

Clinical Policy: Acquired Brain Injury (Subacute and Chronic) Inpatient Neurorehabilitation
Reference Number: AR.CP.MP.501
Last Review Date: 6/16/2025

Coding Implications
Revision Log

See <u>Important Reminder</u> at the end of this policy for important regulatory and legal information.

Description

An acquired brain injury (ABI) is an injury to the brain that occurs after birth, is non-congenital and non-degenerative and prevents the normal function of the brain. These impairments may be temporary or permanent and cause partial or functional disability or psychosocial maladjustment. Brain injuries may be mild, moderate, or severe and may result in memory loss, change in personality, behavior dysfunction, difficulty managing anger, impaired judgment, loss of impulse control, communication impairment, mobility limitations, alcohol and substance abuse and other challenges. Traumatic Brain injury is a subset of (ABI).

Non-traumatic brain injury may be caused by stroke, heart attack, near-drowning, brain tumors, infectious diseases, prolonged high temperature, decrease or loss of oxygen to the brain, metabolic or endocrine disorders such as diabetic coma, a disease that affects blood flow to the brain, and toxic exposure from substances such as lead, pesticides, drug and alcohol abuse.

Traumatic brain injuries result from an external blow or jolt to the head or an injury that disrupts the normal function of the brain. Traumatic forces to the brain may be caused by motor vehicle collisions, falls, sports injuries, explosive blasts, gunshot wounds to the head, objectives falling on the head, and sharp objectives penetrating the skull. Individuals with brain injuries may be able to walk, maintain their employment and other routine functions.

This policy applies to all Arkansas health plans, Ambetter from Arkansas Health and Wellness, Arkansas Total Care, and QualChoice commercial plans, collectively, Arkansas Plans. Criteria specific to a health plan will be specified.

Member may have benefit limits for neurorehabilitation stay duration in a calendar year. Refer to the members evidence of coverage and summary of benefits.

Policy/Criteria

- Admission and Continued Stay criteria for admission to neurorehabilitation facility for Acquired Brain Injury for all Arkansas Plans.
 - 1. For all health plans, it is the policy of Arkansas plans that admission during for Acquired Brain Injury to a rehabilitation (neurorehabilitation) facility is medically necessary for the following indications:



A. Member must meet all the following criteria:

- 1) Member meets documentation requirements
- 2) Referral and diagnosis of Acquired Brain Injury from primary care provider, neurologist, rehabilitation specialist, or recent inpatient stay. Conditions include and are limited to:
 - a. Moderate or Severe Traumatic Brain Injury
 - b. Viral encephalitis
 - c. Meningitis
 - d. Aneurysms or vascular disease affecting the brain
 - e. Cerebral Vascular Accident (Stroke)
 - f. Brain tumors (including post-operative) with neurological impairment
 - g. Anoxic or Hypoxic brain injury
 - h. Toxic Encephalopathies
 - i. Refractory Seizure disorders
 - j. Brain injury from metabolic or endocrine disease
 - k. **For ARTC only**: congenital neurologic brain disorders or anoxic brain injury during birth.
- 3) Member must require at least two services listed below.
 - a. At minimum, at least one of the following rehabilitative services is required:
 - Intensive physical therapy to restore, correct, or improve physical mobility.
 - ii. Speech therapy to improve communication due to aphasia, dysphasia, or language processing disorders, or to improve or restore swallowing function.
 - iii. Occupational therapy to restore, correct, or improve fine/gross motor skills or ability to perform activities of daily living (ADL's) and/or instrumental activities of daily living (IADL's).
 - iv. Cognitive therapy to reinforce, strengthen, or reestablish previously learned patterns of behavior, or establish new patterns of cognitive activity or compensatory mechanisms for impaired neurological systems.
 - b. Member may require at least one of the following services:
 - Behavioral/Neurobehavioral Rehabilitation to diagnose, evaluate and treat aggression, depression, denial or other common behavioral problems.
 - ii. Individual and Group counseling to assist with psychological/adjustment disorders or substance abuse secondary to the ABI. This includes family counseling.



- iii. Life Skills Training for activities of daily living that are rehabilitative in nature.
- 4) Member has at **least two** of the following indications of need at a higher level of care for **admission for the ABI**:
 - a. Unable to maintain ADL's or IADL's independently in home environment within the last 30 days with failure of outpatient ABI therapy to improve or ameliorate functional level.
 - b. At **least two** of the following behavioral or mood symptoms that impair ability to function in community and member has failed outpatient treatment within the last 30 days:
 - i. Aggression, hostility, or intimidation in interactions with others.
 - ii. Harmful behaviors to self or others (one or more)
 - Emotional outbursts
 - Destruction of property
 - Self-injurious behavior
 - iii. Severe social withdrawal or isolation.
 - iv. Problematic sexual behavior.
 - v. Co-occurring substance use disorder with high risk of relapse (based on ASAM criteria).
 - c. Member safety in the community is threatened by at least one of the following:
 - i. Homelessness or threatened homelessness.
 - ii. Unable to follow instructions or negotiate needs.
 - iii. Unable to live independently or manage daily living skills appropriate to age/developmental level with failure of outpatient ABI therapy.
 - iv. Unable to ensure safety due to impulsiveness, poor judgement, or irrational behaviors within the community with failure of outpatient ABI therapy.
 - v. Family/Caregiver unable to manage intensity of symptoms.
 - d. Complexity of care is not appropriate for an outpatient setting.
 - e. Unable to attend school, work, or function in a structured environment within the last 30 days.
- 2. Documentation Requirements: It is the policy of the Arkansas Plans that the following documentation is required to prove medical necessity for admission to a neurorehabilitation stay:



- Evaluation of the member clinically relevant to each therapy discipline for which services will be rendered by appropriate provider for the service. Evaluation must include:
 - a. Diagnoses, symptoms, complaints and complications indicating need for admission including date of onset.
 - b. Diagnostic evaluation includes medical, social, psychological, behavioral, and developmental aspects of the member relevant to the services rendered.
 - c. Summary of results achieved during previous periods of therapy, if applicable
 - d. Potential for improvement in the member's behavior or functional level that is being treated by the service.
 - e. A description of the member's current functional level, previous functional level, and the last time member functioned at that level.
- 2) Referral, order, or prescription with signature of the referring physician, and supporting clinical documentation.
- 3) Plan of care/treatment plan that contains:
 - a. Treatment objectives with feasible rehabilitation goals that are specific and measurable.
 - b. Prescribed integrated program of therapies, social services, activities, and experiences designed to meet the treatment objectives.
 - c. A projected schedule of service delivery with the expected frequency and duration of each type of planned service, medications, or special procedures and the type of personnel who will be furnishing the services.
 - d. Plan for education to be provided to the member and primary caregiver, if applicable.
- 4) Orders for medications, diet, treatments, restorative and rehabilitative services or special procedures recommended for the member's health and safety.
- 3. For all health plans, a continued stay for Acquired Brain injury to a neurorehabilitation facility is considered medically necessary if the following conditions are met:
 - A. Member must meet all the following criteria:
 - Measurable and sustained progress toward care planned goals in at least two of the following areas:
 - a. ADL's, IADL's, and/or life skills
 - b. Functional mobility
 - c. Speech Therapy
 - d. Cognitive Rehabilitation
 - e. Behavioral/Neurobehavioral Rehabilitation to include all behavioral treatment, including individual, group and family sessions as provided in the plan of care.



