

# JustCoding's 2024 ICD-10-PCS Code Updates

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A WEBINAR PRESENTED ON SEPTEMBER 13, 2023

## Presented By



**Kimberly Cunningham, CCS, CPC, CCDS-O**, is an instructor for HCPro's Certified Coder Boot Camp® programs. She has extensive experience with education, auditing, and management, and has worked to implement processes, policies, and curricula in her various roles. Prior to joining HCPro, she worked for an industry-leading university health system as a coding compliance manager, where her duties included education for providers, coders, and clinical documentation integrity specialists. Cunningham has also worked as an auditor on behalf of CMS and the Department of Health and Human Services.

# Agenda

- Updates to the 2024 ICD-10-PCS Guidelines
  - Revised guideline for hand-assisted laparoscopy
- New, revised, and deleted ICD-10-PCS codes
  - 78 new, 14 revised, 5 code deletions, and tabular revisions
  - Insertion of intraluminal device, bioprosthetic valve codes
  - Introduction of drugs into peripheral veins codes
  - Revision of vertebral joint fusions codes
  - Insertion/removal of defibrillator lead in mediastinum codes
- Updates to MS-DRGs
- Revisions to IPPS payment policies
- Q&A

# Learning Outcomes

- At the completion of this educational activity, the learner will be able to:
  - Identify new and revised code descriptions for the 2023 ICD-10-PCS code set
  - Explain changes to various MS-DRG classifications
  - Integrate updates to the ICD-10-PCS guidelines into their own coding practices
  - Determine potential areas of documentation improvement for new and revised codes

# FY 2024 ICD-10-PCS Updates

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Guideline updates

## B5.2b Percutaneous Endoscopic Approach with Hand-assistance or Extension of Incision

- Includes hand-assistance or extension of incision
- Revision to example for hand-assisted laparoscopic procedure
- Differs from *Coding Clinic* guidance from 3<sup>rd</sup> Quarter 2014

*Percutaneous endoscopic approach with hand-assistance or extension of incision*

B5.2b

Procedures performed using the percutaneous endoscopic approach with hand-assistance, or with an incision or extension of an incision to assist in the removal of all or a portion of a body part, or to anastomose a tubular body part with or without the temporary exteriorization of a body structure, are coded to the approach value Percutaneous Endoscopic.

*Examples:* Hand-assisted laparoscopic sigmoid colon resection with exteriorization of a segment of the colon for removal of specimen with return of colon back into abdominal cavity is coded to the approach value percutaneous endoscopic.

Laparoscopic sigmoid colectomy with extension of stapling port for removal of specimen and direct anastomosis is coded to the approach value percutaneous endoscopic.

Laparoscopic nephrectomy with midline incision for removing the resected kidney is coded to the approach value percutaneous endoscopic.

Robotic-assisted laparoscopic prostatectomy with extension of incision for removal of the resected prostate is coded to the approach value percutaneous endoscopic.

# THE OLD NEWS

Since 1914

Nº 768 345589

## Hand-Assisted Laparoscopy Nephroureterectomy

Published: Jul 1, 2014

Publisher: AHA Coding Clinic - ICD-10

Question:

A patient underwent a complete left nephroureterectomy. The kidney and proximal ureter were removed via “hand-assisted” laparoscopy and the distal ureter was removed from the bladder via an incision. What is the appropriate ICD-10-PCS code assignment for a left nephroureterectomy when two planned approaches are used to completely remove the ureter?

Answer:

The left kidney and proximal ureter were excised using a “hand port” laparoscopic-assisted approach. At surgery, an 8-cm incision was made to gain access to the distal ureter site. This is considered an open approach. For the left nephroureterectomy assign the following ICD-10-PCS procedure codes:

0TT10ZZ      Resection of left kidney, open approach

0TT70ZZ      Resection of left ureter, open approach

ICD-10-PCS Guidance  
supersedes *Coding  
Clinic* Guidance

## B6.1a Device – General Guidelines

- Examples removed from guideline B6.1a

be utilized for a brief duration during the procedure or current inpatient stay. If a device that is intended to remain after the procedure is completed requires removal before the end of the operative episode in which it was inserted (~~for example, the device size is inadequate or an event documented as a complication occurs~~), both the insertion and removal of the device should be coded.

### B6. Device

#### *General guidelines*

##### B6.1a

A device is coded only if a device remains after the procedure is completed. If no device remains, the device value No Device is coded. In limited root operations, the classification provides the qualifier values Temporary and Intraoperative, for specific procedures involving clinically significant devices, where the purpose of the device is to be utilized for a brief duration during the procedure or current inpatient stay. If a device that is intended to remain after the procedure is completed requires removal before the end of the operative episode in which it was inserted, both the insertion and removal of the device should be coded.





# FY 2024 ICD-10-PCS Updates

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Code Updates

## External Heart Assist Device Procedures

- Procedures for external heart assist devices via percutaneous approach
  - **02HW3RZ** – **Insertion** of short-term external heart assist system into thoracic aorta, descending
  - **02PW3RZ** – **Removal** of short-term external assist system from thoracic aorta, descending
  - **02WW3RZ** – **Revision** of short-term external assist system from thoracic aorta, descending
  - Aortix™ – pump is placed in the descending thoracic aorta via a percutaneous catheter procedure; allows the heart to rest and increases perfusion of the kidneys



# Temporary Occlusion Devices

- **02LW0DJ** – Occlusion of **thoracic aorta**, descending with intraluminal device, temporary, open approach
- **04L00DJ** – Occlusion of **abdominal aorta** with intraluminal device, open approach

Update from 4/1/2023

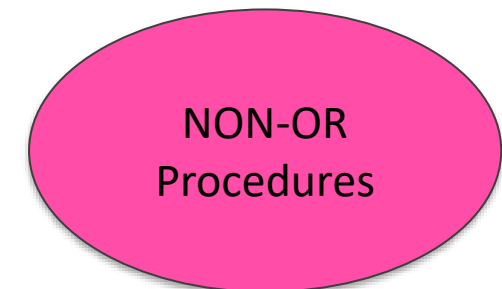
# Procedures to Reposition Larynx

- Table 0CS
  - Added – Body part Larynx
  - 0C**S**S**0**ZZ – Reposition **Larynx**, **open approach**
  - 0C**S**S**7**ZZ – Reposition **Larynx**, **via natural or artificial opening**
  - 0C**S**S**8**ZZ – Reposition **Larynx**, **via natural or artificial opening endoscopic**

