

ICD-10 CM Updates

The [Centers for Medicare and Medicaid Services](#) published [ICD-10 CM updates](#) effective **October 1st, 2022** through **September 30th, 2023**. Several new codes and changes were made in Chapter 2 (Neoplasms) and Chapter 3 (Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism) as well as in Chapter 21 (Factors influencing health status and contact with health services). A full list of changes can be found in the “Addendum” files on [the ICD-10 CM updates page](#). Questions about ICD-10 CM codes may be sent to ASCO at practice@asco.org.

New ICD-10 CM Codes

Chapter 3- Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism

Deleted Code	New/Added Codes
D59.3 Hemolytic-uremic Syndrome	D59.30 Hemolytic-uremic syndrome, unspecified
	D59.31 Infection-associated hemolytic-uremic syndrome
	D59.32 Hereditary hemolytic-uremic syndrome
	D59.39 Other hemolytic-uremic syndrome
D68.0 Von Willebrand’s Disease	D68.00 Von Willebrand’s disease, unspecified
	D68.01 Von Willebrand disease, type 1
	D68.020 Von Willebrand disease, type 2A
	D68.021 Von Willebrand disease, type 2B
	D68.022 Von Willebrand disease, type 2M
	D68.023 Von Willebrand disease, type 2N
	D68.029 Von Willebrand disease, type 2, unspecified
	D68.03 Von Willebrand disease, type 3
	D68.04 Acquired Von Willebrand disease
D68.09 Other Von Willebrand disease	
D75.82 Heparin induced thrombocytopenia (HIT)	D75.821 Non-immune heparin-induced thrombocytopenia
	D75.828 Other heparin-induced thrombocytopenia syndrome
	D75.829 Heparin-induced thrombocytopenia, unspecified
	D75.84 Other platelet-activating anti-PF4 disorders
	D81.82 Activated Phosphoinositide 3-kinase Delta Syndrome (APDS)

Chapter 21

Deleted Codes	New/Added Codes
	Z59.82 Transportation insecurity Z59.86 Financial insecurity Z59.87 Material hardship Z71.87 Encounter for pediatric-to-adult transition counseling Z71.88 Encounter for counseling for socioeconomic factors Z79.60 Long term (current) use of unspecified immunomodulators and immunosuppressants Z79.61 Long term (current) use of immunomodulator Z79.620 Long term (current) use of immunosuppressive biologic Z79.623 Long term (current) use of mammalian target of rapamycin (MTOR) inhibitor Z79.630 Long term (current) use of alkylating agent Z79.631 Long term (current) use of antimetabolite agent Z79.632 Long term (current) use of antitumor antibiotic Z79.633 Long term (current) use of mitotic inhibitor Z79.634 Long term (current) use of topoisomerase inhibitor Z79.64 Long term (current) use of myelosuppressive agent Z79.69 Long term (current) use of other immunomodulators and immunosuppressants
Z91.11 Patient's noncompliance with dietary regimen	Z91.110 Patient's noncompliance with dietary regimen due to financial hardship Z91.118 Patient's noncompliance with dietary regimen for other reason Z91.119 Patient's noncompliance with dietary regimen due to unspecified reason
Z91.19 Patient's noncompliance with other medical treatment and regimen	Z911.90 Patient's noncompliance with other medical treatment and regimen due to financial hardship Z911.98 Patient's noncompliance with other medical treatment and regimen for other reason Z911.99 Patient's noncompliance with other medical treatment and regimen due to unspecified reason
Header?	Z91.A10 Caregiver's noncompliance with patient's dietary regimen due to financial hardship Z91.A18 Caregiver's noncompliance with patient's dietary regimen for other reason Z91.A20 Caregiver's intentional underdosing of patient's medication regimen due to financial Z91.A28 Caregiver's intentional underdosing of medication regimen for other reason Z91.A3 Caregiver's unintentional underdosing of patient's medication regimen Z91.A3 Caregiver's unintentional underdosing of patient's medication regimen

	Z91.A4 Caregiver's other noncompliance with patient's medication regimen
	Z91.A5 Caregiver's noncompliance with patient's renal dialysis
	Z91.A9 Caregiver's noncompliance with patient's other medical treatment and regimen

Revisions and Updates

Current Language	Revised Language
C84.40 Peripheral T-cell lymphoma, not classified, unspecified site	C84.40 Peripheral T-Cell lymphoma, not elsewhere classified, unspecified site
C84.41 Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck	C84.41 Peripheral T-cell lymphoma, not elsewhere classified, lymph nodes of head, face, and neck
C84.42 Peripheral T-cell lymphoma, not classified, intrathoracic lymph nodes	C84.42 Peripheral T-cell lymphoma, not elsewhere classified, intrathoracic lymph nodes
C84.43 Peripheral T-cell lymphoma, not classified, intra-abdominal lymph nodes	C84.43 Peripheral T-cell lymphoma, not elsewhere classified, intra-abdominal lymph nodes
C84.44 Peripheral T-cell lymphoma, not classified, lymph nodes of axilla and upper limb	C84.44 Peripheral T-cell lymphoma, not elsewhere classified, lymph nodes of axilla and upper limb
C84.45 Peripheral T-cell lymphoma, not classified, lymph nodes of inguinal region and lower limb	C84.45 Peripheral T-cell lymphoma, not elsewhere classified, lymph nodes of inguinal region and lower limb
C84.46 Peripheral T-cell lymphoma, not classified, intrapelvic lymph nodes	C84.46 Peripheral T-cell lymphoma, not elsewhere classified, intrapelvic lymph nodes
C84.47 Peripheral T-cell lymphoma, not classified, spleen	C84.47 Peripheral T-cell lymphoma, not elsewhere classified, spleen
C84.48 Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites	C84.48 Peripheral T-cell lymphoma, not elsewhere classified, lymph nodes of multiple sites
C84.49 Peripheral T-cell lymphoma, not classified, extranodal and solid organ sites	C84.49 Peripheral T-cell lymphoma, not elsewhere classified, extranodal and solid organ sites
C94.6 Myelodysplastic disease, not classified	C94.6 Myelodysplastic disease, not elsewhere classified

ICD-10 CM Terms and Definitions:

Excludes 1: Indicates conditions that may not be reported together. The “Excludes 1” code should not be used at the same time as the code above the note.

Excludes 2: Indicates that although the excluded condition is not part of the condition it is excluded from, the patient may have both conditions at the same time. The Excludes 2 code may be used at the same time as the code above it.

NOS: Not Otherwise Specified. This abbreviation is the equivalent of unspecified.

Use Additional Code: An additional code should be reported to provide a complete picture of the diagnosis.

Code also: More than one code may be required to fully describe the condition.