- 2) Continued participation in rehabilitative treatment at least 3 hours a day 5 days a week.
- 3) Physician oversight with at least one progress note/visit per week.
- 4) Functional gains have not met maximum potential, and gains over the past 7 days have been beyond a minimal level.
 - a. PT/OT/ST treatment goals continue to show progress and member has not plateaued, **OR**
 - b. Behavioral or mood symptoms continue and have not stabilized.
 - i. Aggression, hostility, or intimidation in most interactions.
 - ii. Poor impulse control with harm to self or others.
 - iii. Emotional outburst causes harm to self or others.
 - iv. Severe social withdrawal or isolation.
 - v. Problematic sexual behavior.
 - vi. Destruction of property without harm to others is unresponsive to treatment
- 5) Member maintains medical stability as evidenced by all of the following:
 - a. Absence of infection.
 - b. Vital signs within baseline for member.
 - Lack of new onset of acute condition that prevents participation in therapy. (i.e., injury, CHF or COPD exacerbation, chest pain, DVT, need for IV hydration).

Facility has 3 calendar days to stabilize any condition, lack of ability to participate for 4 calendar days or more will be an indication of need for discharge.

- 6) Request meets documentation requirements.
- 7) Discharge criteria are not met.
- 4. Documentation Requirements: It is the policy of the Arkansas Plans that the following documentation is required to **prove medical necessity** for continued stay.
 - Progress notes of all prescribed therapies, including documentation of participation and progress towards goals.
 - a. If member receives any family therapy as part of neurobehavioral therapy, documentation of family/caregiver participation.
 - 2) Plan of care/treatment plan that contains:
 - a. Treatment objectives with feasible rehabilitation goals that are specific and measurable.
 - b. Prescribed integrated program of therapies, social services, activities, and experiences designed to meet the treatment objectives.
 - c. A projected schedule of service delivery with the expected frequency and duration of each type of planned service, medications, or special



- procedures and the type of personnel who will be furnishing the services.
- d. Plan for education to be provided to the member and primary caregiver, if applicable.
- Applicable updates to orders for medications, diet, treatments, restorative and rehabilitative services or special procedures recommended for the member's health and safety.
- 4) Plans for continuing care, including interdisciplinary team meetings review and modifications of the care plan.
- 5) Documentation of any education provided to the member or primary caregiver, if applicable.
- 6) Discharge plans, including the review for any durable medical equipment or services upon discharge.
- II. It is the policy of Arkansas Plans that admission or continued stay for all stays in a rehabilitation (neurorehabilitation) facility is **not medically necessary** for any of the following indications:
 - 1. Presence of acute medical problems, medically unstable, or presence of communicable disease on admission, or present for more than 3 calendar days during admission.
 - 2. Requires a ventilator.
 - 3. Care is custodial residential or long-term nursing care.
 - 4. Requires nutrition through intravenous administration.
 - 5. Not mentally or physically capable of participating in an intensive rehabilitation program for 3 hours a day, 5 days a week.
 - 6. Member is independent for self-care, mobility, and safety in community.
 - 7. Member/enrollee no longer demonstrates functional or behavioral impairment or has achieved goals set forth in the plan of care.
 - 8. Member/enrollee has returned to baseline or optimal level of functioning as evidenced by lack of, or plateaued, progression towards treatment goals.
 - 9. Member/enrollee has adapted to impairment with use of compensatory strategies or assistive equipment/devices.
 - 10. Member/enrollee is able to perform ADLs with minimal to no assistance from caregiver, if improving skills for ADL's are part of the treatment plan.
 - 11. Member/enrollee has achieved maximum functional or behavioral benefit from the inpatient treatment and can be expected to benefit from outpatient services, to include community reintegration, outpatient and day treatment programs, or other standardized outpatient treatment for ABI.



- 12. Member/enrollee is unable to participate in the treatment plan due to medical, psychological, or social complications and responsible adult has had instruction on the home treatment program and the skills of a therapist are not needed to provide or supervise the service.
- 13. Non-compliance due to refusal to participate or attend treatment sessions or refusal of participation with the plan of care.
- 14. If the inpatient level of care no longer appears to be clinically appropriate or beneficial to the Member for any reason, including those identified above, a recommendation for discontinuation (denial) will be referred to the medical director for final review and determination.
 - a. A full review of the Member's complete documented therapy history may be performed. If the therapy documentation does not support appropriate or functionally beneficial skilled services for an inpatient level of stay, a denial recommendation may be made to the medical director.

Background

Inpatient neurorehabilitation during the post-acute phase of brain injury plays a crucial role in enhancing functional independence and facilitating community reintegration. Clinical evidence underscores its effectiveness, particularly for individuals with moderate to severe traumatic brain injury (TBI).

- 1) Clinical Evidence Supporting Post-Acute Inpatient Neurorehabilitation
- Functional Improvements: A retrospective study involving 67 individuals with moderate-to-severe TBI demonstrated a mean improvement of 54.19 points on the Functional Independence Measure + Functional Assessment Measure (FIM+FAM) between admission and discharge. Notably, 75% of participants were discharged to the community, highlighting the program's effectiveness in promoting independence.¹
- Efficacy of Interval Rehabilitation Programs: An analysis of 125 patients enrolled in an inpatient interval rehabilitation program (IRP) revealed a significant increase in FIM scores from 33 to 36 points. The study emphasized that even years after severe brain injury, goal-oriented IRPs can lead to improvements in activities of daily living and achievement of specific rehabilitation goals.ⁱⁱ

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- Influence of Length of Stay on Outcomes: A study examining the impact of rehabilitation length-of-stay (LOS) found that patients with moderate to severe disabilities and over one-year post-injury required at least 180 days of rehabilitation to show improvements. This underscores the importance of extended rehabilitation periods for individuals with significant impairments.ⁱⁱⁱ
- Comparison of Rehabilitation Programs: Research comparing intensive residential rehabilitation (IRR) to residential supported living (RSL) programs indicated that participants in the IRR program achieved significantly better outcomes. The study highlighted that IRR programs, which provide intensive, goal-directed therapy, are more effective in improving functional abilities compared to programs focused on maintaining current levels of functioning.
- Sustained Functional Improvements: A study involving 16 TBI patients who participated
 in a comprehensive post-acute rehabilitation program found that improvements in
 disability ratings and cognitive function were maintained over an average follow-up
 period of 5.25 years. Notably, 43.75% of participants returned to employment at levels
 comparable to their pre-injury status, and those employed exhibited continued
 improvements in disability and quality of life measures^v.

Coding Implications

Inpatient stays are revenue code based. CPT or HCPCS codes do not apply.

ICD-10-CM Diagnosis Codes that May Support Coverage Criteriavi

+ Indicates a code requiring an additional character.

