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## GENERAL INFORMATION

### 2021 ICD Implementation

On October 1, 2020, Texas Medicaid & Healthcare Partnership (TMHP) applied the 2020 annual International Classification of Diseases (ICD) updates that are effective for dates of service on or after October 1, 2020. The annual ICD updates include the following:

- ICD-10 Clinical Modification (ICD-10-CM)
- ICD-10 Procedure Coding System (ICD-10-PCS)

This combined Special Bulletin includes the ICD updates for Texas Medicaid and the Children with Special Health Care Needs (CSHCN) Services Program. This bulletin is intended to notify providers of program and coding changes related to the 2021 updates for ICD and Current Procedural Terminology (CPT®).

All providers are encouraged to review the “General Information” section of this bulletin. Policy updates for a specific program or provider type are discussed in designated sections of the bulletin. ■

### Claims Filing

The new 2021 ICD diagnosis codes and inpatient hospital surgical procedure codes may be billed beginning October 1, 2020. The new 2021 ICD codes must be billed for dates of service on or after October 1, 2020.

**Important:** To avoid fraudulent billing, providers must submit the ICD codes that are most appropriate for the services provided.

The ICD-10-PCS procedure codes are inpatient hospital surgical procedure codes and must be submitted, as applicable, only on inpatient hospital claims.

**Note:** *For professional and outpatient procedures and services, providers must continue to use the American Medical Association (AMA) Current Procedural Terminology (CPT) manual and the Centers for Medicare & Medicaid Services (CMS) Health Care Common Procedure Coding System (HCPCS) manual.* ■

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## MEDICAID FEE-FOR-SERVICE AND MANAGED CARE PROVIDERS

### Texas Medicaid ICD Updates

The 2021 ICD updates for Texas Medicaid are included in the ICD tables in the “All Code Changes” section of this bulletin beginning on page 14. The 2021 ICD deletions and replacements are effective October 1, 2020, for dates of service on or after October 1, 2020, for Texas Medicaid. Providers may refer to the “General Information” section for more information.

### Texas Medicaid Benefit Changes

The following Texas Medicaid benefit changes have been made to support the 2021 ICD-CM diagnosis code updates and are effective for dates of service on or after October 1, 2020. For more information, call the TMHP Contact Center at 800-925-9126.

**Note:** *These changes apply to Texas Medicaid fee-for-service and Medicaid managed care claims and authorization requests that are submitted to TMHP for processing.*

The policy articles in this bulletin contain the following information:

- **Revised:** The description has been revised for these diagnosis codes. Providers may refer to the appropriate copyright holder for the revised descriptions.
- **Discontinued:** Discontinued diagnosis codes are no longer reimbursed after September 30, 2020.
- **Added:** Added diagnosis codes are new diagnosis codes added by CMS.

### Clinician-Administered Drug – Chelating Agents

The following diagnosis codes may be reimbursed when submitted with procedure code J0895:

Added Diagnosis Codes									
D5703	D5709	D57213	D57218	D57413	D57418	D5742	D57431	D57432	D57433
D57438	D57439	D5744	D57451	D57452	D57453	D57458	D57459	D57813	D57818
N1830	N1831	N1832							
Discontinued Diagnosis Code									
N183									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Outpatient Drug Services Handbook*, subsection 7.16.3 “Deferoxamine mesylate (Desferal),” for more information.

### Clinician-Administered Drug – Hematopoietic Injections

The following diagnosis codes may be reimbursed when submitted with procedure codes J0881, J0882, J0885, and J0888:

Added Diagnosis Codes									
N1830	N1831	N1832							
Discontinued Diagnosis Code									
N183									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Outpatient Drug Services Handbook*, subsection 7.33, “Hematopoietic Injections,” for more information.

### Cytogenetics Testing

The following diagnosis code will no longer be reimbursed when submitted with procedure codes 88230, 88233, 88237, 88239, 88245, 88248, 88249, 88261, 88262, 88263, 88264, 88271, 88272, 88273, 88274, 88275, 88280, 88283, 88285, 88289, and 88291:

Discontinued Diagnosis Code									
Q5120									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physicians Assistants Handbook*, subsection 9.2.39.6 “Cytogenetics Testing,” for more information.

### Diagnostic Doppler Sonography

The following diagnosis codes will no longer be reimbursed when submitted with Peripheral Arterial Doppler Studies procedure codes 93922, 93923, 93924, 93925, 93926, 93930 and 93931:

Discontinued Diagnosis Codes									
N183	T86848								

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, subsection 9.2.26.3 “Peripheral Arterial Doppler Studies,” for more information.

### Echoencephalography

The following diagnosis codes may be reimbursed when submitted with procedure code 76506:

Added Diagnosis Codes									
P91821	P91822	P91823	P91829						

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, 9.2.25.5 “Echoencephalography,” for more information.

