

**Inpatient and Outpatient Short Stay Reimbursement for ICD-10**

<b>ICD-10 Diagnosis Code</b>	<b>ICD-10 Diagnosis Description</b>	<b>Start Date</b>
A41.9	SEPSIS, UNSPECIFIED ORGANISM	10/1/2015
E10.10	TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	10/1/2015
E10.610	TYPE 1 DIABETES MELLITUS WITH DIABETIC NEUROPATHIC ARTHROPATHY	10/1/2015
E10.621	TYPE 1 DIABETES MELLITUS WITH FOOT ULCER	10/1/2015
E10.622	TYPE 1 DIABETES MELLITUS WITH OTHER SKIN ULCER	10/1/2015
E10.628	TYPE 1 DIABETES MELLITUS WITH OTHER SKIN COMPLICATIONS	10/1/2015
E10.649	TYPE 1 DIABETES MELLITUS WITH HYPOGLYCEMIA WITHOUT COMA	10/1/2015
E10.65	TYPE 1 DIABETES MELLITUS WITH HYPERGLYCEMIA	10/1/2015
E10.69	TYPE 1 DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATION	10/1/2015
E11.610	TYPE 2 DIABETES MELLITUS WITH DIABETIC NEUROPATHIC ARTHROPATHY	10/1/2015
E11.618	TYPE 2 DIABETES MELLITUS WITH OTHER DIABETIC ARTHROPATHY	10/1/2015
E11.620	TYPE 2 DIABETES MELLITUS WITH DIABETIC DERMATITIS	10/1/2015
E11.621	TYPE 2 DIABETES MELLITUS WITH FOOT ULCER	10/1/2015
E11.622	TYPE 2 DIABETES MELLITUS WITH OTHER SKIN ULCER	10/1/2015
E11.628	TYPE 2 DIABETES MELLITUS WITH OTHER SKIN COMPLICATIONS	10/1/2015
E11.649	TYPE 2 DIABETES MELLITUS WITH HYPOGLYCEMIA WITHOUT COMA	10/1/2015
E11.65	TYPE 2 DIABETES MELLITUS WITH HYPERGLYCEMIA	10/1/2015
E11.69	TYPE 2 DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATION	10/1/2015
E1110	TYPE 2 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	10/1/2017
E13.621	OTHER SPECIFIED DIABETES MELLITUS WITH FOOT ULCER	10/1/2015
E13.622	OTHER SPECIFIED DIABETES MELLITUS WITH OTHER SKIN ULCER	10/1/2015
E13.628	OTHER SPECIFIED DIABETES MELLITUS WITH OTHER SKIN COMPLICATIONS	10/1/2015
E13.65	OTHER SPECIFIED DIABETES MELLITUS WITH HYPERGLYCEMIA	10/1/2015
E13.69	OTHER SPECIFIED DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATION	10/1/2015
E86.0	DEHYDRATION	10/1/2015
E86.1	HYPOVOLEMIA	10/1/2015
E86.9	VOLUME DEPLETION, UNSPECIFIED	10/1/2015
G40.401	OTHER GENERALIZED EPILEPSY AND EPILEPTIC SYNDROMES, NOT INTRACTABLE, WITH STATUS EPILEPTICUS	10/1/2015
G40.409	OTHER GENERALIZED EPILEPSY AND EPILEPTIC SYNDROMES, NOT INTRACTABLE, WITHOUT STATUS EPILEPTICUS	10/1/2015
G40.901	EPILEPSY, UNSPECIFIED, NOT INTRACTABLE, WITH STATUS EPILEPTICUS	10/1/2015
G40.909	EPILEPSY, UNSPECIFIED, NOT INTRACTABLE, WITHOUT STATUS EPILEPTICUS	10/1/2015
I10	ESSENTIAL (PRIMARY) HYPERTENSION	10/1/2015
I160	HYPERTENSIVE URGENCY	10/1/2016
I161	HYPERTENSIVE EMERGENCY	10/1/2016
I169	HYPERTENSIVE CRISIS UNSPECIFIED	10/1/2016
I25.10	ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITHOUT ANGINA PECTORIS	10/1/2015
I25.110	ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITH UNSTABLE ANGINA PECTORIS	10/1/2015
I25.111	ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITH ANGINA PECTORIS WITH DOCUMENTED SPASM	10/1/2015
I25.118	ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITH OTHER FORMS OF ANGINA PECTORIS	10/1/2015
I25.119	ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITH UNSPECIFIED ANGINA PECTORIS	10/1/2015
J18.8	OTHER PNEUMONIA, UNSPECIFIED ORGANISM	10/1/2015
J18.9	PNEUMONIA, UNSPECIFIED ORGANISM	10/1/2015
J21.0	ACUTE BRONCHIOLITIS DUE TO RESPIRATORY SYNCYTIAL VIRUS	10/1/2015
J21.8	ACUTE BRONCHIOLITIS DUE TO OTHER SPECIFIED ORGANISMS	10/1/2015
J21.9	ACUTE BRONCHIOLITIS , UNSPECIFIED	10/1/2015