ICD-10-CM Code	Description
T36.0+ through T36.5+	Poisoning and toxic effects supported by documentation of
	resulting acquired brain injury.
S0990XA	Unspecified injury of head, initial encounter
S0990XD	Unspecified injury of head, subsequent encounter
S0990XS	Unspecified injury of head, sequela
S028XXA	Fractures of oth skull and facial bones, init for clos fx
S028XXB	Fractures of oth skull and facial bones, init for opn fx
S028XXD	Fracture of oth skull and facial bones, subs for fx w routn
	heal



ICD-10-CM Code	Description
S028XXG	Fracture of oth skull and facial bones, subs for fx w delay
	heal
S028XXK	Fracture of oth skull and facial bones, subs for fx w
	nonunion
S028XXS	Fractures of other specified skull and facial bones, sequela
S0291XA	Unsp fracture of skull, init encntr for closed fracture
S0291XB	Unspecified fracture of skull, init encntr for open fracture
S0291XD	Unsp fracture of skull, subs for fx w routn heal
S0291XG	Unsp fracture of skull, subs for fx w delay heal
S0291XK	Unsp fracture of skull, subs encntr for fracture w nonunion
S0291XS	Unspecified fracture of skull, sequela

ICD-10-CM Diagnosis Codes that Support Coverage Criteria

ICD-10-CM Code	Description
A0101	Typhoid meningitis
A0221	Salmonella meningitis
A066	Amebic brain abscess
A170	Tuberculous meningitis
A1782	Tuberculous meningoencephalitis
A203	Plague meningitis
A2781	Aseptic meningitis in leptospirosis
A3211	Listerial meningitis
A3212	Listerial meningoencephalitis
A390	Meningococcal meningitis
A392	Acute meningococcemia
A393	Chronic meningococcemia
A3981	Meningococcal encephalitis
A4281	Actinomycotic meningitis
A4282	Actinomycotic encephalitis
A5041	Late congenital syphilitic meningitis
A5042	Late congenital syphilitic encephalitis
A5141	Secondary syphilitic meningitis
A5213	Late syphilitic meningitis
A5214	Late syphilitic encephalitis



ICD-10-CM Code	Description
A5481	Gonococcal meningitis
A5482	Gonococcal brain abscess
A6921	Meningitis due to Lyme disease
A811	Subacute sclerosing panencephalitis
A812	Progressive multifocal leukoencephalopathy
A830	Japanese encephalitis
A831	Western equine encephalitis
A832	Eastern equine encephalitis
A833	St Louis encephalitis
A834	Australian encephalitis
A835	California encephalitis
A838	Other mosquito-borne viral encephalitis
A839	Mosquito-borne viral encephalitis, unspecified
A840	Far Eastern tick-borne encephalitis
A841	Central European tick-borne encephalitis
A848	Other tick-borne viral encephalitis
A8489	Other tick-borne viral encephalitis
A849	Tick-borne viral encephalitis, unspecified
A850	Enteroviral encephalitis
A851	Adenoviral encephalitis
A852	Arthropod-borne viral encephalitis, unspecified
A858	Other specified viral encephalitis
A86	Unspecified viral encephalitis
A870	Enteroviral meningitis
A871	Adenoviral meningitis
A872	Lymphocytic choriomeningitis
A878	Other viral meningitis
A879	Viral meningitis, unspecified
A9231	West Nile virus infection with encephalitis
B003	Herpesviral meningitis
B004	Herpesviral encephalitis
B010	Varicella meningitis
B0111	Varicella encephalitis and encephalomyelitis
B020	Zoster encephalitis



ICD-10-CM Code	Description
B021	Zoster meningitis
B050	Measles complicated by encephalitis
B051	Measles complicated by meningitis
B0601	Rubella encephalitis
B0602	Rubella meningitis
B1001	Human herpesvirus 6 encephalitis
B1009	Other human herpesvirus encephalitis
B261	Mumps meningitis
B262	Mumps encephalitis
B2702	Gammaherpesviral mononucleosis with meningitis
B2712	Cytomegaloviral mononucleosis with meningitis
B2782	Other infectious mononucleosis with meningitis
B2792	Infectious mononucleosis, unspecified with meningitis
B375	Candidal meningitis
B384	Coccidioidomycosis meningitis
B4081	Blastomycotic meningoencephalitis
B4281	Cerebral sporotrichosis
B431	Pheomycotic brain abscess
B451	Cerebral cryptococcosis
B461	Rhinocerebral mucormycosis
B500	Plasmodium falciparum malaria with cerebral complications
B5741	Meningitis in Chagas' disease
B5742	Meningoencephalitis in Chagas' disease
B582	Toxoplasma meningoencephalitis
B6011	Meningoencephalitis due to Acanthamoeba (culbertsoni)
B941	Sequelae of viral encephalitis
C700	Malignant neoplasm of cerebral meninges
C701	Malignant neoplasm of spinal meninges
C709	Malignant neoplasm of meninges, unspecified
C710	Malignant neoplasm of cerebrum, except lobes and
	ventricles
C711	Malignant neoplasm of frontal lobe
C712	Malignant neoplasm of temporal lobe
C713	Malignant neoplasm of parietal lobe



ICD-10-CM Code	Description
C714	Malignant neoplasm of occipital lobe
C715	Malignant neoplasm of cerebral ventricle
C716	Malignant neoplasm of cerebellum
C717	Malignant neoplasm of brain stem
C718	Malignant neoplasm of overlapping sites of brain
C719	Malignant neoplasm of brain, unspecified
C751	Malignant neoplasm of pituitary gland
C752	Malignant neoplasm of craniopharyngeal duct
C753	Malignant neoplasm of pineal gland
C7931	Secondary malignant neoplasm of brain
C7932	Secondary malignant neoplasm of cerebral meninges
D320	Benign neoplasm of cerebral meninges
D321	Benign neoplasm of spinal meninges
D329	Benign neoplasm of meninges, unspecified
D330	Benign neoplasm of brain, supratentorial
D331	Benign neoplasm of brain, infratentorial
D332	Benign neoplasm of brain, unspecified
D339	Benign neoplasm of central nervous system, unspecified
D352	Benign neoplasm of pituitary gland
D353	Benign neoplasm of craniopharyngeal duct
D354	Benign neoplasm of pineal gland
D420	Neoplasm of uncertain behavior of cerebral meninges
D429	Neoplasm of uncertain behavior of meninges, unspecified
D430	Neoplasm of uncertain behavior of brain, supratentorial
D431	Neoplasm of uncertain behavior of brain, infratentorial
D432	Neoplasm of uncertain behavior of brain, unspecified
D439	Neoplasm of uncertain behavior of cnsl, unsp
D443	Neoplasm of uncertain behavior of pituitary gland
D444	Neoplasm of uncertain behavior of craniopharyngeal duct
D445	Neoplasm of uncertain behavior of pineal gland
D8681	Sarcoid meningitis
E512	Wernicke's encephalopathy
G000	Hemophilus meningitis
G001	Pneumococcal meningitis
G002	Streptococcal meningitis