<i>Section</i>	<b>0</b>	Medical and Surgical		
<i>Body System</i>	<b>C</b>	Mouth and Throat		
<i>Operation</i>	<b>S</b>	Reposition: Moving to its normal location, or other suitable location, all or a portion of a body part		
<i>Body Part</i>		<i>Approach</i>	<i>Device</i>	<i>Qualifier</i>
<b>R</b> Epiglottis		<b>0</b> Open	<b>Z</b> No Device	<b>Z</b> No Qualifier
<b>S</b> Larynx		<b>7</b> Via Natural or Artificial		
<b>T</b> Vocal Cord, Right		Opening		
<b>V</b> Vocal Cord, Left		<b>8</b> Via Natural or Artificial		
		Opening Endoscopic		

# Insertion of Magnetic Lengthening Device into Esophagus

- 0DH17JZ – Insertion of magnetic lengthening device into **upper esophagus**, vial natural or artificial opening
- 0DH27JZ – Insertion of magnetic lengthening device into **middle esophagus**, vial natural or artificial opening
- 0DH37JZ – Insertion of magnetic lengthening device into **lower esophagus**, vial natural or artificial opening
- Flourish<sup>®</sup> Pediatric Esophageal Atresia Device



# Destruction of Cervical and Thoracic Vertebra Using LITT

- Table – 0P5

<i>Section</i>	<b>0</b> Medical and Surgical			
<i>Body System</i>	<b>P</b> Upper Bones			
<i>Operation</i>	<b>5</b> Destruction: Physical eradication of all or a portion of a body part by the direct use of energy, force, or a destructive agent			
<i>Body Part</i>	<i>Approach</i>	<i>Device</i>	<i>Qualifier</i>	
<b>3</b> Cervical Vertebra	<b>0</b> Open	<b>Z</b> No Device	<b>3</b> Laser Interstitial Thermal	
<b>4</b> Thoracic Vertebra	<b>3</b> Percutaneous		Therapy	
	<b>4</b> Percutaneous Endoscopic		<b>Z</b> No Qualifier	

Update from 4/1/2023

# Destruction of Lumbar and Sacral Vertebra Using LITT

- Table – 0Q5

<i>Section</i>	<b>0</b> Medical and Surgical		
<i>Body System</i>	<b>Q</b> Lower Bones		
<i>Operation</i>	<b>5</b> Destruction: Physical eradication of all or a portion of a body part by the direct use of energy, force, or a destructive agent		
<i>Body Part</i>	<i>Approach</i>	<i>Device</i>	<i>Qualifier</i>
<b>0 Lumbar Vertebra</b>	<b>0</b> Open	<b>Z</b> No Device	<b>3</b> Laser Interstitial Thermal Therapy
<b>1 Sacrum</b>	<b>3</b> Percutaneous		
	<b>4</b> Percutaneous Endoscopic		<b>Z</b> No Qualifier

Update from 4/1/2023

# Mediastinum Defibrillator Lead Procedures

- Insertion procedures

<i>Section</i>	<b>0</b> Medical and Surgical		
<i>Body System</i>	<b>W</b> Anatomical Regions, General		
<i>Operation</i>	<b>H</b> Insertion: Putting in a nonbiological appliance that monitors, assists, performs, or prevents a physiological function but does not physically take the place of a body part		
<i>Body Part</i>	<i>Approach</i>	<i>Device</i>	<i>Qualifier</i>
<b>C</b> Mediastinum	<b>0</b> Open <b>3</b> Percutaneous <b>4</b> Percutaneous Endoscopic	<b>1</b> Radioactive Element <b>3</b> Infusion Device <b>G</b> Defibrillator Lead <b>Y</b> Other Device	<b>Z</b> No Qualifier



# Mediastinum Defibrillator Lead Procedures

- Removal procedures

<i>Section</i>	<b>0</b> Medical and Surgical			
<i>Body System</i>	<b>W</b> Anatomical Regions, General			
<i>Operation</i>	<b>P</b> Removal: Taking out or off a device from a body part			
<i>Body Part</i>	<i>Approach</i>	<i>Device</i>	<i>Qualifier</i>	
<b>C</b> Mediastinum	<b>0</b> Open <b>3</b> Percutaneous <b>4</b> Percutaneous Endoscopic <b>X</b> External	<b>0</b> Drainage Device <b>1</b> Radioactive Element <b>3</b> Infusion Device <b>7</b> Autologous Tissue Substitute <b>G</b> Defibrillator Lead <b>J</b> Synthetic Substitute <b>K</b> Nonautologous Tissue Substitute <b>Y</b> Other Device	<b>Z</b> No Qualifier	

# Mediastinum Defibrillator Lead Procedures

- Revision procedures

<i>Section</i>	<b>0</b> Medical and Surgical		
<i>Body System</i>	<b>W</b> Anatomical Regions, General		
<i>Operation</i>	<b>W</b> Revision: Correcting, to the extent possible, a portion of a malfunctioning device or the position of a displaced device		
<i>Body Part</i>	<i>Approach</i>	<i>Device</i>	<i>Qualifier</i>
<b>C</b> Mediastinum	<b>0</b> Open <b>3</b> Percutaneous <b>4</b> Percutaneous Endoscopic <b>X</b> External	<b>0</b> Drainage Device <b>1</b> Radioactive Element <b>3</b> Infusion Device <b>7</b> Autologous Tissue Substitute <b>G</b> Defibrillator Lead <b>J</b> Synthetic Substitute <b>K</b> Nonautologous Tissue Substitute <b>Y</b> Other Device	<b>Z</b> No Qualifier

# Transfusion into Bone Marrow

- Table 302 – Updates to transfusion into bone marrow
- Delivers blood products directly to the bone marrow

<i>Section</i>	<b>3</b>	Administration	
<i>Body System</i>	<b>0</b>	Circulatory	
<i>Operation</i>	<b>2</b>	Transfusion: Putting in blood or blood products	
<i>Body System / Region</i>		<i>Approach</i>	<i>Substance</i>
<b>A Bone Marrow</b>		<b>3</b> Percutaneous	<b>H</b> Whole Blood <b>J</b> Serum Albumin <b>K</b> Frozen Plasma <b>L</b> Fresh Plasma <b>N</b> Red Blood Cells <b>P</b> Frozen Red Cells <b>R</b> Platelets
			<b>0</b> Autologous <b>1</b> Nonautologous

