code</th>
<th>New MS-DRG</th>
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<tbody>
<tr>
<td>ICD-10-PSC code clusters 02RK0JZ and 02RL0JZ</td>
<td>MS-DRG 001-002 (Heart Transplant or Implant of Heart Assist System)</td>
</tr>
<tr>
<td>ICD-10-CM codes T85.610A, T85.620A, T85.630A, T85.690A</td>
<td>MS-DRGs 091-093 (Other Disorders of Nervous System)</td>
</tr>
<tr>
<td>ICD-10-CM code R22.2</td>
<td>MS-DRGs 606-607 (Minor Skin Disorders) under MDC 9</td>
</tr>
<tr>
<td>ICD-10-PCS codes 0JH602Z, 0JH632Z, 0JWT02Z, and 0JWT32Z</td>
<td>MS-DRGs 040-042 (Periph/Cranial Nerve &amp; Other Nerv System Procedures), 260-262 (Cardiac Pacemaker Revision Except Device Replacement), 579-581 (Other Skin, Subcut Tiss &amp; Breast Procedure), 907-909 (Other O.R. Procedures for Injuries), 957-959 (Other O.R. Procedures for Multiple Significant Trauma)</td>
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<tr>
<td>ICD-10-PCS codes for endovascular thrombectomy of lower limbs</td>
<td>MS-DRGs 270-272 (Other Major Cardiovascular Procedures)</td>
</tr>
<tr>
<td>ICD-9-CM code 35.97 and ICD-10-PCS code 02UG3JZ</td>
<td>MS-DRGs 228-229 (Other Cardiothoracic procedures) from MS-DRGs 273-274 (Percutaneous Intracardiac Procedures)</td>
</tr>
</tbody>
</table>
ICD-10 CHANGES

- **Simplify** ICD-10 MS-DRG/Grouper logic
  - Assignment to MS-DRG 242-243 (Permanent Cardiac Pacemaker Implant): ICD-10-PCS procedure codes involving pacemaker devices reported with certain ICD-10-PCS procedure codes involving pacemaker leads
  - Assignment to MS-DRG 258-259 (Cardiac Pacemaker Device Replacement): ICD-10-PCS procedure codes involving pacemaker decide insertions that are reported without any other pacemaker device procedure code
  - Assignment to MS-DRG 260-261 (Cardiac Pacemaker Revision Except Device Replacement): ICD-10-PCS procedure codes involving pacemaker lead insertion, removal, or revisions and insertion of hemodynamic devices without any other device insertion codes
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804-278-8998

PERFORMANCE INSIGHT
APPENDIX
### CMS FY 2017 TABLES 6A – 6M.1
**LIST OF NEW DIAGNOSIS AND PROCEDURE CODES, INVALID CODES, CC EXCLUSIONS, MCC AND CC**

**Click here for document**

<table>
<thead>
<tr>
<th>Diagnosis Code</th>
<th>Description</th>
<th>CC</th>
<th>PMCC/ PCC</th>
<th>MDC</th>
<th>MS-DRG</th>
</tr>
</thead>
<tbody>
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<td>Gastrointestinal stromal tumor, unspecified site</td>
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<td>08</td>
<td>542,543,544</td>
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<td>Gastrointestinal stromal tumor of esophagus</td>
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<tr>
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