ICD-10-CM Code	Description
G003	Staphylococcal meningitis
G008	Other bacterial meningitis
G009	Bacterial meningitis, unspecified
G01	Meningitis in bacterial diseases classified elsewhere
G02	Meningitis in oth infec/parastc diseases classd elswhr
G030	Nonpyogenic meningitis
G031	Chronic meningitis
G032	Benign recurrent meningitis [Mollaret]
G038	Meningitis due to other specified causes
G039	Meningitis, unspecified
G0400	Acute disseminated encephalitis and encephalomyelitis,
	unsp
G0401	Postinfect acute dissem encephalitis and encephalomyelitis
G0402	Postimmun ac dissem encphlts, myelitis and
	encephalomyelitis
G042	Bacterial meningoencephalitis and meningomyelitis, NEC
G0430	Acute necrotizing hemorrhagic encephalopathy, unspecified
G0431	Postinfectious acute necrotizing hemorrhagic
	encephalopathy
G0432	Postimmun acute necrotizing hemorrhagic encephalopathy
G0439	Other acute necrotizing hemorrhagic encephalopathy
G0481	Other encephalitis and encephalomyelitis
G0490	Encephalitis and encephalomyelitis, unspecified
G053	Encephalitis and encephalomyelitis in diseases classd elswhr
G060	Intracranial abscess and granuloma
G062	Extradural and subdural abscess, unspecified
G213	Postencephalitic parkinsonism
G361	Acute and subacute hemorrhagic leukoencephalitis [Hurst]
G910	Communicating hydrocephalus
G911	Obstructive hydrocephalus
G912	(Idiopathic) normal pressure hydrocephalus
G913	Post-traumatic hydrocephalus, unspecified
G914	Hydrocephalus in diseases classified elsewhere
G918	Other hydrocephalus
G919	Hydrocephalus, unspecified
G92	Toxic encephalopathy



ICD-10-CM Code	Description
G928	Other toxic encephalopathy
G929	Unspecified toxic encephalopathy
G930	Cerebral cysts
G931	Anoxic brain damage, not elsewhere classified
G9332	Myalgic encephalomyelitis/chronic fatigue syndrome
G9340	Encephalopathy, unspecified
G9341	Metabolic encephalopathy
G9342	Megalencephalic leukoencephalopathy with subcortical cysts
G9343	Leukoencephalopathy with calcifications and cysts
G9345	Developmental and epileptic encephalopathy
G9349	Other encephalopathy
G936	Cerebral edema
G9612	Meningeal adhesions (cerebral) (spinal)
16000	Ntrm subarach hemorrhage from unsp carotid siphon and bifurc
16001	Ntrm subarach hemor from right carotid siphon and bifurc
16002	Ntrm subarach hemorrhage from left carotid siphon and bifurc
16010	Ntrm subarach hemorrhage from unsp middle cerebral artery
16011	Ntrm subarach hemorrhage from right middle cerebral artery
16012	Ntrm subarach hemorrhage from left middle cerebral artery
1602	Ntrm subarach hemorrhage from anterior communicating artery
16020	Ntrm subarach hemor from unsp anterior communicating artery
16021	Ntrm subarach hemor from right anterior communicating artery
16022	Ntrm subarach hemor from left anterior communicating artery
16030	Ntrm subarach hemor from unsp posterior communicating artery
16031	Ntrm subarach hemor from right post communicating artery
16032	Ntrm subarach hemor from left posterior communicating artery



ICD-10-CM Code	Description
1604	Nontraumatic subarachnoid hemorrhage from basilar artery
16050	Nontraumatic subarachnoid hemorrhage from unsp verteb art
16051	Nontraumatic subarachnoid hemorrhage from r verteb art
16052	Nontraumatic subarachnoid hemorrhage from I verteb art
1606	Nontraumatic subarachnoid hemorrhage from oth intracran art
1607	Nontraumatic subarachnoid hemorrhage from unsp intracran art
1608	Other nontraumatic subarachnoid hemorrhage
1609	Nontraumatic subarachnoid hemorrhage, unspecified
I610	Nontraumatic intcrbl hemorrhage in hemisphere, subcortical
l611	Nontraumatic intcrbl hemorrhage in hemisphere, cortical
1612	Nontraumatic intracerebral hemorrhage in hemisphere, unsp
I613	Nontraumatic intracerebral hemorrhage in brain stem
1614	Nontraumatic intracerebral hemorrhage in cerebellum
I615	Nontraumatic intracerebral hemorrhage, intraventricular
I616	Nontraumatic intracerebral hemorrhage, multiple localized
I618	Other nontraumatic intracerebral hemorrhage
1619	Nontraumatic intracerebral hemorrhage, unspecified
16200	Nontraumatic subdural hemorrhage, unspecified
I6201	Nontraumatic acute subdural hemorrhage
16202	Nontraumatic subacute subdural hemorrhage
16203	Nontraumatic chronic subdural hemorrhage
I621	Nontraumatic extradural hemorrhage
1629	Nontraumatic intracranial hemorrhage, unspecified
16300	Cerebral infarction due to thombos unsp precerebral artery
I63011	Cerebral infarction due to thrombosis of r verteb art
I63012	Cerebral infarction due to thrombosis of I verteb art
I63013	Cerebral infrc due to thrombosis of bilateral verteb art
163019	Cerebral infarction due to thombos unsp vertebral artery
16302	Cerebral infarction due to thrombosis of basilar artery
I63031	Cerebral infrc due to thrombosis of right carotid artery
163032	Cerebral infarction due to thrombosis of left carotid artery



ICD-10-CM Code	Description
163033	Cerebral infrc due to thombos of bilateral carotid arteries
163039	Cerebral infarction due to thrombosis of unsp carotid artery
16309	Cerebral infarction due to thrombosis of precerebral artery
I6310	Cerebral infarction due to embolism of unsp precerb artery
l63111	Cerebral infarction due to embolism of r verteb art
l63112	Cerebral infarction due to embolism of left vertebral artery
163113	Cerebral infarction due to embolism of unsp vertebral artery
163119	Cerebral infarction due to embolism of unsp vertebral artery
16312	Cerebral infarction due to embolism of basilar artery
l63131	Cerebral infarction due to embolism of right carotid artery
163132	Cerebral infarction due to embolism of left carotid artery
163133	Cerebral infrc due to embolism of bilateral carotid arteries
163139	Cerebral infarction due to embolism of unsp carotid artery
16319	Cerebral infarction due to embolism of precerebral artery
16320	Cereb infrc due to unsp occls or stenos of unsp precerb art
163211	Cereb infrc due to unsp occls or stenos of right verteb art
163212	Cereb infrc due to unsp occls or stenosis of left verteb art
163213	Cereb infrc due to unsp occls or stenosis of bi verteb art
163219	Cereb infrc due to unsp occls or stenosis of unsp verteb art
16322	Cerebral infrc due to unsp occls or stenosis of basilar art
163231	Cereb infrc due to unsp occls or stenos of right carotid art
163232	Cereb infrc due to unsp occls or stenos of left carotid art
163233	Cereb infrc due to unsp occls or stenosis of bi carotid art
163239	Cereb infrc due to unsp occls or stenos of unsp crtd artery
16329	Cerebral infrc due to unsp occls or stenosis of precerb art
16330	Cerebral infarction due to thombos unsp cerebral artery
163311	Cereb infrc due to thombos of right middle cerebral artery
163312	Cerebral infrc due to thombos of left middle cerebral artery
163313	Cerebral infrc due to thombos of bi middle cerebral arteries
163319	Cerebral infrc due to thombos unsp middle cerebral artery
163321	Cerebral infrc due to thombos of right ant cerebral artery
163322	Cerebral infrc due to thombos of left ant cerebral artery
163323	Cerebral infrc due to thombos of bilateral ant cerebral
	arteries
163329	Cerebral infrc due to thombos unsp anterior cerebral artery
163331	Cerebral infrc due to thombos of right post cerebral artery