Update from 4/1/2023

# Mechanical Ventilation, Intubated Prone Positioning

- Table 5A0
  - Stand alone procedure reported based on time
  - Patient is rotated from supine to prone in intervals, observed and then returned to supine
  - Treats acute respiratory distress syndrome (ARDS)

<i>Section</i>	<b>5</b>	Extracorporeal or Systemic Assistance and Performance		
<i>Body System</i>	<b>A</b>	Physiological Systems		
<i>Operation</i>	<b>0</b>	Assistance: Taking over a portion of a physiological function by extracorporeal means		
<i>Body System</i>		<i>Duration</i>	<i>Function</i>	<i>Qualifier</i>
<b>9</b> Respiratory		<b>B</b> Less than 8 Consecutive Hours <b>C</b> 8-24 Consecutive Hours <b>D</b> Greater than 24 Consecutive Hours	<b>5</b> Ventilation	<b>K</b> Intubated Prone Positioning

# Fluorescence Guided Procedures Using Pafolacianine

- Pafolacianine – imaging agent used for tumor identification and surgical resection (CYTALUX®)



<i>Section</i>	<b>8</b>	Other Procedures		
<i>Body System</i>	<b>E</b>	Physiological Systems and Anatomical Regions		
<i>Operation</i>	<b>0</b>	Other Procedures: Methodologies which attempt to remediate or cure a disorder or disease		
<i>Body Region</i>		<i>Approach</i>	<i>Method</i>	<i>Qualifier</i>
<b>U Female Reproductive System</b>		<b>0</b> Open <b>3</b> Percutaneous <b>4</b> Percutaneous Endoscopic <b>7</b> Via Natural or Artificial Opening <b>8</b> Via Natural or Artificial Opening Endoscopic	<b>E</b> Fluorescence Guided Procedure	<b>N Pafolacianine</b>
<b>W Trunk Region</b>		<b>0</b> Open <b>3</b> Percutaneous <b>4</b> Percutaneous Endoscopic <b>7</b> Via Natural or Artificial Opening <b>8</b> Via Natural or Artificial Opening Endoscopic	<b>E</b> Fluorescence Guided Procedure	<b>N Pafolacianine</b> <b>Z</b> No Qualifier

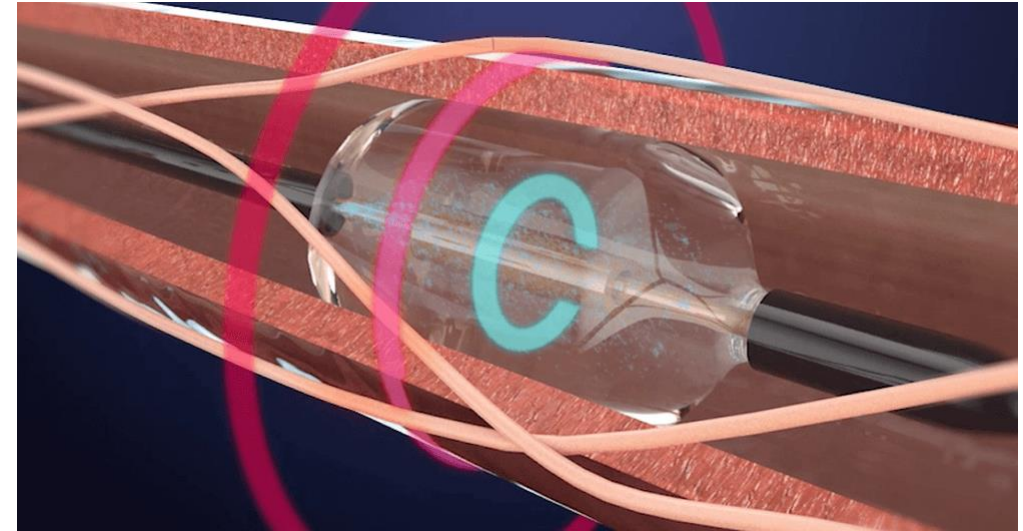
# FY 2024 ICD-10-PCS Updates

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New Technology Codes – Group 9

# Destruction of Renal Sympathetic Nerve(s) Using US Ablation

- X051329
- Paradise™ System Ultrasound Renal Denervation
- Treats elevated blood pressure that is unresponsive to treatment or patient is intolerant of medication



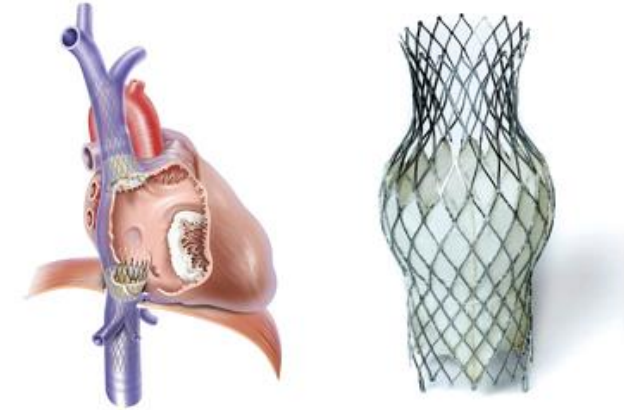
<https://www.recormedical.com/wp-content/uploads/2016/04/paradise-device-illustration.png>

<i>Section</i>	<b>X</b>	New Technology		
<i>Body System</i>	<b>0</b>	Nervous System		
<i>Operation</i>	<b>5</b>	Destruction: Physical eradication of all or a portion of a body part by the direct use of energy, force, or a destructive agent		
<i>Body Part</i>		<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>1</b> Renal Sympathetic Nerve(s)		<b>3</b> Percutaneous	<b>2</b> Ultrasound Ablation	<b>9</b> New Technology Group 9

# Insertion Intraluminal Device, Bioprosthetic Valve

- Table X2H
  - Added Root Operation – Insertion
  - Assed Body Part Values
    - Inferior Vena Cava
    - Superior Vena Cava
    - Femoral Vein, Right and Left
  - Added Device - Intraluminal Device, Bioprosthetic Valve