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<b>ICD-10 Diagnosis Code</b>	<b>ICD-10 Diagnosis Description</b>	<b>Start Date</b>
J44.0	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH ACUTE LOWER RESPIRATORY INFECTION	10/1/2015
J44.1	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH (ACUTE) EXACERBATION	10/1/2015
J45.901	UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION	10/1/2015
J45.902	UNSPECIFIED ASTHMA WITH STATUS ASTHMATICUS	10/1/2015
K52.89	OTHER SPECIFIED NONINFECTIVE GASTROENTERITIS AND COLITIS	10/1/2015
K52.9	NONINFECTIVE GASTROENTERITIS AND COLITIS, UNSPECIFIED	10/1/2015
K523	INDETERMINATE COLITIS	10/1/2016
K52831	COLLAGENOUS COLITIS	10/1/2016
K52832	LYMPHOCYTIC COLITIS	10/1/2016
K52838	OTHER MICROSCOPIC COLITIS	10/1/2016
K52839	MICROSCOPIC COLITIS UNSPECIFIED	10/1/2016
K85.0	IDIOPATHIC ACUTE PANCREATITIS	10/1/2015
K85.1	BILIARY ACUTE PANCREATITIS	10/1/2015
K85.2	ALCOHOL INDUCED ACUTE PANCREATITIS	10/1/2015
K85.3	DRUG INDUCED ACUTE PANCREATITIS	10/1/2015
K85.8	OTHER ACUTE PANCREATITIS	10/1/2015
K85.9	ACUTE PANCREATITIS, UNSPECIFIED	10/1/2015
K8500	IDIOPATHIC ACUTE PANCREATITIS WO NECROSIS INFECT	10/1/2016
K8501	IDIOPATHIC ACUTE PANCREATITIS UNINFECTED NECROS	10/1/2016
K8502	IDIOPATHIC ACUTE PANCREATITIS INFECTED NECROSIS	10/1/2016
K8510	BILIARY ACUTE PANCREATITIS W/O NECROSIS INFECT	10/1/2016
K8511	BILIARY ACUTE PANCREATITIS UNINFECTED NECROSIS	10/1/2016
K8512	BILIARY ACUTE PANCREATITIS W/INFECTED NECROSIS	10/1/2016
K8520	ALCOHOL INDUCED ACUTE PANCREATITIS WO NECROS/INF	10/1/2016
K8521	ALCOHOL INDUCED ACUTE PANCREATITIS UNINF NECROS	10/1/2016
K8522	ALCOHOL INDUCED ACUTE PANCREATITIS INF NECROSIS	10/1/2016
K8530	DRUG INDUCED ACUTE PANCREATITIS WO NECROSIS/INF	10/1/2016
K8531	DRUG INDUCED ACUTE PANCREATITIS UNINFECT NECROS	10/1/2016
K8532	DRUG INDUCED ACUTE PANCREATITIS INFECT NECROSIS	10/1/2016
K8590	ACUTE PANCREATITIS WO NECROSIS/INFECTION UNSPEC	10/1/2016
K8591	ACUTE PANCREATITIS UNINFECTED NECROS UNSPECIFIED	10/1/2016
K8592	ACUTE PANCREATITIS INFECTED NECROSIS UNSPECIFIED	10/1/2016
L02.11	CUTANEOUS ABSCESS OF NECK	10/1/2015
L02.211	CUTANEOUS ABSCESS OF ABDOMINAL WALL	10/1/2015
L02.212	CUTANEOUS ABSCESS OF BACK [ANY PART, EXCEPT BUTTOCK]	10/1/2015
L02.213	CUTANEOUS ABSCESS OF CHEST WALL	10/1/2015
L02.214	CUTANEOUS ABSCESS OF GROIN	10/1/2015
L02.215	CUTANEOUS ABSCESS OF PERINEUM	10/1/2015
L02.216	CUTANEOUS ABSCESS OF UMBILICUS	10/1/2015
L02.219	CUTANEOUS ABSCESS OF TRUNK, UNSPECIFIED	10/1/2015
L02.31	CUTANEOUS ABSCESS OF BUTTOCK	10/1/2015
L02.411	CUTANEOUS ABSCESS OF RIGHT AXILLA	10/1/2015
L02.412	CUTANEOUS ABSCESS OF LEFT AXILLA	10/1/2015
L02.413	CUTANEOUS ABSCESS OF RIGHT UPPER LIMB	10/1/2015
L02.414	CUTANEOUS ABSCESS OF LEFT UPPER LIMB	10/1/2015
L02.415	CUTANEOUS ABSCESS OF RIGHT LOWER LIMB	10/1/2015
L02.416	CUTANEOUS ABSCESS OF LEFT LOWER LIMB	10/1/2015
L02.419	CUTANEOUS ABSCESS OF LIMB, UNSPECIFIED	10/1/2015
L02.511	CUTANEOUS ABSCESS OF RIGHT HAND	10/1/2015