ICD-10-CM Code	Description
163332	Cerebral infrc due to thombos of left post cerebral artery
163333	Cerebral infrc due to thombos of bi post cerebral arteries
163339	Cerebral infrc due to thombos unsp posterior cerebral artery
163341	Cerebral infrc due to thrombosis of right cereblr artery
163342	Cerebral infarction due to thrombosis of left cereblr artery
163343	Cerebral infrc due to thombos of bilateral cereblr arteries
163349	Cerebral infarction due to thombos unsp cerebellar artery
16339	Cerebral infarction due to thrombosis of oth cerebral artery
16340	Cerebral infarction due to embolism of unsp cerebral artery
163411	Cereb infrc due to embolism of right middle cerebral artery
I63412	Cereb infrc due to embolism of left middle cerebral artery
I63413	Cerebral infrc due to embolism of bi middle cerebral art
I63419	Cereb infrc due to embolism of unsp middle cerebral artery
163421	Cerebral infrc due to embolism of right ant cerebral artery
163422	Cerebral infrc due to embolism of left ant cerebral artery
163423	Cerebral infrc due to embolism of bi ant cerebral arteries
163429	Cerebral infrc due to embolism of unsp ant cerebral artery
163431	Cerebral infrc due to embolism of right post cerebral artery
163432	Cerebral infrc due to embolism of left post cerebral artery
163433	Cerebral infrc due to embolism of bi post cerebral arteries
163439	Cerebral infrc due to embolism of unsp post cerebral artery
163441	Cerebral infarction due to embolism of right cereblr artery
163442	Cerebral infarction due to embolism of left cereblr artery
163443	Cerebral infrc due to embolism of bilateral cereblr arteries
163449	Cerebral infarction due to embolism of unsp cereblr artery
16349	Cerebral infarction due to embolism of other cerebral artery
16350	Cereb infrc due to unsp occls or stenos of unsp cereb artery
I63511	Cereb infrc d/t unsp occls or stenos of right mid cereb art
163512	Cereb infrc d/t unsp occls or stenos of left mid cereb art
163513	Cereb infrc due to unsp occls or stenos of bi mid cereb art
163519	Cereb infrc d/t unsp occls or stenos of unsp mid cereb art
163521	Cereb infrc d/t unsp occls or stenos of right ant cereb art
163522	Cereb infrc d/t unsp occls or stenos of left ant cereb art
163523	Cerebral infrc due to unsp occls or stenos of bi ant cereb art
163529	Cereb infrc d/t unsp occls or stenos of unsp ant cereb art
163531	Cereb infrc d/t unsp occls or stenos of right post cereb art

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ICD-10-CM Code	Description
163532	Cereb infrc d/t unsp occls or stenos of left post cereb art
163533	Cerebral infrc due to unsp occls or stenos of bi post cereb art
163539	Cereb infrc d/t unsp occls or stenos of unsp post cereb art
163541	Cereb infrc due to unsp occls or stenos of right cereblr art
163542	Cereb infrc due to unsp occls or stenos of left cereblr art
163543	Cereb infrc due to unsp occls or stenosis of bi cereblr art
163549	Cereb infrc due to unsp occls or stenos of unsp cereblr art
16359	Cereb infrc due to unsp occls or stenosis of cerebral artery
1636	Cerebral infrc due to cerebral venous thombos, nonpyogenic
1638	Other cerebral infarction
I6381	Other cereb infrc due to occls or stenosis of small artery
16389	Other cerebral infarction
1639	Cerebral infarction, unspecified
I6501	Occlusion and stenosis of right vertebral artery
16502	Occlusion and stenosis of left vertebral artery
16503	Occlusion and stenosis of bilateral vertebral arteries
16509	Occlusion and stenosis of unspecified vertebral artery
I651	Occlusion and stenosis of basilar artery
l6521	Occlusion and stenosis of right carotid artery
16522	Occlusion and stenosis of left carotid artery
16523	Occlusion and stenosis of bilateral carotid arteries
16529	Occlusion and stenosis of unspecified carotid artery
1658	Occlusion and stenosis of other precerebral arteries
1659	Occlusion and stenosis of unspecified precerebral artery
16601	Occlusion and stenosis of right middle cerebral artery
16602	Occlusion and stenosis of left middle cerebral artery
16603	Occlusion and stenosis of bilateral middle cerebral arteries
16609	Occlusion and stenosis of unspecified middle cerebral artery
I6611	Occlusion and stenosis of right anterior cerebral artery
16612	Occlusion and stenosis of left anterior cerebral artery
16613	Occlusion and stenosis of bi anterior cerebral arteries
16619	Occlusion and stenosis of unsp anterior cerebral artery
16621	Occlusion and stenosis of right posterior cerebral artery
16622	Occlusion and stenosis of left posterior cerebral artery
16623	Occlusion and stenosis of bi posterior cerebral arteries



ICD-10-CM Code	Description
16629	Occlusion and stenosis of unsp posterior cerebral artery
1663	Occlusion and stenosis of cerebellar arteries
1668	Occlusion and stenosis of other cerebral arteries
1669	Occlusion and stenosis of unspecified cerebral artery
1670	Dissection of cerebral arteries, nonruptured
1671	Cerebral aneurysm, nonruptured
1672	Cerebral atherosclerosis
1673	Progressive vascular leukoencephalopathy
1674	Hypertensive encephalopathy
1675	Moyamoya disease
1676	Nonpyogenic thrombosis of intracranial venous system
1677	Cerebral arteritis, not elsewhere classified
16781	Acute cerebrovascular insufficiency
16782	Cerebral ischemia
16783	Posterior reversible encephalopathy syndrome
167841	Reversible cerebrovascular vasoconstriction syndrome
167848	Other cerebrovascular vasospasm and vasoconstriction
167850	Cereb autosom dom artopath w subcort infarcts &
	leukoenceph
167858	Other hereditary cerebrovascular disease
16789	Other cerebrovascular disease
1679	Cerebrovascular disease, unspecified
1680	Cerebral amyloid angiopathy
1682	Cerebral arteritis in other diseases classified elsewhere
1688	Oth cerebrovascular disorders in diseases classd elswhr
16900	Unspecified sequelae of nontraumatic subarachnoid
	hemorrhage
16901	Cognitive deficits following ntrm subarachnoid hemorrhage
169010	Attn and concentration deficit following ntrm subarach
	hemor
169011	Memory deficit following ntrm subarachnoid hemorrhage
169012	Vis def/sptl nglct following ntrm subarachnoid hemorrhage
169013	Psychomotor deficit following ntrm subarachnoid
	hemorrhage
169014	Fntl lb and exec fcn def following ntrm subarach
	hemorrhage



ICD-10-CM Code	Description
169015	Cognitive social or emo def following ntrm subarach hemor
169018	Other symp and signs w cogn fnctns fol ntrm subarach
	hemor
169019	Unsp symp and signs w cogn fnctns fol ntrm subarach
	hemor
169020	Aphasia following nontraumatic subarachnoid hemorrhage
169021	Dysphasia following nontraumatic subarachnoid
	hemorrhage
169022	Dysarthria following nontraumatic subarachnoid
	hemorrhage
169023	Fluency disorder following ntrm subarachnoid hemorrhage
169028	Oth speech/lang deficits following ntrm subarach
	hemorrhage
169031	Monoplg upr lmb fol ntrm subarach hemor aff right dom
	side
169032	Monoplg upr lmb fol ntrm subarach hemor aff left dom side
169033	Monoplg upr lmb fol ntrm subarach hemor aff r nondom
	side
169034	Monoplg upr lmb fol ntrm subarach hemor aff left nondom
100000	side
169039	Monoplg upr Imb following ntrm subarach hemor aff unsp
100041	side
169041	Monoplg low lmb fol ntrm subarach hemor aff right dom side
169042	Monoplg low lmb fol ntrm subarach hemor aff left dom side
169042	Monopig low limb for firm subarach hemor aff r nondom
109045	side
169044	Monoplg low lmb fol ntrm subarach hemor aff left nondom
103044	side
169049	Monoplg low Imb following ntrm subarach hemor aff unsp
103013	side
169051	Hemiplga fol ntrm subarach hemor aff right dominant side
169052	Hemiplga fol ntrm subarach hemor aff left dominant side
169053	Hemiplga following ntrm subarach hemor aff right nondom
	side
169054	Hemiplga following ntrm subarach hemor aff left nondom
	side



