

ICD-10 MS-DRGs Version 39.1 Effective April 01, 2022

In response to the COVID-19 pandemic, the Centers for Medicare & Medicaid Services (CMS) is implementing 7 new procedure codes to describe the introduction or infusion of therapeutics, including vaccines for COVID-19 treatment, into the International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), effective April 01, 2022.

CMS notes that for hospitalized patients, Medicare pays for the COVID-19 vaccines and their administration separately from the Diagnosis-Related Group rate. As such, Medicare expects that the appropriate [CPT codes](#) will be used when a Medicare beneficiary is administered a vaccine while a hospital inpatient. For details on billing Medicare for the COVID-19 vaccine appropriately, please see this page in our provider toolkit:

<https://www.cms.gov/medicare/covid-19/medicare-billing-covid-19-vaccine-shot-administration>.

The ICD-10 MS-DRG Grouper assigns each case into an MS-DRG based on the reported diagnosis and procedure codes and demographic information (age, sex, and discharge status).

The ICD-10 Medicare Code Editor (MCE) Version 39.1 software uses edits to detect and report errors in the claims data for the ICD-10 codes reported to validate correct coding on claims for discharges on or after April 01, 2022.

The ICD-10 MS-DRG Grouper software package to accommodate these 7 new codes, Version 39.1, is effective for discharges on or after April 01, 2022. As indicated in the table below, these codes will not affect the MS-DRG assignment.

Procedure Code	Description	*O.R.	MDC	MS-DRG
XW013V7	Introduction of COVID-19 vaccine dose 3 into subcutaneous tissue, percutaneous approach, new technology group 7	N		
XW013W7	Introduction of COVID-19 vaccine booster into subcutaneous tissue, percutaneous approach, new technology group 7	N		
XW023V7	Introduction of COVID-19 vaccine dose 3 into muscle, percutaneous approach, new technology group 7	N		
XW023W7	Introduction of COVID-19 vaccine booster into muscle, percutaneous approach, new technology group 7	N		
XW0DXR7	Introduction of fostamatinib into mouth and pharynx, external approach, new technology group 7	N		
XW0G7R7	Introduction of fostamatinib into upper GI, via natural or artificial opening, new technology group 7	N		
XW0H7R7	Introduction of fostamatinib into lower GI, via natural or artificial opening, new technology group 7	N		

*As the procedure codes are designated as non-O.R. procedures, there is no assigned MDC or MS-DRG. The ICD-10 MS-DRG assignment is dependent on the reported principal diagnosis, any secondary diagnoses defined as a complication or comorbidity (CC) or major complication or comorbidity (MCC), procedures or services performed, age, sex, and discharge status.

The ICD-10 MS-DRG V39.1 Grouper Software, Definitions Manual Table of Contents and the Definitions of Medicare Code Edits V39.1 manual will be available at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/MS-DRG-Classifications-and-Software.html>

The Code Tables, Index and related Addenda files for the 7 new procedure codes will be available at: <https://www.cms.gov/medicare/icd-10/2022-icd-10-pcs>