### Evoked Response Tests and Neuromuscular Procedures

The following diagnosis codes may be reimbursed when submitted with electromyography (EMG) and nerve conduction study (NCS) procedure codes:

Added Diagnosis Codes									
G7120	G7121	G71220	G71228	G7129	M057A	M058A	M060A	M068A	
Discontinued Diagnosis Codes									
G712									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, subsection 9.2.27.2, “Electromyography and Nerve Conduction Studies,” for more information.

### Inpatient Behavioral Health

The following diagnosis codes may be reimbursed for psychotherapy and psychiatric diagnostic evaluation procedure codes 90791, 90792, 90832, 90833, 90834, 90836, 90837, 98038, 90847, and 90853:

Added Diagnosis Codes									
F10130	F10131	F10132	F10139	F10930	F10931	F10932	F10939	F1113	F1213
F13130	F13131	F13132	F13139	F1413	F1493	F1513	F19130	F19131	F19132
F19139									

The following diagnosis codes may be reimbursed for psychological and neuropsychological testing procedure codes 96130, 96131, 96132, 96133, 96136, and 96137:

Added Diagnosis Codes						
F10130	F10131	F10132	F10139	F10930	F10931	F10932
F10939	F1113	F1213	F13130	F13131	F13132	F13139
F1413	F1493	F1513	F19130	F19131	F19132	F19139
T40411A	T40411D	T40411S	T40412A	T40412D	T40412S	T40413A
T40413D	T40413S	T40414A	T40414D	T40414S	T40415A	T40415D
T40415S	T40416A	T40416D	T40416S	T40421A	T40421D	T40421S
T40422A	T40422D	T40422S	T40423A	T40423D	T40423S	T40424A
T40424D	T40424S	T40425A	T40425D	T40425S	T40426A	T40426D
T40426S	T40491A	T40491D	T40491S	T40492A	T40492D	T40492S
T40493A	T40493D	T40493S	T40494A	T40494D	T40494S	T40495A
T40495D	T40495S	T40496A	T40496D	T40496S		

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Behavioral Health and Case Management Services Handbook*, subsection 4.2 “Services, Benefits, Limitations,” for more information.

### Outpatient Mental Health Services

The following diagnosis codes may be reimbursed for psychotherapy and psychiatric diagnostic evaluation procedure codes 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90846, 90847, and 90853:

Added Diagnosis Codes						
F10130	F10131	F10132	F10139	F10930	F10931	F10932
F10939	F1113	F1213	F13130	F13131	F13132	F13139
F1413	F1493	F1513	F19130	F19131	F19132	F19139

The following diagnosis codes may be reimbursed for psychological, neurobehavioral and neuropsychological testing procedure codes 96116, 96121, 96130, 96131, 19132, 96133, 96136, and 96137:

Added Diagnosis Codes						
F10130	F10131	F10132	F10139	F10930	F10931	F10932
F10939	F1113	F1213	F13130	F13131	F13132	F13139
F1413	F1493	F1513	F19130	F19131	F19132	F19139
T40411A	T40411D	T40411S	T40412A	T40412D	T40412S	T40413A
T40413D	T40413S	T40414A	T40414D	T40414S	T40415A	T40415D
T40415S	T40416A	T40416D	T40416S	T40421A	T40421D	T40421S
T40422A	T40422D	T40422S	T40423A	T40423D	T40423S	T40424A
T40424D	T40424S	T40425A	T40425D	T40425S	T40426A	T40426D
T40426S	T40491A	T40491D	T40491S	T40492A	T40492D	T40492S
T40493A	T40493D	T40493S	T40494A	T40494D	T40494S	T40495A
T40495D	T40495S	T40496A	T40496D	T40496S		

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Behavioral Health and Case Management Handbook*, subsection 4.2 “Services, Benefits, Limitations,” for more information.

### Pediatric Pneumogram

The following diagnosis codes may be reimbursed when submitted with procedure code 94772 for a pediatric pneumogram in clients who are birth through 11 months of age:

Added Diagnosis Codes									
K2080	K2081	K2090	K2091	K2100	K2101				
Discontinued Diagnosis Codes									
K208	K209	K210							

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, subsection 9.2.25.10, “Pediatric Pneumogram,” for more information.

### Pulmonary Function Studies

The following diagnosis codes may be reimbursed for High Altitude Simulation Test (HAST) procedure codes 94452 and 94453. Evidence of hypoxemia must be documented in the client’s medical record when billing HAST procedure codes 94452 and 94453 with one of the following diagnosis codes:

Added Diagnosis Codes									
J8281	J8282	J8283	J8289	J84170	J84178				
Discontinued Diagnosis Code									
J82									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Inpatient and Outpatient Hospital Services Handbook*, subsection 4.2.20.3, “Pulmonary Function Studies,” for more information.