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TRICUSPID REGURGITATION AND RIGHT HEART FAILURE

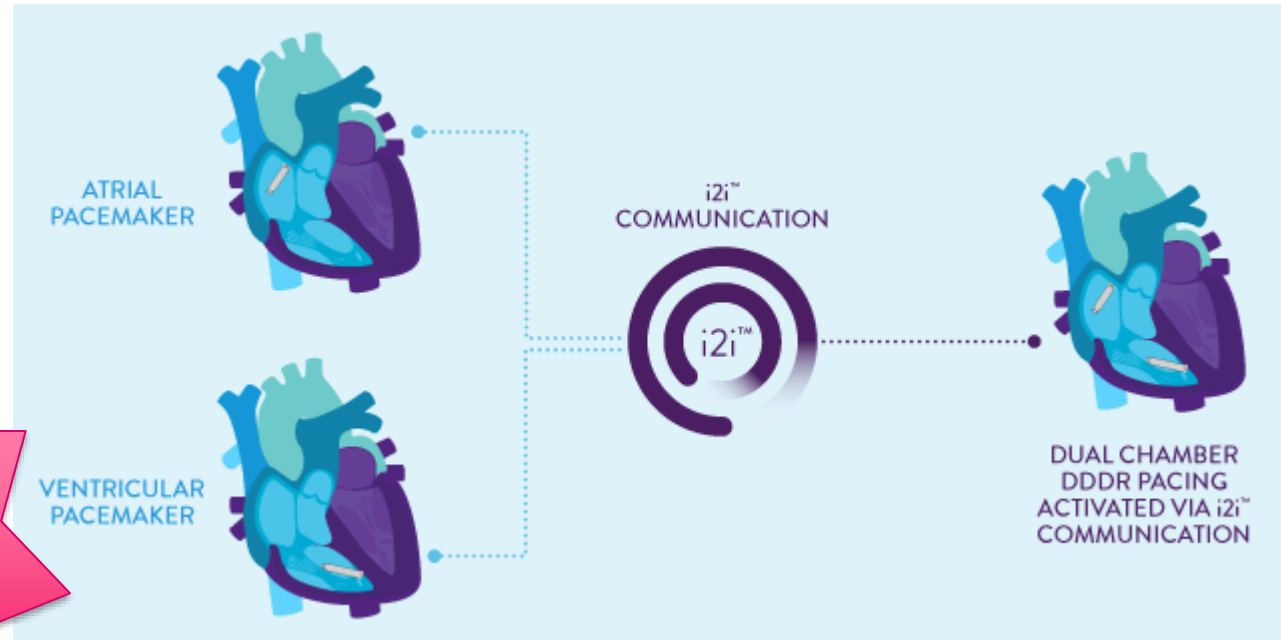
<i>Section</i>	<b>X</b>	New Technology		
<i>Body System</i>	<b>2</b>	Cardiovascular System		
<i>Operation</i>	<b>H</b>	Insertion: Putting in a nonbiological appliance that monitors, assists, performs, or prevents a physiological function but does not physically take the place of a body part		
<i>Body Part</i>		<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>0</b> Inferior Vena Cava <b>1</b> Superior Vena Cava		<b>3</b> Percutaneous	<b>R</b> Intraluminal Device, <b>B</b> Bioprosthetic Valve	<b>9</b> New Technology Group 9
<b>2</b> Femoral Vein, Right <b>3</b> Femoral Vein, Left		<b>0</b> Open	<b>R</b> Intraluminal Device, <b>B</b> Bioprosthetic Valve	<b>9</b> New Technology Group 9



# Insertion of Dual Chamber Leadless Pacemaker

- Table X2H
  - Added Device – Intracardiac Pacemaker, Dual Chamber
    - X2H63V9 and X2HK3V9
      - NTAP - \$15,600
  - Single (Atrial)
    - X2H63V9
      - NTAP – 10,725

NTAP for  
single or dual  
device  
insertion



<https://www.cardiovascular.abbott/content/dam/cv/cardiovascular/hcp/products/cardiac-rhythm-management/pacemakers/aveir-dr/WEB.AveirDR.Pillar2.1440x513.r4.png>

<b>Section</b>	<b>X New Technology</b>		
<b>Body System</b>	<b>2 Cardiovascular System</b>		
<b>Operation</b>	<b>H Insertion: Putting in a nonbiological appliance that monitors, assists, performs, or prevents a physiological function but does not physically take the place of a body part</b>		
<b>Body Part</b>	<b>Approach</b>	<b>Device / Substance / Technology</b>	<b>Qualifier</b>
6 Atrium, Right K Ventricle, Right	3 Percutaneous	<b>ADD V Intracardiac Pacemaker, Dual-Chamber</b>	9 New Technology Group 9

# Insertion of Short-term External Heart Assist Sytem

- Table X2H

- Added Body Part Values – Axillary Artery and Thoracic Aorta, Ascending
- Added Device – Conduit to Short-term External Heart Assist System
- Impella® 5.5 with SmartAssist® System – short-term external heart assist system using a conduit attached to the right or left axillary artery or to the ascending aorta
- Report a separate code for the insertion of the external heart assist system
  - 02HA0RZ - Insertion of Short-term External Heart Assist System into Heart, Open Approach

<i>Section</i>	<b>X</b>	New Technology		
<i>Body System</i>	<b>2</b>	Cardiovascular System		
<i>Operation</i>	<b>H</b>	Insertion: Putting in a nonbiological appliance that monitors, assists, performs, or prevents a physiological function but does not physically take the place of a body part		
<i>Body Part</i>		<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>L</b> Axillary Artery, Right <b>M</b> Axillary Artery, Left <b>X</b> Thoracic Aorta, Ascending		<b>0</b> Open	<b>F</b> Conduit to Short-term External Heart Assist System	<b>9</b> New Technology Group 9

# Bypass Femoral Artery Using Conduit through Femoral Vein

- Table X2K
  - Added Body Parts – Femoral Artery, Right and Left
  - Added Device
    - Conduit through Femoral Vein to Superficial Femoral Artery
    - Conduit through Femoral Vein through Popliteal Artery
  - DETOUR<sup>®</sup> system - TORUS<sup>™</sup> Stent Graft Delivery System
    - deployed from the popliteal artery or superficial femoral artery into the femoral vein, and from the femoral vein into the superficial femoral artery (SFA) in a continuous, overlapping fashion through two independent anastomoses

