

DIAGNOSTIC CODES

On October 1, 2014, Medicare will replace the ICD-9 diagnostic codes with the new ICD-10-CM codes. Details about this transition, including training opportunities, are posted on the [CMS website](#).

A comprehensive listing of the [current ICD-9 diagnostic codes](#) can be found here. This website also provides an easy link between each old and new code.

The primary diagnosis listed on a claim will determine if the charges are covered under the major medical or mental health portion of the patient's plan. This distinction is determined by the ICD-9 classification – and has very little to do with clinical reality. All codes listed under the chapter entitled “Mental Disorders” will be processed by the insurance companies under the patient's mental health benefit. This chapter includes ALL codes between 290-319. For example, 310.2 (Post Concussion Syndrome) and 294.9 (Cognitive Disorder NOS) are considered mental health. All ICD-9 codes higher than 319 are considered medical and will be processed as such. All insurance companies process claims in this manner; exceptions are rare.

Additional information regarding the transition to ICD-10 will be posted as it becomes available.

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