

Additional ICD-10 Acceptable Diagnosis Codes Elective Deliveries Under 39 Weeks

The following ICD-10 diagnosis codes have been added to the list of acceptable diagnosis codes for elective deliveries occurring at less than 39 weeks gestation.

Practitioners are responsible for ensuring that the codes submitted for reimbursement accurately reflect the patient's diagnosis, based on the documentation in the medical record, and the service(s) or procedure(s) that were provided. Post payment reviews are conducted by the Office of the Medicaid Inspector General (OMIG) on adjudicated claims. Medical records must be maintained by providers for a period of not less than six years from the date of payment.

For additional information and a list of the original ICD-10 codes that were published in October, 2015, please visit the following link:

https://www.emedny.org/ProviderManuals/Physician/PDFS/ICD-10_Medicaid_Update_2.pdf

Additional Acceptable ICD-10 Diagnosis Codes:

O14.02	O31.12X5	O31.22X3	O35.4XX3	O35.6XX5	O40.2XX4	O40.3XX5	O41.03X1	O42.12	O69.4XX4
O14.03	O31.12X9	O31.22X4	O35.4XX4	O35.6XX9	O40.2XX4	O40.3XX9	O41.03X2	O42.912	O69.4XX5
O14.92	O31.13X0	O31.22X5	O35.4XX5	O35.8XX0	O40.2XX5	O40.3XX9	O41.03X2	O42.913	O69.4XX9
O14.93	O31.13X1	O31.22X9	O35.4XX9	O35.8XX1	O40.2XX5	O41.02X1	O41.03X3	O42.92	O76
O26.832	O31.13X1	O31.23X0	O35.5XX0	O35.8XX2	O40.2XX9	O41.02X1	O41.03X3	O68	O77
O26.833	O31.13X2	O31.23X1	O35.5XX1	O35.8XX3	O40.2XX9	O41.02X2	O41.03X4	O69.0XX0	O77.0
O31.11X0	O31.13X2	O31.23X1	O35.5XX2	O35.8XX4	O40.3XX0	O41.02X2	O41.03X4	O69.0XX1	O77.1
O31.11X0	O31.13X3	O31.23X2	O35.5XX3	O35.8XX5	O40.3XX1	O41.02X3	O41.03X5	O69.0XX2	O77.8
O31.12X0	O31.13X4	O31.23X2	O35.5XX4	O35.8XX9	O40.3XX1	O41.02X3	O41.03X5	O69.0XX3	O77.9
O31.12X0	O31.13X5	O31.23X3	O35.5XX5	O40.2XX0	O40.3XX2	O41.02X4	O41.03X9	O69.0XX4	O99.112
O31.12X1	O31.13X9	O31.23X4	O35.5XX9	O40.2XX1	O40.3XX2	O41.02X4	O41.03X9	O69.0XX5	O99.113
O31.12X1	O31.22X0	O31.23X5	O35.6XX0	O40.2XX1	O40.3XX3	O41.02X5	O42.012	O69.0XX9	O99.12
O31.12X2	O31.22X1	O31.23X9	O35.6XX1	O40.2XX2	O40.3XX3	O41.02X5	O42.013	O69.4XX0	O99.412
O31.12X2	O31.22X1	O35.4XX0	O35.6XX2	O40.2XX2	O40.3XX4	O41.02X9	O42.02	O69.4XX1	O99.413
O31.12X3	O31.22X2	O35.4XX1	O35.6XX3	O40.2XX3	O40.3XX4	O41.02X9	O42.112	O69.4XX2	O99.42
O31.12X4	O31.22X2	O35.4XX2	O35.6XX4	O40.2XX3	O40.3XX5	O41.03X1	O42.113	O69.4XX3	

Questions regarding Medicaid fee-for-service policy should be directed to the Division of Program Development and Management at (518) 473-2160.

Questions regarding Medicaid Managed Care (MMC) reimbursement and/or documentation requirements should be directed to the enrollee's MMC Plan.