**NTAP**  
**\$16,250**

<i>Section</i>	<b>X</b>	New Technology		
<i>Body System</i>	<b>2</b>	Cardiovascular System		
<i>Operation</i>	<b>K</b>	Bypass: Altering the route of passage of the contents of a tubular body part		
<i>Body Part</i>		<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>H</b> Femoral Artery, Right <b>J</b> Femoral Artery, Left		<b>3</b> Percutaneous	<b>D</b> Conduit through Femoral Vein to Superficial Femoral Artery <b>E</b> Conduit through Femoral Vein to Popliteal Artery	<b>9</b> New Technology Group 9

# Insertion of Extraluminal Support Device During CABG and AV Fistula Creation

- Created Table X2U
  - Added Body parts
    - Coronary arteries, upper extremity vein – right and left
  - Added Device
    - Vein graft extraluminal support device
    - Synthetic supplement, extraluminal support device

<i>Section</i>	<b>X</b>	New Technology		
<i>Body System</i>	<b>2</b>	Cardiovascular System		
<i>Operation</i>	<b>U</b>	Supplement: Putting in or on biological or synthetic material that physically reinforces and/or augments the function of a portion of a body part		
<i>Body Part</i>		<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>4</b> Coronary Artery/Arteries		<b>0</b> Open	<b>7</b> Vein Graft Extraluminal Support Device(s)	<b>9</b> New Technology Group 9
<b>Q</b> Upper Extremity Vein, Right		<b>0</b> Open	<b>P</b> Synthetic Substitute, Extraluminal Support Device	<b>9</b> New Technology Group 9
<b>R</b> Upper Extremity Vein, Left				

# Insertion of Tibial Extension with Motion Sensors

- Table XNH
  - Added Body Parts – Tibia, Right and Left
  - Added Device – Tibial Extension with Motion Sensors
    - XNHG0F9
    - XNHH0F9
  - Canturio™ Tibial Extension (CTE) with Canary Health Implanted Reporting Processor (CHIRP™)
    - Collects kinematic data pertaining to a patient’s gait and activity level following TKA



<i>Section</i>	<b>X</b> New Technology		
<i>Body System</i>	<b>N</b> Bones		
<i>Operation</i>	<b>H</b> Insertion: Putting in a nonbiological appliance that monitors, assists, performs, or prevents a physiological function but does not physically take the place of a body part		
<i>Body Part</i>	<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>G</b> Tibia, Right <b>H</b> Tibia, Left	<b>0</b> Open	<b>F</b> Tibial Extension with Motion Sensors	<b>9</b> New Technology Group 9

# Replacement of Skull with US Penetrable Synthetic Substitute

- New Table – XNR
- Longevity ClearFit® Cranial Implant
  - Allows for trans-cranioplasty ultrasound procedure that can be performed at the bedside

<i>Section</i>	<b>X</b> New Technology		
<i>Body System</i>	<b>N</b> Bones		
<i>Operation</i>	<b>R</b> Replacement: Putting in or on biological or synthetic material that physically takes the place and/or function of all or a portion of a body part		
<i>Body Part</i>	<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>8</b> Skull	<b>0</b> Open	<b>D</b> Synthetic Substitute, Ultrasound Penetrable	<b>9</b> New Technology Group 9

# Insertion of Talar Prosthesis with Total Ankle Replacement

- Table XNR
  - Added Body Part – Tarsal, Right and Left
  - Added Device – Synthetic Substitute, Talar Prosthesis
  - 4WEB® Medical’s Total Ankle Talar Replacement™ (TATR)
    - Matched with patients TKR prosthesis
    - Improves function and improves range of motion of ankle joint

<i>Section</i>	<b>X</b> New Technology		
<i>Body System</i>	<b>N</b> Bones		
<i>Operation</i>	<b>R</b> Replacement: Putting in or on biological or synthetic material that physically takes the place and/or function of all or a portion of a body part		
<i>Body Part</i>	<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>L</b> Tarsal, Right <b>M</b> Tarsal, Left	<b>0</b> Open	<b>9</b> Synthetic Substitute, Talar Prosthesis	<b>9</b> New Technology Group 9

# Total Ankle Fusion

- Table XRG
  - Added Body Parts – Ankle Joint, Right and Left and Tarsal Joint, Right and Left
  - Added Device – Internal Fixation Device, Open-truss design
- 4WEB® Ankle Truss System™
  - provides structural support to allow bone fusion across ankle bone defects, while preserving limb length that is needed for realignment

<i>Section</i>	<b>X</b> New Technology		
<i>Body System</i>	<b>R</b> Joints		
<i>Operation</i>	<b>G</b> Fusion: Joining together portions of an articular body part rendering the articular body part immobile		
<i>Body Part</i>	<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>J</b> Ankle Joint, Right <b>K</b> Ankle Joint, Left <b>L</b> Tarsal Joint, Right <b>M</b> Tarsal Joint, Left	<b>0</b> Open	<b>B</b> Internal Fixation Device, Open-truss Design	<b>9</b> New Technology Group 9



# Introduction of Substances – Table XW0

Substance	ICD-10-PCS New Technology Code	FY 2024 NTAP (if applicable)
Elranatamab Antineoplastic	XW013L9	
Epcoritamab Monoclonal Antibody (Epkinly™)	XW013S9, XW033P9, or XW043P9	NTAP - \$6,504.07
Sulbactam-Durlobactam (XACDURO®)	XW033K9 or XW043K9 in combination with one of the following: Y95 and J15.6; OR J95.851 and B96.89	NTAP - \$13,680 *must have qualifying dx
Glofitamab Antineoplastic (Columvi™)	XW013S9, XW033P9, or XW043P9	NTAP - \$6,504.07
Posoleucel		
Rezafungin (Rezzayo™)	XW033R9 or XW043R9	NTAP - \$4,387.50
Melphalan Hydrochloride Antineoplastic	XW053T9	
Quizartinib Antineoplastic	XW0DXJ9	
Sabizabulin	XW0DXK8	
SER-109	XW0DXN9	
Mosunetuzab (Lunsumio™)	XW03358 or XW04358	NTAP – \$17,492.10
Spesolimab (SPEVIGO®)	XW03308	NTAP - \$33,236.45
Teclistamab-cqyv (TECVAYLI™)	XW01348	NTAP - \$8,940.54
*See NTAP file for ICD-10-PCS Procedure codes		

