



Date: October 9, 2020

To: Community Living Assistance and Supports Services Program Providers
Deaf Blind with Multiple Disabilities Program Providers
Home and Community-based Services Program Providers
Intermediate Care Facilities for Individuals with an Intellectual Disability or Related Conditions Program Providers
Local Intellectual and Developmental Disability Authorities
Texas Home Living Program Providers

Subject: Information Letter No. 20-44
Changes to HHSC Approved Diagnostic Codes for Persons with Related Conditions List (**This letter replaces IL19-25**)

Beginning Oct. 1, 2020, the Centers for Medicare and Medicaid Services will implement an annual update to the *International Classification of Diseases, Tenth Revision*, (ICD-10) code set, which includes new and revised ICD-10 diagnostic codes.

Because of the updates, the Health and Human Services Commission (HHSC) revised the HHSC-Approved Diagnostic Codes for Persons with Related Conditions List to remove the ICD-10 diagnosis code that is no longer valid and include new corresponding ICD-10 diagnoses codes.

List of Invalid ICD-10 Related Conditions Codes

The following ICD-10 diagnosis code is no longer valid and was deleted from the HHSC-Approved Diagnostic Codes for Persons with Related Conditions List:

Deleted Code	Description
G11.1	Early-onset cerebellar ataxia
G71.2	Congenital myopathies

The deleted codes were replaced with multiple, more specific ICD-10 codes which have been added to the list. For this reason, there is no crosswalk.

Added Code	Description
G11.10	Early-onset cerebellar ataxia, unspecified
G11.11	Friedreich ataxia
G11.19	Other early-onset cerebellar ataxia
G71.20	Congenital myopathy, unspecified
G71.21	Nemaline myopathy
G71.220	X-linked myotubular myopathy
G71.228	Other centronuclear myopathy
G71.29	Other congenital myopathy

Instructions

All Intellectual Disability/Related Conditions Assessments (ID/RCs) and claims must be submitted using an individual's valid ICD-10 diagnostic code. While an individual's Medicaid Eligibility will be maintained throughout the duration of the Public Health Emergency (PHE), to ensure there is no denial of claims, program providers and Local Intellectual and Developmental Disability Authorities (LIDDAs) must comply with the following:

- All ID/RCs with effective dates prior to October 1, 2020, must be submitted using the ICD-10 2020 code set.
- All ID/RCs with effective dates on or after October 1, 2020, must be submitted using the ICD-10 2021 code set.
- All claims for service with effective dates prior to October 1, 2020, must be submitted using the ICD-10 2020 code set.
- All claims for service with effective dates on or after October 1, 2020, must be submitted using the ICD-10 2021 code set.

If an individual's current diagnosis is no longer valid, the program provider or LIDDA must obtain an ICD-10 code from a physician who is attesting to the diagnosis upon reassessment. HHSC encourages program providers and LIDDAs to be active in obtaining an individual's ICD-10 diagnosis codes in order to avoid denial of claims or ID/RC submission after the PHE.

Attached to this information letter (IL) is a sample letter that a program provider or LIDDA may give a physician to explain HHSC's eligibility requirements regarding the inclusion of an individual's valid ICD-10 code on an ID/RC in order to receive long term supports and services.

A program provider or LIDDA can refer to the HHSC-Approved Diagnostic Codes for Persons with Related Conditions List for a complete list of valid ICD-10 related conditions codes.

Questions about this IL may be emailed to the HHSC mailbox at ICFIID.Questions@hhsc.state.tx.us. In the subject line please use "Information Letter No. 20-44."

Sincerely,

[Signature on file]

Michelle Erwin
Deputy Director of Policy and Program
Medicaid and CHIP Services

Attachment:

- Attachment A - Letter to Physicians



October 9, 2020

Dear Physician:

The Health and Human Services Commission (HHSC) requires Medicaid contractors that provide intellectual and developmental disability services to either individuals living in an ICF/IID or enrolled in an IDD waiver program to ensure valid ICD-10 codes are used. Additionally, all diagnostic reassessments to establish ongoing eligibility of individuals receiving Medicaid services must use valid ICD-10 codes. Because of updates to the ICD-10 code set for 2021, you have at least one patient receiving services who has an ICD-10 code that is not valid for establishing eligibility for program services funded by HHSC. If the individual's reassessment was completed on or after October 1, 2020, HHSC requires diagnostic assessments be submitted using the ICD-10 code set for 2021.

Please submit the HHSC contracted service provider documentation using valid ICD-10 diagnosis codes to update the patient's Intellectual Disability/Related Conditions Assessment form.

Thank you for your assistance. If you have any questions, please contact the HHSC mailbox at ICFIID.Questions@hhsc.state.tx.us.

Sincerely,

[Signature on file]

Emily Zalkosky
Deputy Associate Commissioner
Medicaid and CHIP Services

Resource:

ICD-10 HHSC-Approved Diagnostic Codes for Persons with Related Conditions List