



April 4, 2013

VIA ELECTRONIC MAIL

Donna Pickett, MPH, RHIA  
Medical Classification Administrator  
National Center for Health Statistics  
3311 Toledo Road  
Room 2402  
Hyattsville, Maryland 20782

Dear Ms. Pickett:

The American Health Information Management Association (AHIMA) respectfully submits the following comments on the proposed diagnosis code modifications presented at the ICD-9-CM Coordination and Maintenance (C&M) Committee meeting held on March 5.

### **ICD-10-CM Topics**

#### **Salter Harris Fractures and Other Physeal Fractures**

AHIMA supports the creation of new ICD-10-CM codes for Salter Harris and other physeal fractures and agrees with the proposed implementation date of October 1, 2015.

We agree with the suggestion made by a commenter at the C&M meeting that descriptions of the fracture types be added as inclusion terms, since the description of the fracture may often be documented rather than the type.

#### **Reactions to Gluten and Gluten Sensitivity**

We support the proposed new ICD-10-CM codes and other modifications pertaining to gluten reactions and gluten sensitivity. We agree with the proposal to implement new or revised instructional notes and index entries during the code freeze and to implement the proposed new codes after the code freeze.

#### **Injuries Involving the Spinal Cord in the Lumbar and Sacral Regions**

AHIMA supports the proposed changes to the ICD-10-CM codes for injury of the lower spinal cord to clarify that injuries to the spinal cord refer to the cord level and not bone level. We agree that these modifications should go into effect during the code freeze in order to provide clarification on the use of these codes.

The proposed note under category S34 should be added under category S24 as well.

We do not believe the word “neurological” should be added to the code titles or inclusion terms to describe the word “level.” The proposed note under category S34 provides adequate clarification regarding the meaning of “level” in the code titles, and adding the word “neurological” could create more confusion rather than adding clarification, especially since medical record documentation may not refer to the “neurological” level.

### **ICD-10-CM Addenda**

The proposed revision to the code range in the Excludes1 note under code G99.0, Autonomic neuropathy in diseases classified elsewhere, should state E09-E13, not E09-E14, as there is no E14 category.

The proposed instructional note to “code first underlying disease, such as leprosy,” under category H22, Disorders of iris and ciliary body in diseases classified elsewhere, should include the entire A30 category, not just A30.9.

The code ranges for the proposed Excludes2 note under category K72, Hepatic failure, not elsewhere classified, for “hepatic failure complicating abortion or ectopic or molar pregnancy,” are confusing and misleading because they include codes for many conditions unrelated to hepatic failure.

AHIMA supports the other proposed ICD-10-CM Index and Tabular Addenda modifications.

Thank you for the opportunity to comment on the proposed diagnosis code revisions. If you have any questions, please feel free to contact me at (312) 233-1115 or [sue.bowman@ahima.org](mailto:sue.bowman@ahima.org).

Sincerely,

A handwritten signature in cursive script that reads "Sue Bowman".

Sue Bowman, MJ, RHIA, CCS, FAHIMA  
Senior Director, Coding Policy and Compliance