### Renal Dialysis Services

Renal dialysis services for acute renal failure and end-stage renal disease (ESRD) may be reimbursed when they are submitted with the following diagnosis codes:

Added Diagnosis Codes									
N1830	N1831	N1832							
Discontinued Diagnosis Code									
N183									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Clinics and Other Outpatient Facility Services Handbook*, subsection 6.2, “Services, Benefits, Limitations, and Prior Authorization,” for more information.

### Sleep Studies

The following diagnosis codes may be reimbursed for procedure codes 95782, 95783, 95808, 95810, and 95811:

Added Diagnosis Codes									
G7120	G7121	G71220	G71228	G7129					
Discontinued Diagnosis Code									
G712									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, subsection 9.2.67.3, “Polysomnography,” for more information.

### Substance Use Disorder Services

The following diagnosis codes may be reimbursed when submitted with ambulatory (outpatient) treatment services procedure codes H0004 and H0005:

Added Diagnosis Codes						
F10130	F10131	F10132	F10139	F10930	F10931	F10932

Added Diagnosis Codes						
F10939	F1113	F1213	F13130	F13131	F13132	F13139
F1413	F1493	F1513	F19130	F19131	F19132	F19139

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Behavioral Health and Case Management Services Handbook*, subsection 9.6, “Outpatient Treatment Services,” for more information.

### Therapeutic Apheresis

The following diagnosis codes may be reimbursed when submitted with procedure codes 36511, 36512, 36513, 36514, and 36516:

Added Diagnosis Codes									
D5703	D5709	D57213	D57218	D57413	D57418	D5742	D57431	D57432	D57433
D57438	D57439	D5744	D57451	D57452	D57453	D57458	D57459	D57813	D57818
D5910	D5911	D5912	D5913	D5919	M080A	M084A	M089A	N00A	N01A
N03A	N04A	N05A							
Discontinued Diagnosis Code									
D591									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, subsection 9.2.71, “Therapeutic Apheresis,” for more information.

### Vision Services – Nonsurgical

The following diagnosis code may be reimbursed when submitted with orthoptic or pleoptic training procedure code 92605:

Added Diagnosis Code									
H5582									

The following diagnosis codes may be reimbursed when submitted with polycarbonate lens procedure code V2784:

Added Diagnosis Codes									
G7120	G7121	G71220	G71228	G7129					
Discontinued Diagnosis Code									
G712									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Vision and Hearing Services Handbook*, subsection 4.3.5.8 “Orthoptic and Pleoptic Training,” and 4.3.6.1 “Eyeglass Lenses and Frames,” for more information. ■



## HOME HEALTH AND COMPREHENSIVE CARE PROGRAM (CCP) PROVIDERS

### CCP Services Benefit Changes

The following Texas Medicaid CCP benefit changes have been made to support the 2021 ICD updates and are effective for dates of service on or after October 1, 2020. For more information, call the TMHP Contact Center at 800-925-9126.

#### Blood Pressure Devices – CCP

The following diagnosis codes may be reimbursed when submitted with manual and automated blood pressure devices procedure codes A4660 and A4670:

Added Diagnosis Codes									
N00A	N01A	N02A	N03A	N04A	N05A	N1830	N1831	N1832	
Discontinued Diagnosis Codes									
N183									

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Durable Medical Equipment, Medical Supplies, and Nutritional Products Handbook*, subsection 2.2.7.1, “Prior Authorization,” for more information.

#### Nutritional Products - CCP

Nutritional products may be reimbursed without prior authorization when they are submitted with the following diagnosis codes:

Added Diagnosis Codes									
D8481	D84821	D84822	D8489	E7081	E7089	E74810	E74818	E74819	E7489
Discontinued Diagnosis Codes									
D848	E708	E748							

**Refer to:** The current *Texas Medicaid Provider Procedures Manual, Durable Medical Equipment, Medical Supplies, and Nutritional Products Handbook*, subsection 2.2.18.2.2, “Clients who are 20 years of age and younger,” for more information. ■

## **TEXAS HEALTH STEPS PROVIDERS**

### **Texas Health Steps Benefit Changes**

No benefit changes have been made to the Texas Health Steps Services program in response to the 2021 ICD updates. ■

## **HHSC FAMILY PLANNING PROVIDERS**

### **HHSC Family Planning Services Benefit Changes**

No benefit changes have been made to the HHSC Family Planning Program in response to the 2021 ICD updates. ■

## **HEALTHY TEXAS WOMEN (HTW) PROVIDERS**

### **HTW Providers Benefit Changes**

No benefit changes have been made to the Healthy Texas Women (HTW) program in response to the 2021 ICD updates. ■

## CHILDREN WITH SPECIAL HEALTH CARE NEEDS (CSHCN) SERVICES PROGRAM PROVIDERS

### CSHCN Services Program Updates

The 2021 ICD updates for the CSHCN Services Program are included in the ICD tables in the “All Code Changes” section of this bulletin beginning on page 14. The 2020 ICD deletions are effective October 1, 2020, for dates of service on or after October 1, 2020, for the CSHCN Services Program. Providers may refer to the “General Information” section for more information.

