

Eli's Rehab Report

News You Can Use: New ICD-9 Edition Better Specifies Stroke and CVA

Code 436 no longer applies to every stroke chart

As of Oct. 1, you should assign 434.91 (Cerebral artery occlusion, unspecified, with cerebral infarction) for stroke and cerebrovascular accident (CVA) diagnoses. The new edition of ICD-9, effective Oct. 1, 2004, raises the level of specificity over ICD-9's current stroke diagnosis recommendation of 436 (Acute, but ill-defined, cerebrovascular disease).

Causes of stroke or CVA can be grouped as hemorrhagic and nonhemorrhagic, but because the medical record does not always clearly define which type the patient has, coding can be problematic. The majority of strokes are nonhemorrhagic, so physiatrists routinely use the terms "stroke" and "CVA" synonymously with "cerebral infarction," a term that **ICD-9 includes** in the definition of 436. Now, if you want to specifically assign stroke or CVA, you should turn to the reindexed default code, 434.91.

Heads-up: Carriers have already taken note of this change. "I was looking over the Empire Medicare hospital coverage policy for magnetic resonance angiography (MRA) of the head and neck (70544-70549), and these exams are not covered for 436 but are covered for 434.91," says **Jackie Miller, RHIA, CPC**, senior consultant at Coding Strategies Inc., a reimbursement consulting firm in Dallas, Ga. Therefore, to combat denials, you should heed ICD-9's new stroke coding reference and report 434.91 instead.

To review a full listing of the new ICD-9 codes, visit the CMS Web site at www.cms.hhs.gov/medlearn/icd9code.asp#coding.