# Infusion Substance Information

- ✓ **Elranatamab Antineoplastic** - Elranatamab is a bispecific antibody: binding of elranatamab to CD3-expressing T-cells and BCMA-expressing multiple myeloma cells causes targeted T-cell-mediated cytotoxicity. for the treatment of patients with relapsed or refractory multiple myeloma
- ✓ **Epcoritamab, sold under the brand name Epkinly**, is a monoclonal antibody anticancer medication used for the treatment of diffuse large B-cell lymphoma.
- ✓ **Sulbactam/durlobactam, sold under the brand name Xacduro**, is a co-packaged medication used for the treatment of bacterial pneumonia caused by *Acinetobacter baumannii-calcoaceticus* complex
  - NTAP Xacduro - XW033K9 or XW043K9 in combination with one of the following: Y95 and J15.6; OR J95.851 and B96.89
- ✓ **Glofitamab, sold under the brand name Columvi**, is a bispecific monoclonal antibody used for the treatment of diffuse large B-cell lymphoma. It is a bispecific CD20-directed CD3 T-cell engager.
- ✓ **Rezafungin** is an antifungal drug of the echinocandin class. Rezafungin was approved by the Food and Drug Administration in March 2023 for the treatment of candidemia and invasive candidiasis in adults with limited or no alternative treatment option
- ✓ **LUNSUMIO (mosunetuzumab-axgb)** is a prescription medicine used to treat adults with follicular lymphoma whose cancer has come back or did not respond to previous treatment, and who have already received two or more treatments for their cancer.
- ✓ **Spesolimab**, sold under the brand name Spevigo, is a monoclonal antibody medication used for the treatment of generalized pustular psoriasis. It is an interleukin-36 receptor antibody.
- ✓ **TECVAYLI™** is a prescription medicine to treat adults with multiple myeloma who:
  - have already received at least 4 treatment regimens, including a proteasome inhibitor, an immunomodulatory agent and an anti-CD38 monoclonal antibody to treat their multiple myeloma,
  - and**
  - their cancer has come back or did not respond to prior treatment
- ✓ **Review the entire list of NTAP to ensure that all of the correct information regarding procedure and diagnosis codes that are required for reporting are met in order to receive the NTAP.**
  - ✓ FY 2024 IPPS Final Rule Home/MAC Implementation File 8

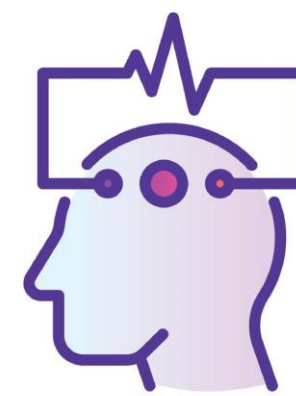
# Transfusion of Substance – Table XW1

- Table XW1
  - Lovo-cel<sup>®</sup> – used to treat Sickle Cell Disease
    - XW133H9
    - XW143H9
    - One time gene therapy for patient 12 years and older

<i>Section</i>	<b>X</b>	New Technology		
<i>Body System</i>	<b>W</b>	Anatomical Regions		
<i>Operation</i>	<b>1</b>	Transfusion: Putting in blood or blood products		
<i>Body Part</i>		<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>3</b> Peripheral Vein		<b>3</b> Percutaneous	<b>H</b> Lovotibeglogene Autotemcel	<b>9</b> New Technology Group 9
<b>4</b> Central Vein		<b>3</b> Percutaneous	<b>H</b> Lovotibeglogene Autotemcel	<b>9</b> New Technology Group 9

# Monitoring Procedures

- Table XX2
  - Ceribell® Status Epilepticus Monitor
    - Rapid Response EEG



EEG



<i>Section</i>	<b>X</b>	New Technology		
<i>Body System</i>	<b>X</b>	Physiological Systems		
<i>Operation</i>	<b>2</b>	Monitoring: Determining the level of a physiological or physical function repetitively over a period of time		
<i>Body Part</i>		<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>0</b> Central Nervous		<b>X</b> External	<b>8</b> Brain Electrical Activity, Computer-aided Detection and Notification	<b>9</b> New Technology Group 9
<b>F</b> Musculoskeletal		<b>3</b> Percutaneous	<b>W</b> Muscle Compartment Pressure, Micro-Electro-Mechanical System	<b>9</b> New Technology Group 9

# Measurement Procedures

- Table XXE
- EchoGo<sup>®</sup> Heart Failure
  - Single view echo to diagnose HFpEF



<i>Section</i>	<b>X</b> New Technology		
<i>Body System</i>	<b>X</b> Physiological Systems		
<i>Operation</i>	<b>E</b> Measurement: Determining the level of a physiological or physical function at a point in time		
<i>Body Part</i>	<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>2</b> Cardiac	<b>X</b> External	<b>1</b> Output, Computer-aided Assessment	<b>9</b> New Technology Group 9
<b>5</b> Circulatory	<b>X</b> External	<b>Y</b> Infection, Other Positive Blood/Isolated Colonies Bimodal Phenotypic Susceptibility Technology	<b>9</b> New Technology Group 9

# Additional NTAP for FY 2024

Technology	ICD-10-PCS Code	NTAP
Phagenyx® System	XWHD7Q7	\$3250.00
REBYOTA™ (fecal microbiota, live-jslm) and VOWST™ (fecal microbiota spores, live-brpk)	XW0H7X8 or XW0DXN9	\$6789.25
SAINT Neuromodulation System	X0Z0X18	\$12,675.00
TOPS™ System	XRHB018 in combination with M48.062	\$11,375.00

<https://www.cms.gov/medicare/acute-inpatient-pps/fy-2024-ipp-pps-final-rule-home-page>

# Continued NTAP for FY 2024

Technology	ICD-10-PCS Code	NTAP
Hemolung Respiratory Assist System (RAS) (non-COVID-19 related use)	5A0920Z without U07.1	\$6,500.00
iFuse Bedrock Granite Implant System	XNH6058, XNH6358, XNH7058, XNH7358, XRGE058, XRGE358, XRGF058, or XRGF358	\$9,828.00
Intercept® Fibrinogen Complex (PRCFC)	30233D1 or 30243D1 in combination with one of the following: D62, D65, D68.2, D68.4, or D68.9	\$2,535.00
Livtencity™ (maribavir)	XW0DX38 or XW0G738 or XW0H738	\$32,500.00
Rybrevant® (amivantamab)	XW033B7 or XW043B7	\$6,405.89
StrataGraft®	XHRPXF7	\$44,200.00
Thoraflex™ Hybrid Device	X2RX0N7 in combination with X2VW0N7	\$22,750.00
ViviStim® Paired VNS System	X0HQ3R8	\$23,400.00