### CSHCN Services Program Benefit Changes

The following CSHCN Services Program benefit changes have been made to support the 2021 ICD updates and are effective for dates of service on or after October 1, 2020. For more information, call the TMHP-CSHCN Services Program Contact Center at 800-925-9126.

The policy articles below contain the following information:

- **Revised:** The description has been revised for these diagnosis codes. Providers may refer to the appropriate copyright holder for the revised descriptions.
- **Discontinued:** Discontinued diagnosis codes are no longer reimbursed after September 30, 2020.
- **Added:** Added diagnosis codes are new procedure codes added by the Centers for Medicare & Medicaid Services (CMS).

### Blood Pressure Monitoring and Devices

The following diagnosis codes may be reimbursed when submitted with manual and automated blood pressure devices procedure codes A4660 and A4670:

Added Diagnosis Codes									
N00A	N01A	N02A	N03A	N04A	N05A	N1830	N1831	N1832	
Discontinued Diagnosis Codes									
N183									

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 11.2.1.2 “Manual and Automated Blood Pressure Devices,” for more information.

### Cytogenetics Testing

The following diagnosis code will no longer be reimbursed when submitted with procedure codes 88230, 88233, 88237, 88239, 88245, 88248, 88249, 88261, 88262, 88263, 88264, 88271, 88272, 88273, 88274, 88275, 88280, 88283, 88285, 88289, and 88291:

Discontinued Diagnosis Code									
Q5120									

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 25.2.5.2 “Cytogenetics Testing,” for more information.

### Echoencephalography

The following diagnosis codes may be reimbursed when submitted with procedure code 76506:

Added Diagnosis Codes									
P91821	P91822	P91823	P91829						

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 31.2.17 “Echoencephalography,” for more information.

### Evoked Response Tests and Neuromuscular Procedures

The following diagnosis codes may be reimbursed when submitted with electromyography (EMG) and nerve conduction study (NCS) procedure codes:

Added Diagnosis Codes									
G7120	G7121	G71220	G71228	G7129	M057A	M058A	M060A	M068A	
Discontinued Diagnosis Codes									
G712									

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 31.2.19.2 “Electromyography and Nerve Conduction Studies,” for more information.

### Expendable Medical Supplies

The following diagnosis codes may be reimbursed when submitted with the appropriate diapers, briefs, pull-ups, or liners procedure code:

Added Diagnosis Codes									
G7120	G7121	G71220	G71228	G7129					
Discontinued Diagnosis Codes									
G712									

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 18.2.4 “Diapers, Briefs, Pull-ups, and Liners,” for more information.

### Medical Foods

The following diagnosis codes may be reimbursed when submitted with procedure codes S9434 and S9435:

Added Diagnosis Codes									
E7081	E7089								
Discontinued Diagnosis Codes									
E708									

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 18.2.4 “Diapers, Briefs, Pull-ups, and Liners,” for more information.

### Sleep Studies

The following diagnosis codes may be reimbursed for procedure codes 95782, 95783, 95808, 95810, and 95811:

Added Diagnosis Codes									
K2080	K2081	K2090	K2091	K2100	K2101				
Discontinued Diagnosis Codes									
K208	K209	K210							

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 31.2.37.1 “Polysomnography,” for more information.

### Therapeutic Apheresis

The following diagnosis codes may be reimbursed when submitted with procedure codes 36511, 36512, 36513, 36514, and 36516:

Added Diagnosis Codes									
D5703	D5709	D57213	D57218	D57813	D57818	D5910	D5911	D5912	D5913
D5919	M080A	M084A	M089A	N00A	N01A	N03A	N04A	N05A	
Discontinued									
D591									

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 31.2.40 “Therapeutic Apheresis,” for more information.

### Vision Services – Nonsurgical

The following diagnosis codes may be reimbursed when submitted with corneal topography procedure code 92025:

Added Diagnosis Codes						
H18501	H18502	H18503	H18509	H18511	H18512	H18513
H18519	H18521	H18522	H18523	H18529	H18531	H18532
H18533	H18539	H18541	H18542	H18543	H18549	H18551
H18552	H18553	H18559	H18591	H18592	H18593	H18599
Discontinued Diagnosis Codes						
H1850	H1851	H1852	H1853	H1854	H1855	H1859

**Refer to:** The current *CSHCN Services Program Provider Manual*, section 25.2.5.2 “Cytogenetics Testing,” for more information. ■