ICD-10-CM Code	Description
169059	Hemiplga following ntrm subarach hemor affecting unsp
	side
169061	Oth parlyt synd fol ntrm subarach hemor aff right dom side
169062	Oth parlyt synd fol ntrm subarach hemor aff left dom side
169063	Oth parlyt synd fol ntrm subarach hemor aff r nondom side
169064	Oth parlyt synd fol ntrm subarach hemor aff left nondom
	side
169065	Oth paralytic syndrome following ntrm subarach hemor, bi
169069	Oth paralytic syndrome fol ntrm subarach hemor aff unsp
	side
169090	Apraxia following nontraumatic subarachnoid hemorrhage
169091	Dysphagia following nontraumatic subarachnoid
	hemorrhage
169092	Facial weakness following ntrm subarachnoid hemorrhage
169093	Ataxia following nontraumatic subarachnoid hemorrhage
169098	Oth sequelae following nontraumatic subarachnoid
	hemorrhage
16910	Unsp sequelae of nontraumatic intracerebral hemorrhage
16911	Cognitive deficits following nontraumatic intcrbl
	hemorrhage
169110	Attn and concentration deficit following ntrm intcrbl hemor
169111	Memory deficit following nontraumatic intcrbl hemorrhage
169112	Vis def/sptl nglct following nontraumatic intcrbl hemorrhage
169113	Psychomotor deficit following ntrm intcrbl hemorrhage
169114	Fntl lb and exec fcn def following ntrm intcrbl hemorrhage
169115	Cognitive social or emo def following ntrm intcrbl hemor
169118	Other symp and signs w cogn fnctns fol ntrm intcrbl hemor
169119	Unsp symptoms and signs w cogn fnctns fol ntrm intcrbl
	hemor
169120	Aphasia following nontraumatic intracerebral hemorrhage
169121	Dysphasia following nontraumatic intracerebral hemorrhage
169122	Dysarthria following nontraumatic intracerebral
	hemorrhage
169123	Fluency disorder following nontraumatic intcrbl hemorrhage
169128	Oth speech/lang deficits following ntrm intcrbl hemorrhage
169131	Monoplg upr lmb fol ntrm intcrbl hemor aff right dom side



ICD-10-CM Code	Description
169132	Monoplg upr lmb fol ntrm intcrbl hemor aff left dom side
169133	Monoplg upr lmb fol ntrm intcrbl hemor aff right nondom side
169134	
169134	Monoplg upr Imb fol ntrm intcrbl hemor aff left nondom side
160130	Monoplg upr Imb following ntrm intcrbl hemor aff unsp side
169139	
169141	Monoplg low lmb fol ntrm intcrbl hemor aff right dom side
169142	Monoplg low lmb fol ntrm intcrbl hemor aff left dom side
169143	Monoplg low lmb fol ntrm intcrbl hemor aff right nondom
1504.44	side
169144	Monoplg low lmb fol ntrm intcrbl hemor aff left nondom
1604.40	side
169149	Monoplg low lmb following ntrm intcrbl hemor aff unsp side
169151	Hemiplga fol ntrm intcrbl hemor aff right dominant side
169152	Hemiplga following ntrm intcrbl hemor aff left dominant
	side
169153	Hemiplga following ntrm intcrbl hemor aff right nondom
150151	side
169154	Hemiplga following ntrm intcrbl hemor aff left nondom side
169159	Hemiplga following ntrm intcrbl hemor affecting unsp side
169161	Oth parlyt synd fol ntrm intcrbl hemor aff right dom side
169162	Oth parlyt syndrome fol ntrm intcrbl hemor aff left dom side
169163	Oth parlyt synd fol ntrm intcrbl hemor aff right nondom side
169164	Oth parlyt synd fol ntrm intcrbl hemor aff left nondom side
169165	Oth paralytic syndrome following ntrm intcrbl hemor, bi
169169	Oth paralytic syndrome fol ntrm intcrbl hemor aff unsp side
169190	Apraxia following nontraumatic intracerebral hemorrhage
169191	Dysphagia following nontraumatic intracerebral hemorrhage
169192	Facial weakness following nontraumatic intcrbl hemorrhage
169193	Ataxia following nontraumatic intracerebral hemorrhage
169198	Other sequelae of nontraumatic intracerebral hemorrhage
16920	Unsp sequelae of other nontraumatic intracranial
	hemorrhage
16921	Cognitive deficits following oth ntrm intern hemorrhage
169210	Attn and concentration deficit fol other ntrm intern hemor
169211	Memory deficit following other ntrm intern hemorrhage



ICD-10-CM Code	Description
169212	Vis def/sptl nglct following other ntrm intcrn hemorrhage
169213	Psychomotor deficit following other ntrm intcrn
	hemorrhage
169214	Fntl lb and exec fcn def following other ntrm intcrn hemor
169215	Cognitive social or emo def fol other ntrm intcrn hemor
169218	Oth symp and signs w cogn fnctns fol other ntrm intcrn
	hemor
169219	Unsp symp and signs w cogn fnctns fol oth ntrm intcrn
	hemor
169220	Aphasia following other nontraumatic intracranial
	hemorrhage
169221	Dysphasia following oth nontraumatic intracranial
	hemorrhage
169222	Dysarthria following oth nontraumatic intern hemorrhage
169223	Fluency disorder following oth ntrm intern hemorrhage
169228	Oth speech/lang deficits following oth ntrm intern hemor
169231	Monoplg upr lmb fol oth ntrm intcrn hemor aff right dom
	side
169232	Monoplg upr lmb fol oth ntrm intcrn hemor aff left dom side
169233	Monoplg upr lmb fol oth ntrm intcrn hemor aff r nondom
	side
169234	Monoplg upr lmb fol oth ntrm intcrn hemor aff l nondom
	side
169239	Monoplg upr lmb fol oth ntrm intcrn hemor aff unsp side
169241	Monoplg low lmb fol oth ntrm intcrn hemor aff right dom
	side
169242	Monoplg low lmb fol oth ntrm intcrn hemor aff left dom side
169243	Monoplg low lmb fol oth ntrm intcrn hemor aff r nondom
	side
169244	Monoplg low lmb fol oth ntrm intcrn hemor aff I nondom
	side
169249	Monoplg low lmb fol oth ntrm intcrn hemor aff unsp side
169251	Hemiplga fol oth ntrm intcrn hemor aff right dominant side
169252	Hemiplga fol oth ntrm intcrn hemor aff left dominant side
169253	Hemiplga fol oth ntrm intcrn hemor aff right nondom side
169254	Hemiplga fol oth ntrm intcrn hemor aff left nondom side



