

## Inpatient ICD-9-CM Mapping to ICD-10 PCS – Procedures Involving the Application of Integra® Omnigraft® Dermal Regeneration Matrix

Effective October 1, 2015, the Centers for Medicare & Medicaid Services (CMS) is implementing International Classification of Diseases, 10<sup>th</sup> Revision (ICD-10) Procedure Coding System (PCS) in place of the 9<sup>th</sup> Revision (ICD-9) procedure codes. CMS has provided a General Equivalence Mappings (GEMS) that crosswalk ICD-9 procedure codes to ICD-10 PCS (available at <https://www.cms.gov/Medicare/Coding/ICD10/2016-ICD-10-PCS-and-GEMs.html>). Below, Integra LifeSciences Corporation provides the mappings for select ICD-9 procedure codes. While Integra LifeSciences Corporation has used reasonable efforts to provide accurate coding information, this information should not be construed as providing clinical advice, dictating reimbursement policy, or substituting for the judgment of a practitioner. **It is always the Provider's responsibility to determine and submit appropriate codes, charges, and modifiers for services that are rendered.** Integra LifeSciences Corporation assumes no responsibilities or liabilities for the timeliness, accuracy, and completeness of the information contained herein. Since reimbursement laws, regulations, and payor policies change frequently, it is recommended that providers consult with their payors, coding specialists, and/or legal counsel regarding coverage, coding and payment issues.

ICD-9 Procedure Code 86.67 – Dermal regenerative graft		
ICD-10 PCS Code	ICD-10 PCS Code Description – Root Operation – Replacement (0HR)	Potential MS-DRG Assignment
0HRMXK3	Replacement of Right Foot Skin with Nonautologous Tissue Substitute, Full Thickness, External Approach	040-042, 133-134, 264, 463- 465, 573- 578, 904- 905, 927- 929, 957- 959
0HRMXK4	Replacement of Right Foot Skin with Nonautologous Tissue Substitute, Partial Thickness, External Approach	
0HRNXK3	Replacement of Left Foot Skin with Nonautologous Tissue Substitute, Full Thickness, External Approach	
0HRNXK4	Replacement of Left Foot Skin with Nonautologous Tissue Substitute, Partial Thickness, External Approach	



MS-DRG	MS-DRG Description	MDC	MDC Description	Medicare National Average Payment Rate*
040	Peripheral/Cranial Nerve and Other Nervous System Procedures with MCC	1	Diseases and Disorders of the Nervous System – Surgical	\$22,134.50
041	Peripheral/Cranial Nerve and Other Nervous System Procedures with CC or Peripheral Neurostimulator	1	Diseases and Disorders of the Nervous System – Surgical	\$12,653.23
042	Peripheral/Cranial Nerve and Other Nervous System Procedures without CC/MCC	1	Diseases and Disorders of the Nervous System – Surgical	\$11,320.99
133	Other Ear, Nose, Mouth and Throat O.R. Procedures with CC/MCC	3	Diseases and Disorders of the Ear, Nose, Mouth and Throat – Surgical	\$11,418.20
134	Other Ear, Nose, Mouth and Throat O.R. Procedures without CC/MCC	3	Diseases and Disorders of the Ear, Nose, Mouth and Throat – Surgical	\$6,270.56
264	Other Circulatory System O.R. Procedures	5	Diseases and Disorders of the Circulatory System – Surgical	\$17,614.21
463	Wound Debridement and Skin Graft Except Hand, for Musculo-Connective Tissue Disorders with MCC	8	Diseases and Disorders of the Musculoskeletal System and Connective Tissue – Surgical	\$32,090.46
464	Wound Debridement and Skin Graft Except Hand, for Musculo-Connective Tissue Disorders with CC	8	Diseases and Disorders of the Musculoskeletal System and Connective Tissue – Surgical	\$18,183.72
465	Wound Debridement and Skin Graft Except Hand, for Musculo-Connective Tissue Disorders without CC/MCC	8	Diseases and Disorders of the Musculoskeletal System and Connective Tissue – Surgical	\$12,187.48



MS-DRG	MS-DRG Description	MDC	MDC Description	\$ Medicare National Average Payment Rate*
573	Skin Graft for Skin Ulcer or Cellulitis with MCC	9	Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast	\$21,988.40
574	Skin Graft for Skin Ulcer or Cellulitis with CC	9	Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast	\$17,036.95
575	Skin Graft for Skin Ulcer or Cellulitis without CC/MCC	9	Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast	\$8,821.12
576	Skin Graft Except for Skin Ulcer or Cellulitis with MCC	9	Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast	\$25,760.27
577	Skin Graft Except for Skin Ulcer or Cellulitis with CC	9	Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast	\$13,649.72
578	Skin Graft Except for Skin Ulcer or Cellulitis without CC/MCC	9	Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast	\$8,249.23
904	Skin Grafts for Injuries with CC/MCC	21	Injuries, Poisonings and Toxic Effects of Drugs – Surgical	\$19,455.72
905	Skin Grafts for Injuries without CC/MCC	21	Injuries, Poisonings and Toxic Effects of Drugs – Surgical	\$8,228.35
927	Extensive Burns or Full Thickness Burns with Mechanical Ventilation > 96 Hours with Skin Graft	22	Burns - Surgical	\$86,167.53



MS-DRG	MS-DRG Description	MDC	MDC Description	Medicare National Average Payment Rate*
928	Full Thickness Burns with Skin Graft or Inhalation Injury with CC/MCC	22	Burns - Surgical	\$30,978.28
929	Full Thickness Burns with Skin Graft or Inhalation Injury without CC/MCC	22	Burns - Surgical	\$15,258.65
957	Other O.R. Procedures for Multiple Significant Trauma with MCC	24	Multiple Significant Trauma - Surgical	\$41,098.24
958	Other O.R. Procedures for Multiple Significant Trauma with CC	24	Multiple Significant Trauma - Surgical	\$23,013.51
959	Other O.R. Procedures for Multiple Significant Trauma without MCC	24	Multiple Significant Trauma - Surgical	\$15,072.59

### Acronym Key:

**MS-DRG** – Medical Severity Diagnosis Related Groups

**MDC** – Major Diagnostic Category

**CC** – Comorbidities and Complications

**MCC** – Major Comorbidities and Complications

Reference: The ICD-10-PCS codes and descriptors, and DRG payment groups are effective October 1, 2016.

\*The Medicare average payment rates provided are a benchmark reference only. There is no official publication of the average hospital rate; therefore the national average payments provided in the table above are approximate.

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