**ALL CODE CHANGES: ADDED, REVISED, AND DISCONTINUED****2021 ICD Diagnosis Code Additions**

The following is a list of new ICD diagnosis codes:

<b>Added Diagnosis Codes</b>						
A8481	A8489	B6000	B6001	B6002	B6003	B6009
D5703	D5709	D57213	D57218	D57413	D57418	D5742
D57431	D57432	D57433	D57438	D57439	D5744	D57451
D57452	D57453	D57458	D57459	D57813	D57818	D5910
D5911	D5912	D5913	D5919	D7210	D72110	D72111
D72118	D72119	D7212	D7218	D7219	D8481	D84821
D84822	D8489	D89831	D89832	D89833	D89834	D89835
D89839	E7081	E7089	E74810	E74818	E74819	E7489
F10130	F10131	F10132	F10139	F10930	F10931	F10932
F10939	F1113	F1213	F13130	F13131	F13132	F13139
F1413	F1493	F1513	F19130	F19131	F19132	F19139
G1110	G1111	G1119	G4042	G40833	G40834	G7120
G7121	G71220	G71228	G7129	G9600	G9601	G9602
G9608	G9609	G96191	G96198	G96810	G96811	G96819
G9689	G9783	G9784	H18501	H18502	H18503	H18509
H18511	H18512	H18513	H18519	H18521	H18522	H18523
H18529	H18531	H18532	H18533	H18539	H18541	H18542
H18543	H18549	H18551	H18552	H18553	H18559	H18591
H18592	H18593	H18599	H5582	J8281	J8282	J8283
J8289	J84170	J84178	K2080	K2081	K2090	K2091
K2100	K2101	K5981	K5989	K7400	K7401	K7402
M057A	M058A	M060A	M068A	M080A	M082A	M084A
M089A	M1909	M1919	M1929	M2419	M2429	M2439
M2449	M2459	M2469	M2489	M2539	M2559	M2569
M26641	M26642	M26643	M26649	M26651	M26652	M26653
M26659	M800AXA	M800AXD	M800AXG	M800AXK	M800AXP	M800AXS
M808AXA	M808AXD	M808AXG	M808AXK	M808AXP	M808AXS	M92501
M92502	M92503	M92509	M92511	M92512	M92513	M92519
M92521	M92522	M92523	M92529	M92591	M92592	M92593
M92599	N00A	N01A	N02A	N03A	N04A	N05A
N06A	N07A	N1830	N1831	N1832	N6120	N6121

Added Diagnosis Codes						
N6122	N6123	O34218	O3422	O99891	O99892	O99893
P91821	P91822	P91823	P91829	R510	R519	R7401
R7402	S20213A	S20213D	S20213S	S20214A	S20214D	S20214S
S20223A	S20223D	S20223S	S20224A	S20224D	S20224S	S20303A
S20303D	S20303S	S20304A	S20304D	S20304S	S20313A	S20313D
S20313S	S20314A	S20314D	S20314S	S20323A	S20323D	S20323S
S20324A	S20324D	S20324S	S20343A	S20343D	S20343S	S20344A
S20344D	S20344S	S20353A	S20353D	S20353S	S20354A	S20354D
S20354S	S20363A	S20363D	S20363S	S20364A	S20364D	S20364S
S20373A	S20373D	S20373S	S20374A	S20374D	S20374S	T40411A
T40411D	T40411S	T40412A	T40412D	T40412S	T40413A	T40413D
T40413S	T40414A	T40414D	T40414S	T40415A	T40415D	T40415S
T40416A	T40416D	T40416S	T40421A	T40421D	T40421S	T40422A
T40422D	T40422S	T40423A	T40423D	T40423S	T40424A	T40424D
T40424S	T40425A	T40425D	T40425S	T40426A	T40426D	T40426S
T40491A	T40491D	T40491S	T40492A	T40492D	T40492S	T40493A
T40493D	T40493S	T40494A	T40494D	T40494S	T40495A	T40495D
T40495S	T40496A	T40496D	T40496S	T868401	T868402	T868403
T868409	T868411	T868412	T868413	T868419	T868421	T868422
T868423	T868429	T868481	T868482	T868483	T868489	T868491
T868492	T868493	T868499	U070	U071	V00031S	V00038A
V00038D	V00038S	V00841A	V00841D	V00841S	V00842A	V00842D
V00842S	V00848A	V00848D	V00848S	V01031A	V01031D	V01031S
V01038A	V01038D	V01038S	V01131A	V01131D	V01131S	V01138A
V01138D	V01138S	V01931A	V01931D	V01931S	V01938A	V01938D
V01938S	V02031A	V02031D	V02031S	V02038A	V02038D	V02038S
V02131A	V02131D	V02131S	V02138A	V02138D	V02138S	V02931A
V02931D	V02931S	V02938A	V02938D	V02938S	V03031A	V03031D
V03031S	V03038A	V03038D	V03038S	V03131A	V03131D	V03131S
V03138A	V03138D	V03138S	V03931A	V03931D	V03931S	V03938A
V03938D	V03938S	V04031A	V04031D	V04031S	V04038A	V04038D
V04038S	V04131A	V04131D	V04131S	V04138A	V04138D	V04138S
V04931A	V04931D	V04931S	V04938A	V04938D	V04938S	V05031A
V05031D	V05031S	V05038A	V05038D	V05038S	V05131A	V05131D
V05131S	V05138A	V05138D	V05138S	V05931A	V05931D	V05931S