ICD 40 CM Cada	Description
ICD-10-CM Code	Description
169259	Hemiplga following oth ntrm intern hemor affecting unsp
150054	side
169261	Oth parlyt synd fol oth ntrm intcrn hemor aff right dom side
169262	Oth parlyt synd fol oth ntrm intcrn hemor aff left dom side
169263	Oth parlyt synd fol oth ntrm intcrn hemor aff r nondom side
169264	Oth parlyt synd fol oth ntrm intcrn hemor aff I nondom side
169265	Oth paralytic syndrome following oth ntrm intern hemor, bi
169269	Oth parlyt syndrome fol oth ntrm intcrn hemor aff unsp side
169290	Apraxia following other nontraumatic intracranial
	hemorrhage
169291	Dysphagia following oth nontraumatic intracranial
	hemorrhage
169292	Facial weakness following oth nontraumatic intern
	hemorrhage
169293	Ataxia following other nontraumatic intracranial
	hemorrhage
169298	Other sequelae of other nontraumatic intracranial
	hemorrhage
16930	Unspecified sequelae of cerebral infarction
16931	Cognitive deficits following cerebral infarction
169310	Attention and concentration deficit following cerebral infrc
169311	Memory deficit following cerebral infarction
169312	Vis def/sptl nglct following cerebral infarction
169313	Psychomotor deficit following cerebral infarction
169314	Frontal lobe and exec fcn def following cerebral infarction
169315	Cognitive social or emo def following cerebral infarction
169318	Other symptoms and signs w cogn fnctns fol cerebral infrc
169319	Unsp symptoms and signs w cogn fnctns fol cerebral infrc
169320	Aphasia following cerebral infarction
169321	Dysphasia following cerebral infarction
169322	Dysarthria following cerebral infarction
169323	Fluency disorder following cerebral infarction
169328	Oth speech/lang deficits following cerebral infarction
169331	Monoplg upr Imb fol cerebral infrc aff right dominant side
169332	Monoplg upr Imb fol cerebral infrc aff left dominant side
169333	Monoplg upr lmb fol cerebral infrc aff right nondom side



ICD-10-CM Code	Description
169334	Monoplg upr Imb fol cerebral infrc aff left nondom side
169339	Monoplg upr Imb following cerebral infrc affecting unsp side
169341	Monoplg low lmb fol cerebral infrc aff right dominant side
169342	Monoplg low lmb fol cerebral infrc aff left dominant side
169343	Monoplg low lmb fol cerebral infrc aff right nondom side
169344	Monoplg low lmb fol cerebral infrc aff left nondom side
169349	Monoplg low lmb following cerebral infrc affecting unsp side
169351	Hemiplga following cerebral infrc aff right dominant side
169352	Hemiplga following cerebral infrc aff left dominant side
169353	Hemiplga following cerebral infrc aff right nondom side
169354	Hemiplga following cerebral infrc affecting left nondom side
169359	Hemiplga following cerebral infarction affecting unsp side
169361	Oth parlyt syndrome fol cereb infrc aff right dominant side
169362	Oth parlyt syndrome fol cereb infrc aff left dominant side
169363	Oth parlyt syndrome fol cerebral infrc aff right nondom side
169364	Oth parlyt syndrome fol cerebral infrc aff left nondom side
169365	Oth paralytic syndrome following cerebral infrc, bilateral
169369	Oth paralytic syndrome fol cerebral infrc aff unsp side
169390	Apraxia following cerebral infarction
169391	Dysphagia following cerebral infarction
169392	Facial weakness following cerebral infarction
169393	Ataxia following cerebral infarction
169398	Other sequelae of cerebral infarction
16980	Unspecified sequelae of other cerebrovascular disease
16981	Cognitive deficits following other cerebrovascular disease
169810	Attn and concentration deficit fol other cerebvasc disease
169811	Memory deficit following other cerebrovascular disease
169812	Vis def/sptl nglct following other cerebrovascular disease
169813	Psychomotor deficit following other cerebrovascular disease
169814	Fntl lb and exec fcn def following other cerebvasc disease
169815	Cognitive social or emo def fol other cerebvasc disease
169818	Other symp and signs w cogn fnctns fol other cerebvasc dis
169819	Unsp symp and signs w cogn fnctns fol other cerebvasc dis
169820	Aphasia following other cerebrovascular disease
169821	Dysphasia following other cerebrovascular disease
169822	Dysarthria following other cerebrovascular disease



ICD-10-CM Code	Description
169823	Fluency disorder following other cerebrovascular disease
169828	Oth speech/lang deficits following oth cerebvasc disease
169831	Monoplg upr lmb fol oth cerebvasc disease aff right dom
	side
169832	Monoplg upr Imb fol oth cerebvasc disease aff left dom side
169833	Monoplg upr Imb fol oth cerebvasc dis aff right nondom side
169834	Monoplg upr Imb fol oth cerebvasc dis aff left nondom side
169839	Monoplg upr Imb fol oth cerebvasc disease aff unsp side
169841	Monoplg low lmb fol oth cerebvasc disease aff right dom
	side
169842	Monoplg low lmb fol oth cerebvasc disease aff left dom side
169843	Monoplg low lmb fol oth cerebvasc dis aff right nondom side
169844	Monoplg low Imb fol oth cerebvasc dis aff left nondom side
169849	Monoplg low lmb fol oth cerebvasc disease aff unsp side
169851	Hemiplga fol oth cerebvasc disease aff right dominant side
169852	Hemiplga fol oth cerebvasc disease aff left dominant side
169853	Hemiplga fol oth cerebvasc disease aff right nondom side
169854	Hemiplga fol oth cerebvasc disease aff left nondom side
169859	Hemiplga following oth cerebvasc disease affecting unsp
	side
169861	Oth parlyt synd fol oth cerebvasc disease aff right dom side
169862	Oth parlyt synd fol oth cerebvasc disease aff left dom side
169863	Oth parlyt synd fol oth cerebvasc dis aff right nondom side
169864	Oth parlyt synd fol oth cerebvasc dis aff left nondom side
169865	Oth paralytic syndrome following oth cerebvasc disease, bi
169869	Oth parlyt syndrome fol oth cerebvasc disease aff unsp side
169890	Apraxia following other cerebrovascular disease
169891	Dysphagia following other cerebrovascular disease
169892	Facial weakness following other cerebrovascular disease
169893	Ataxia following other cerebrovascular disease
169898	Other sequelae of other cerebrovascular disease
16990	Unspecified sequelae of unspecified cerebrovascular disease
16991	Cognitive deficits following unsp cerebrovascular disease
169910	Attn and concentration deficit fol unsp cerebvasc disease
169911	Memory deficit following unspecified cerebrovascular
	disease