Deleted Codes	
XV508A4	Destruction of Prostate using Robotic Waterjet Ablation, Via Natural or Artificial Opening Endoscopic, Group 4
XW033G4	Introduction of Plazomicin Anti-infective into Peripheral Vein, Percutaneous Approach, Group 4
XW033HG	Introduction of Synthetic Human Angiotensin II into Peripheral Vein, Percutaneous Approach, Group 4
XW043G4	Introduction of Plazomicin Anti-infective into Central Vein, Percutaneous Approach, Group 4
XW043H4	Introduction of Synthetic Human Angiotensin II into Central Vein, Percutaneous Approach, Group 4

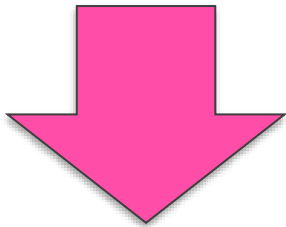


# FY 2024 MS-DRG Changes

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# Insertion Short-term Heart Assist Device

- MS-DRG Change
  - Procedure Code - 02HA0RZ - Insertion of Short-term External Heart Assist System into Heart, **Open Approach**
  - Moved from MDC 05, MS-DRG 215 – Other Heart Assist Implant
    - R.W. 10.2148



- Pre-MDC MS-DRGs 001 and 002
  - 001 – Heart transplant or Implant of Heart Assist System with MCC
    - R.W. 27.0986
  - 002 – Heart transplant or Implant of Heart Assist System without MCC
    - R.W. 12.2441

# Central Retinal Artery Occlusion and Retinal Artery Branch Occlusion Procedures

- DRG Reassignment
- Removed from MS-DRG 123 – Neurological Eye Disorders
  - R.W. 0.8040



- Moved to MS-DRGs 124 and 125
  - MDC 02 – Medical
  - Principal diagnosis – CRAO/BRAO – Category H34.-
  - Procedure Codes – Table 3E0 - Administration of thrombolytic agent (Non-OR)
  - MS-DRG 124 – Other Disorders of the Eye with MCC or Thrombolytic Therapy
    - R.W. 1.3219
  - MS-DRG 125 – Other Disorders of the Eye without MCC
    - R.W. 0.7975

# US Accelerated and Other Thrombolysis with PDX of PE

- New MS-DRG 173 - Ultrasound Accelerated and Other Thrombolysis with PDX of Pulmonary Embolism
  - MDC 04
  - Surgical
  - R.W. 3.0750
  - Principal Diagnosis – Pulmonary Embolism – Category I26.- and I27.82
  - Procedure Codes – Tables 02F and 3E0

# Respiratory Infections and Inflammations

- DRG Revision – MS-DRG 177
  - MCC Exclusions – will not report as an MCC when used as an additional diagnosis
    - A48.1 - Legionnaires' disease
    - J15.0 - Pneumonia due to Klebsiella pneumoniae
    - J15.1 - Pneumonia due to Pseudomonas
    - J15.20 - Pneumonia due to staphylococcus, unspecified
    - J15.211 - Pneumonia due to Methicillin susceptible Staphylococcus aureus
    - J15.212 - Pneumonia due to Methicillin resistant Staphylococcus aureus
    - J15.29 - Pneumonia due to staphylococcus
    - J15.5 - Pneumonia due to Escherichia coli
    - J15.61 - Pneumonia due to Acinetobacter baumannii
    - J15.69 - Pneumonia due to other Gram-negative bacteria
    - J15.8 - Pneumonia due to other specified bacteria

## Cardiovascular – AVR and MVR with Concomitant Procedures

- New MS-DRG 212 – Concomitant Aortic and Mitral Valve Procedures
  - MDC 05 - Surgical
  - R.W. 10.7707
  - Diagnosis coding – Atrial fibrillation as a principal or secondary diagnosis
  - Procedure coding
    - AVR or MVR repair or replacement procedure
      - Tables 02Q, 02R
      - Table 6P.4a
    - Additional procedure from MDC 5
      - CABG
      - Creation
      - Ablation
      - Dilation
      - Short-term heart assist device
      - Repair/replacement on other cardiac structures (TV, PV, aorta etc.)
      - Cardiac Catheterization

# Cardiovascular Stent Procedures

- Deleted DRGs
  - MS-DRG 246 – 249 – Percutaneous cardiovascular procedures with stent insertion
  - Removed “drug eluting” or “non-drug eluting”
- New DRGs
  - MS-DRG 321 – Percutaneous cardiovascular procedure with intraluminal device with MCC or 4+ arteries or stents
  - MS-DRG 322 – Percutaneous cardiovascular procedures with intraluminal device without MCC

# Cardiac Defibrillator Implants

- Deleted DRGs
  - MS-DRG 222 – 225 Cardiac Defibrillator Implants with AMI, HF, or shock with or without MCC
  - MD-DRG 226 – 227 Cardiac Defibrillator Implants without Cardiac Cath with or without MCC
- New DRGs
  - MDC 05 – Surgical
  - ICD-10-PCS Codes for insertion of leads and pulse generator
    - Table 6.7Pa (DRG 275) and 6P.7b (DRGs 276 and 277)
  - MS-DRG 275 Cardiac Defibrillator Implants with cardiac catheterization and MCC
    - RW 7.0358
  - MS-DRG 276 Cardiac Defibrillator Implants with MCC
    - RW 6.2102
  - MS-DRG 277 Cardiac Defibrillator Implants without MCC
    - RW 4.7824



# US Accelerated & Other Thrombolysis of Peripheral Vascular Structures

- New MS-DRGs
  - MS-DRG 278 - Ultrasound Accelerated & Other Thrombolysis of Peripheral Vascular Structures with MCC – R.W. 4.4604
  - MS-DRG 279 - Ultrasound Accelerated & Other Thrombolysis of Peripheral Vascular Structures without MCC – R.W. 3.2006
  - MDC 05
  - Surgical
  - Procedure coding – Fragmentation procedures of peripheral arteries and veins
    - Tables 03F, 04F, 05F, 06F
    - See Table 6P.5a