Added Diagnosis Codes						
V05938A	V05938D	V05938S	V06031A	V06031D	V06031S	V06038A
V06038D	V06038S	V06131A	V06131D	V06131S	V06138A	V06138D
V06138S	V06931A	V06931D	V06931S	V06938A	V06938D	V06938S
Y7711	Y7719	Z03821	Z03822	Z03823		

For more information, call the TMHP Contact Center at 800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 800-568-2413. ■

## Discontinued Diagnosis Codes

The 2021 ICD discontinued diagnosis codes are no longer valid for claims submitted with dates of service on or after October 1, 2020. The following is a list of diagnosis codes that have been discontinued:

Discontinued Diagnosis Codes						
A848	B600	D591	D721	D848	E708	E748
G111	G712	G960	G9619	G968	H1850	H1851
H1852	H1853	H1854	H1855	H1859	J82	J8417
K208	K209	K210	K598	K740	M9250	M9251
M9252	N183	O9989	Q5120	R51	R740	T404X1A
T404X1D	T404X1S	T404X2A	T404X2D	T404X2S	T404X3A	T404X3D
T404X3S	T404X4A	T404X4D	T404X4S	T404X5A	T404X5D	T404X5S
T404X6A	T404X6D	T404X6S	T86840	T86841	T86842	T86848
T86849	Y771					

For more information, call the TMHP Contact Center at 800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 800-568-2413. ■

## Diagnosis Code Description Changes

Effective for dates of service on or after October 1, 2020, the following diagnosis code descriptions have changed:

Diagnosis Code Description Changes						
D57411	D57412	D57419	H5581	Q5121	Q5122	Q5128
Y92002	Z681	Z6820	Z6821	Z6822	Z6823	Z6824
Z6825	Z6826	Z6827	Z6828	Z6829	Z6830	Z6831
Z6832	Z6833	Z6834	Z6835	Z6836	Z6837	Z6838
Z6839	Z6841	Z6842	Z6843	Z6844	Z6845	Z6851
Z6852	Z6853	Z6854	Z881	Z882	Z883	Z884
Z885	Z886	Z887	Z888	Z889		

For more information, call the TMHP Contact Center at 800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 800-568-2413. ■



## INPATIENT HOSPITAL ICD-10-PCS SURGICAL PROCEDURE CODE UPDATES

### Inpatient Hospital ICD-10-PCS Surgical Procedure Code Updates

The ICD-10-PCS procedure codes are inpatient hospital surgical procedure codes and must be submitted, as applicable, only on inpatient hospital claims.

**Note:** *For professional and outpatient procedures and services, providers must continue to use the American Medical Association (AMA) Current Procedural Terminology (CPT) manual and the CMS Health Care Common Procedure Coding System (HCPCS) manual.*

This section lists the ICD-10-PCS inpatient hospital surgical procedure code changes for inpatient hospital providers. Providers should refer to the appropriate copyright holder’s code listing for the new, discontinued, and revised descriptions for the procedure codes indicated below. All discontinued codes will not be reimbursed for dates of service on or after October 1, 2020.

The following table lists all of the new, discontinued, and revised surgical procedure codes:

**Note:** *These procedure codes are surgical codes used to assign the proper DRG for an inpatient hospital stay and are processed as informational only.*