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<b>ICD-10 Diagnosis Code</b>	<b>ICD-10 Diagnosis Description</b>	<b>Start Date</b>
L02.512	CUTANEOUS ABSCESS OF LEFT HAND	10/1/2015
L02.519	CUTANEOUS ABSCESS OF UNSPECIFIED HAND	10/1/2015
L02.611	CUTANEOUS ABSCESS OF RIGHT FOOT	10/1/2015
L02.612	CUTANEOUS ABSCESS OF LEFT FOOT	10/1/2015
L02.619	CUTANEOUS ABSCESS OF UNSPECIFIED FOOT	10/1/2015
L02.811	CUTANEOUS ABSCESS OF HEAD [ANY PART, EXCEPT FACE]	10/1/2015
L02.818	CUTANEOUS ABSCESS OF OTHER SITES	10/1/2015
L02.91	CUTANEOUS ABSCESS, UNSPECIFIED	10/1/2015
L03.111	CELLULITIS OF RIGHT AXILLA	10/1/2015
L03.112	CELLULITIS OF LEFT AXILLA	10/1/2015
L03.113	CELLULITIS OF RIGHT UPPER LIMB	10/1/2015
L03.114	CELLULITIS OF LEFT UPPER LIMB	10/1/2015
L03.115	CELLULITIS OF RIGHT LOWER LIMB	10/1/2015
L03.116	CELLULITIS OF LEFT LOWER LIMB	10/1/2015
L03.119	CELLULITIS OF UNSPECIFIED PART OF LIMB	10/1/2015
L03.121	ACUTE LYMPHANGITIS OF RIGHT AXILLA	10/1/2015
L03.122	ACUTE LYMPHANGITIS OF LEFT AXILLA	10/1/2015
L03.123	ACUTE LYMPHANGITIS OF RIGHT UPPER LIMB	10/1/2015
L03.124	ACUTE LYMPHANGITIS OF LEFT UPPER LIMB	10/1/2015
L03.125	ACUTE LYMPHANGITIS OF RIGHT LOWER LIMB	10/1/2015
L03.126	ACUTE LYMPHANGITIS OF LEFT LOWER LIMB	10/1/2015
L03.129	ACUTE LYMPHANGITIS OF UNSPECIFIED PART OF LIMB	10/1/2015
L03.221	CELLULITIS OF NECK	10/1/2015
L03.222	ACUTE LYMPHANGITIS OF NECK	10/1/2015
L03.311	CELLULITIS OF ABDOMINAL WALL	10/1/2015
L03.312	CELLULITIS OF BACK [ANY PART EXCEPT BUTTOCK]	10/1/2015
L03.313	CELLULITIS OF CHEST WALL	10/1/2015
L03.314	CELLULITIS OF GROIN	10/1/2015
L03.315	CELLULITIS OF PERINEUM	10/1/2015
L03.316	CELLULITIS OF UMBILICUS	10/1/2015
L03.317	CELLULITIS OF BUTTOCK	10/1/2015
L03.319	CELLULITIS OF TRUNK, UNSPECIFIED	10/1/2015
L03.321	ACUTE LYMPHANGITIS OF ABDOMINAL WALL	10/1/2015
L03.322	ACUTE LYMPHANGITIS OF BACK [ANY PART EXCEPT BUTTOCK]	10/1/2015
L03.323	ACUTE LYMPHANGITIS OF CHEST WALL	10/1/2015
L03.324	ACUTE LYMPHANGITIS OF GROIN	10/1/2015
L03.325	ACUTE LYMPHANGITIS OF PERINEUM	10/1/2015
L03.326	ACUTE LYMPHANGITIS OF UMBILICUS	10/1/2015
L03.327	ACUTE LYMPHANGITIS OF BUTTOCK	10/1/2015
L03.329	ACUTE LYMPHANGITIS OF TRUNK, UNSPECIFIED	10/1/2015
L03.811	CELLULITIS OF HEAD [ANY PART, EXCEPT FACE]	10/1/2015
L03.818	CELLULITIS OF OTHER SITES	10/1/2015
L03.891	ACUTE LYMPHANGITIS OF HEAD [ANY PART, EXCEPT FACE]	10/1/2015
L03.898	ACUTE LYMPHANGITIS OF OTHER SITES	10/1/2015
L03.90	CELLULITIS, UNSPECIFIED	10/1/2015
R07.89	OTHER CHEST PAIN	10/1/2015
R07.9	CHEST PAIN, UNSPECIFIED	10/1/2015
R55	SYNCOPE AND COLLAPSE	10/1/2015
R56.9	UNSPECIFIED CONVULSIONS	10/1/2015

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