# Coronary Intravascular Lithotripsy

- New MS-DRGs
- MDS 05 – Surgical
- Fragmentation ICD-10-PCS code **AND** Intraluminal Device
  - 323 – Coronary Intravascular Lithotripsy with Intraluminal Device with MCC
    - R.W. 4.1400
  - 324 – Coronary Intravascular Lithotripsy with Intraluminal Device without MCC
    - R.W. 2.9686
- Only Fragmentation
  - 325 – Coronary Intravascular Lithotripsy without Intraluminal Device
    - R.W. 2.6443
- Fragmentation Codes – Table 02F
- Intraluminal Device Codes – Table 027 and 02H
  - See Table 6P.6a for list of ICD-10-PCS codes

# Appendix Procedures

- Deleted MS-DRGs
  - 338 – 341 – Appendectomy with Complicated PDX with and without CC/MCC
  - 342 – 343 – Appendectomy without Complicated PDX with and without CC/MCC
- New MS-DRGs
  - MDC 06 – Surgical
  - 397 – Appendix procedures with MCC
    - R.W. 2.2466
  - 398 – Appendix procedures with CC
    - R.W. 1.5133
  - 399 – Appendix procedures without CC/MCC
    - R.W. 1.1131

# Spinal Fusion with Interbody Fusion Device

- Proposal to modify MS-DRGs 453 – 460 related to interbody fusion device utilization
- Aprevo™ customized interbody spinal fusion device
  - Devices created with a 3D printer based on x-rays obtained prior to surgery
- Shown to have increased costs
- Concern with device code utilization – Revised code title to facilitate more accurate code assignment

<i>Section</i>	<b>X</b> New Technology		
<i>Body System</i>	<b>R</b> Joints		
<i>Operation</i>	<b>G</b> Fusion: Joining together portions of an articular body part rendering the articular body part immobile		
<i>Body Part</i>	<i>Approach</i>	<i>Device / Substance / Technology</i>	<i>Qualifier</i>
<b>A</b> Thoracolumbar Vertebral Joint <b>B</b> Lumbar Vertebral Joint <b>C</b> Lumbar Vertebral Joints, 2 or more <b>D</b> Lumbosacral Joint	<b>0</b> Open <b>3</b> Percutaneous <b>4</b> Percutaneous Endoscopic	<b>R</b> Interbody Fusion Device, Custom-Made Anatomically Designed	7 New Technology Group 7

# Resection of Sigmoid Colon, Percutaneous Approach

- Procedure found to be most frequently reported with a PDX from MDC 11 – Diseases and Disorders of the Kidney and Urinary Tract
  - Most frequently with Dx code N32.1 – Vesicointestinal fistula
- Previously grouped to MS-DRGs 981 - 983
- Will now report to MS-DRGs 673, 674 and 675
  - 673 – Other Kidney and Urinary Tract Procedures with MCC
    - R.W. 3.6980
  - 674 – Other Kidney and Urinary Tract Procedures with CC
    - R.W. 2.3822
  - 675 – Other Kidney and Urinary Tract Procedures without CC/MCC
    - R.W. 1.5865

# Open Excision of Muscle

- ICD-10-PCS Codes from Table 0KB – Excision of Muscle
- Most frequently reported with Dx code I96 – Gangrene
- Previously grouped to MS-DRGs 981 – 983
- Will now group to MS-DRG 264
  - 264 – Other Circulatory System O.R. Procedures
    - R.W. 3.2660

# Open Replacement of Skull with Synthetic Substitute

- ICD-10-PCS code 0NR00JZ – Replacement of skull with synthetic substitute, open approach
- Reported with PDx from MDC 09 – Diseases and Disorders of the Skin, subcutaneous tissue and Breast
  - Most frequently reported with Dx Z42.8 – Encounter for other plastic and reconstructive surgery following medical procedure or healed injury
- Previously grouped to MS-DRGs 981 – 983
- Will now report to MS-DRGs 579, 580 and 581
  - 579 - Other Skin, Subcutaneous Tissue and Breast Procedures with MCC
    - R.W. 3.3422
  - 580 - Other Skin, Subcutaneous Tissue and Breast Procedures with CC
    - R.W. 1.7466
  - 581 - Other Skin, Subcutaneous Tissue and Breast Procedures without CC/MCC
    - R.W. 1.3467

# Endoscopic Dilation of Ureters with Intraluminal Device

- Procedures for endoscopic dilation of ureters with intraluminal devices reported with Dx from MDC 05 – Diseases and Disorders of the Circulatory System
  - Most frequently reported with PDx I13.0 – Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 CKD, or unspecified CKD

ICD-10-PCS Code	Description
0T768DZ	Dilation of right ureter with intraluminal device, via natural or artificial opening endoscopic
0T778DZ	Dilation of left ureter with intraluminal device, via natural or artificial opening endoscopic
0T788DZ	Dilation of bilateral ureters with intraluminal device, via natural or artificial opening endoscopic

- Previously grouped to MS-DRGs 987 – 989
- Will now group to MS-DRG 264
  - 264 – Other Circulatory System O.R. Procedures
    - R.W. 3.2660



# Occlusion of Splenic Artery

- ICD-10-PCS Codes from Table 0T7 – Occlusion of splenic artery
- Most frequently reported with PDx in MDC 16
- Previously reported to MS-DRGs 987-989
- Will now group to MS-DRGs 799-801 with revised DRG Titles
  - Previously “Splenectomy with MCC, with CC, and without CC/MCC”
  - 799 – Splenic Procedures with MCC
    - R.W. 4.9546
  - 800 – Splenic Procedures with CC
    - R.W. 2.8177
  - 801 – Splenic Procedures without CC/MCC
    - R.W. 1.7897

# Questions & Answers



**Kimberly Cunningham, CCS, CPC,  
CCDS-O**  
Instructor  
HCPPro  
Middleton, MA

**To Submit a Question:** Go to the Q&A box located in the lower left area of your screen. Type your question in the lower text box, then press your “Enter” key.

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## This concludes today's program.

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***Unpack the 2024 IPPS Final Rule***

**September 27, 2023 at 1:00 p.m. ET**

For more information on this event, visit our website: <https://hcmarketplace.com/unpack-2024-ippa-final-rule>

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