Added Procedure Codes						
00H001Z	00H031Z	00H041Z	00H601Z	00H631Z	00H641Z	00HE01Z
00HE31Z	00HE41Z	00HU01Z	00HU31Z	00HU41Z	00HV01Z	00HV31Z
00HV41Z	01HY01Z	01HY31Z	01HY41Z	02173J6	02FP3Z0	02FP3ZZ
02FQ3Z0	02FQ3ZZ	02FR3Z0	02FR3ZZ	02FS3Z0	02FS3ZZ	02FT3Z0
02FT3ZZ	02UG3JH	03F	03F23Z0	03F23ZZ	03F33Z0	03F33ZZ
03F43Z0	03F43ZZ	03F53Z0	03F53ZZ	03F63Z0	03F63ZZ	03F73Z0
03F73ZZ	03F83Z0	03F83ZZ	03F93Z0	03F93ZZ	03FA3Z0	03FA3ZZ
03FB3Z0	03FB3ZZ	03FC3Z0	03FC3ZZ	03FY3Z0	03FY3ZZ	04F
04FC3Z0	04FC3ZZ	04FD3Z0	04FD3ZZ	04FE3Z0	04FE3ZZ	04FF3Z0
04FF3ZZ	04FH3Z0	04FH3ZZ	04FJ3Z0	04FJ3ZZ	04FK3Z0	04FK3ZZ
04FL3Z0	04FL3ZZ	04FM3Z0	04FM3ZZ	04FN3Z0	04FN3ZZ	04FP3Z0
04FP3ZZ	04FQ3Z0	04FQ3ZZ	04FR3Z0	04FR3ZZ	04FS3Z0	04FS3ZZ
04FT3Z0	04FT3ZZ	04FU3Z0	04FU3ZZ	04FY3Z0	04FY3ZZ	05F
05F33Z0	05F33ZZ	05F43Z0	05F43ZZ	05F53Z0	05F53ZZ	05F63Z0
05F63ZZ	05F73Z0	05F73ZZ	05F83Z0	05F83ZZ	05F93Z0	05F93ZZ
05FA3Z0	05FA3ZZ	05FB3Z0	05FB3ZZ	05FC3Z0	05FC3ZZ	05FD3Z0
05FD3ZZ	05FF3Z0	05FF3ZZ	05FY3Z0	05FY3ZZ	06F	06FC3Z0

Added Procedure Codes						
06FC3ZZ	06FD3Z0	06FD3ZZ	06FF3Z0	06FF3ZZ	06FG3Z0	06FG3ZZ
06FH3Z0	06FH3ZZ	06FJ3Z0	06FJ3ZZ	06FM3Z0	06FM3ZZ	06FN3Z0
06FN3ZZ	06FP3Z0	06FP3ZZ	06FQ3Z0	06FQ3ZZ	06FY3Z0	06FY3ZZ
07HK01Z	07HK31Z	07HK41Z	07HL01Z	07HL31Z	07HL41Z	07HM01Z
07HM31Z	07HM41Z	07HN01Z	07HN31Z	07HN41Z	07HP01Z	07HP31Z
07HP41Z	07HT01Z	07HT03Z	07HT0YZ	07HT31Z	07HT33Z	07HT3YZ
07HT41Z	07HT43Z	07HT4YZ	09HD01Z	09HD31Z	09HD41Z	09HE01Z
09HE31Z	09HE41Z	09HH01Z	09HH31Z	09HH41Z	09HH71Z	09HH81Z
09HJ01Z	09HJ31Z	09HJ41Z	09HJ71Z	09HJ81Z	09HK01Z	09HK31Z
09HK41Z	09HK71Z	09HK81Z	09HN71Z	09HN81Z	09HY01Z	09HY31Z
09HY41Z	09HY71Z	09HY81Z	0CHA01Z	0CHA31Z	0CHA71Z	0CHA81Z
0CHS01Z	0CHS31Z	0CHS71Z	0CHS81Z	0CHY01Z	0CHY31Z	0CHY71Z
0CHY81Z	0DH601Z	0DH631Z	0DH641Z	0DH671Z	0DH681Z	0DH801Z
0DH831Z	0DH841Z	0DH871Z	0DH881Z	0DH901Z	0DH931Z	0DH941Z
0DH971Z	0DH981Z	0DHA01Z	0DHA31Z	0DHA41Z	0DHA71Z	0DHA81Z
0DHB01Z	0DHB31Z	0DHB41Z	0DHB71Z	0DHB81Z	0DHE01Z	0DHE31Z
0DHE41Z	0DHE71Z	0DHE81Z	0F1D0D4	0F1D0Z4	0F1D4D4	0F1D4Z4
0FH001Z	0FH031Z	0FH041Z	0FH401Z	0FH431Z	0FH441Z	0FHG01Z
0FHG31Z	0FHG41Z	0GHS01Z	0GHS31Z	0GHS41Z	0JH60YZ	0JH63YZ
0JH70YZ	0JH73YZ	0JH80YZ	0JH83YZ	0QP005Z	0QP035Z	0QP045Z
0QP0X5Z	0QP105Z	0QP135Z	0QP145Z	0QP1X5Z	0QP405Z	0QP435Z
0QP445Z	0QP4X5Z	0QP505Z	0QP535Z	0QP545Z	0QP5X5Z	0QPS05Z
0QPS35Z	0QPS45Z	0QPSX5Z	0RGL03Z	0RGL33Z	0RGL43Z	0RGM03Z
0RGM33Z	0RGM43Z	0RGN03Z	0RGN33Z	0RGN43Z	0RGP03Z	0RGP33Z
0RGP43Z	0RGQ03Z	0RGQ33Z	0RGQ43Z	0RGR03Z	0RGR33Z	0RGR43Z
0RGS03Z	0RGS33Z	0RGS43Z	0RGT03Z	0RGT33Z	0RGT43Z	0RGU03Z
0RGU33Z	0RGU43Z	0RGV03Z	0RGV33Z	0RGV43Z	0RGW03Z	0RGW33Z
0RGW43Z	0RGX03Z	0RGX33Z	0RGX43Z	0SG903Z	0SG933Z	0SG943Z
0SGB03Z	0SGB33Z	0SGB43Z	0SGC03Z	0SGC33Z	0SGC43Z	0SGD03Z
0SGD33Z	0SGD43Z	0SGF03Z	0SGF33Z	0SGF43Z	0SGG03Z	0SGG33Z
0SGG43Z	0SGH03Z	0SGH33Z	0SGH43Z	0SGJ03Z	0SGJ33Z	0SGJ43Z
0SGK03Z	0SGK33Z	0SGK43Z	0SGL03Z	0SGL33Z	0SGL43Z	0SGM03Z
0SGM33Z	0SGM43Z	0SGN03Z	0SGN33Z	0SGN43Z	0SGP03Z	0SGP33Z
0SGP43Z	0SGQ03Z	0SGQ33Z	0SGQ43Z	0TH501Z	0TH531Z	0TH541Z

Added Procedure Codes						
0TH571Z	0TH581Z	0TH901Z	0TH931Z	0TH941Z	0TH971Z	0TH981Z
0THB01Z	0THB31Z	0THB41Z	0THB71Z	0THB81Z	0THD01Z	0THD31Z
0THD41Z	0THD71Z	0THD81Z	0UH301Z	0UH331Z	0UH341Z	0UH371Z
0UH381Z	0UH901Z	0UH971Z	0UH981Z	0VHD01Z	0VHD31Z	0VHD41Z
0VHD71Z	0VHD81Z	0VY	0VY50Z0	0VY50Z1	0VY50Z2	0VYS0Z0
0VYS0Z1	0VYS0Z2	0W1G0J6	0W1G3J6	0W1G4J6	0W9J70Z	0W9J7ZX
0W9J7ZZ	0W9J80Z	0W9J8ZX	0W9J8ZZ	10D20ZZ	10D24ZZ	30230C0
30233C0	30240C0	30243C0	4A03X5D	4A044B2	4A0F3BE	5A0935A
5A0945A	5A0955A	8E02XDZ	BF5	BF50200	BF5020Z	BF502Z0
BF502ZZ	BF52200	BF5220Z	BF522Z0	BF522ZZ	BF53200	BF5320Z
BF532Z0	BF532ZZ	BF55200	BF5520Z	BF552Z0	BF552ZZ	BF56200
BF5620Z	BF562Z0	BF562ZZ	BF57200	BF5720Z	BF572Z0	BF572ZZ
BF5C200	BF5C20Z	BF5C2Z0	BF5C2ZZ	BW5	BW52Z1Z	BW59Z1Z
BW5CZ1Z	BW5JZ1Z	D010B6Z	D011B6Z	D016B6Z	D017B6Z	D0Y0CZZ
D0Y1CZZ	D0Y6CZZ	D0Y7CZZ	D710B6Z	D711B6Z	D712B6Z	D713B6Z
D714B6Z	D715B6Z	D716B6Z	D717B6Z	D718B6Z	D810B6Z	D910B6Z
D911B6Z	D913B6Z	D914B6Z	D915B6Z	D916B6Z	D917B6Z	D918B6Z
D919B6Z	D91BB6Z	D91DB6Z	D91FB6Z	DB10B6Z	DB11B6Z	DB12B6Z
DB15B6Z	DB16B6Z	DB17B6Z	DB18B6Z	DD10B6Z	DD11B6Z	DD12B6Z
DD13B6Z	DD14B6Z	DD15B6Z	DD17B6Z	DF10B6Z	DF11B6Z	DF12B6Z
DF13B6Z	DG10B6Z	DG11B6Z	DG12B6Z	DG14B6Z	DG15B6Z	DM10B6Z
DM11B6Z	DT10B6Z	DT11B6Z	DT12B6Z	DT13B6Z	DU10B6Z	DU11B6Z
DU12B6Z	DV10B6Z	DV11B6Z	DW11B6Z	DW12B6Z	DW13B6Z	DW16B6Z
X2AH336	X2AJ336	XNU	XNU0356	XNU4356	XW03306	XW03326
XW03336	XW03366	XW03396	XW033A6	XW033B6	XW033C6	XW033D6
XW04306	XW04326	XW04336	XW04366	XW04396	XW043A6	XW043B6
XW043C6	XW043D6	XW097M5	XW0DX66	XW0G886	XW0H886	XW0Q316
XW2	XW23346	XW23376	XW24346	XW24376	XXE5XN6	XXEBXQ6