ICD-10-CM Code	Description
169912	Vis def/sptl nglct following unspecified cerebvasc disease
169913	Psychomotor deficit following unspecified cerebvasc disease
169914	Fntl lb and exec fcn def following unsp cerebvasc disease
169915	Cognitive social or emo def following unsp cerebvasc
	disease
169918	Other symp and signs w cogn fnctns fol unsp cerebvasc dis
169919	Unsp symp and signs w cogn fnctns fol unsp cerebvasc disease
169920	Aphasia following unspecified cerebrovascular disease
169921	Dysphasia following unspecified cerebrovascular disease
169922	Dysarthria following unspecified cerebrovascular disease
169923	Fluency disorder following unsp cerebrovascular disease
169928	Oth speech/lang deficits following unsp cerebvasc disease
169931	Monoplg upr lmb fol unsp cerebvasc dis aff right dom side
169932	Monoplg upr Imb fol unsp cerebvasc disease aff left dom side
169933	Monoplg upr lmb fol unsp cerebvasc dis aff right nondom side
169934	Monoplg upr Imb fol unsp cerebvasc dis aff left nondom side
169939	Monoplg upr Imb fol unsp cerebvasc disease aff unsp side
169941	Monoplg low lmb fol unsp cerebvasc dis aff right dom side
169942	Monoplg low Imb fol unsp cerebvasc disease aff left dom side
169943	Monoplg low lmb fol unsp cerebvasc dis aff right nondom side
169944	Monoplg low lmb fol unsp cerebvasc dis aff left nondom side
169949	Monoplg low lmb fol unsp cerebvasc disease aff unsp side
169951	Hemiplga fol unsp cerebvasc disease aff right dominant side
169952	Hemiplga fol unsp cerebvasc disease aff left dominant side
169953	Hemiplga fol unsp cerebvasc disease aff right nondom side
169954	Hemiplga fol unsp cerebvasc disease aff left nondom side
169959	Hemiplga following unsp cerebvasc disease aff unsp side
169961	Oth parlyt synd fol unsp cerebvasc dis aff right dom side
169962	Oth parlyt synd fol unsp cerebvasc disease aff left dom side
169963	Oth parlyt synd fol unsp cerebvasc dis aff right nondom side



ICD-10-CM Code	Description
169964	Oth parlyt synd fol unsp cerebvasc dis aff left nondom side
169965	Oth paralytic syndrome following unsp cerebvasc disease, bi
169969	Oth parlyt syndrome fol unsp cerebvasc disease aff unsp
	side
169990	Apraxia following unspecified cerebrovascular disease
169991	Dysphagia following unspecified cerebrovascular disease
169992	Facial weakness following unsp cerebrovascular disease
169993	Ataxia following unspecified cerebrovascular disease
169998	Other sequelae following unspecified cerebrovascular
	disease
J1081	Influenza due to oth ident influenza virus w encephalopathy
J1181	Flu due to unidentified influenza virus w encephalopathy
K7682	Hepatic encephalopathy
P9160	Hypoxic ischemic encephalopathy [HIE], unspecified
P9161	Mild hypoxic ischemic encephalopathy [HIE]
P9162	Moderate hypoxic ischemic encephalopathy [HIE]
P9163	Severe hypoxic ischemic encephalopathy [HIE]
S020XXA	Fracture of vault of skull, init encntr for closed fracture
S020XXB	Fracture of vault of skull, init encntr for open fracture
S020XXD	Fracture of vault of skull, subs for fx w routn heal
S020XXG	Fracture of vault of skull, subs for fx w delay heal
S020XXK	Fracture of vault of skull, subs for fx w nonunion
S020XXS	Fracture of vault of skull, sequela
S02101A	Fracture of base of skull, right side, init
S02101B	Fracture of base of skull, right side, 7thB
S02101D	Fracture of base of skull, right side, 7thD
S02101G	Fracture of base of skull, right side, 7thG
S02101K	Fracture of base of skull, right side, 7thK
S02101S	Fracture of base of skull, right side, sequela
S02102A	Fracture of base of skull, left side, init
S02102B	Fracture of base of skull, left side, 7thB
S02102D	Fracture of base of skull, left side, 7thD
S02102G	Fracture of base of skull, left side, 7thG
S02102K	Fracture of base of skull, left side, 7thK
S02102S	Fracture of base of skull, left side, sequela
S02109A	Fracture of base of skull, unspecified side, init



ICD-10-CM Code	Description
S02109B	Fracture of base of skull, unspecified side, 7thB
S02109D	Fracture of base of skull, unspecified side, 7thD
S02109G	Fracture of base of skull, unspecified side, 7thG
S02109K	Fracture of base of skull, unspecified side, 7thK
S02109S	Fracture of base of skull, unspecified side, sequela
S0210XA	Unsp fracture of base of skull, init for clos fx
S0210XB	Unsp fracture of base of skull, init for opn fx
S0210XD	Unsp fracture of base of skull, subs for fx w routn heal
S0210XG	Unsp fracture of base of skull, subs for fx w delay heal
S0210XK	Unsp fracture of base of skull, subs for fx w nonunion
S0210XS	Unspecified fracture of base of skull, sequela
S02110A	Type I occipital condyle fracture, unsp side, init for clos fx
S02110B	Type I occipital condyle fracture, unsp side, init for opn fx
S02110D	Type I occipital condyle fracture, unsp side, subs for fx w
	routn heal
S02110G	Type I occipital condyle fracture, unsp side, subs for fx w
	delay heal
S02110K	Type I occipital condyle fracture, unsp side, subs for fx w
	nonunion
S02110S	Type I occipital condyle fracture, unsp side, sequela
S02111A	Type II occipital condyle fracture, unsp side, init for clos fx
S02111B	Type II occipital condyle fracture, unsp side, init for opn fx
S02111D	Type II occipital condyle fracture, unsp side, subs for fx w routn heal
S02111G	Type II occipital condyle fracture, unsp side, subs for fx w delay heal
S02111K	Type II occipital condyle fracture, unsp side, subs for fx w
	nonunion
S02111S	Type II occipital condyle fracture, unsp side, sequela
S02112A	Type III occipital condyle fracture, unsp side, init for clos fx
S02112B	Type III occipital condyle fracture, unsp side, init for opn fx
S02112D	Type III occipital condyle fx, unsp side, subs for fx w routn
	heal
S02112G	Type III occipital condyle fx, unsp side, subs for fx w delay
	heal
S02112K	Type III occipital condyle fracture, unsp side, subs for fx w
	nonunion



ICD-10-CM Code	Description
S02112S	Type III occipital condyle fracture, unsp side, sequela
S02113A	Unsp occipital condyle fracture, init for clos fx
S02113B	Unsp occipital condyle fracture, init for opn fx
S02113D	Unsp occipital condyle fracture, subs for fx w routn heal
S02113G	Unsp occipital condyle fracture, subs for fx w delay heal
S02113K	Unsp occipital condyle fracture, subs for fx w nonunion
S02113K	Unspecified occipital condyle fracture, sequela
S02118A	Other fracture of occiput, unsp side, init encntr for closed
302110/1	fracture
S02118B	Other fracture of occiput,unsp side, init encntr for open fracture
S02118D	Oth fracture of occiput, unsp side, subs for fx w routn heal
S02118G	Oth fracture of occiput, unsp side, subs for fx w delay heal
S02118K	Oth fracture of occiput, unsp side, subs encntr for fracture w
	nonunion
S02118S	Other fracture of occiput, unsp side, sequela
S02119A	Unsp fracture of occiput, init encntr for closed fracture
S02119B	Unsp fracture of occiput, init encntr for open fracture
S02119D	Unsp fracture of occiput, subs for fx w routn heal
S02119G	Unsp fracture of occiput, subs for fx w delay heal
S02119K	Unsp fracture of occiput, subs for fx w nonunion
S02119S	Unspecified fracture of occiput, sequela
S0211AA	Type I occipital condyle fracture, right side, init
S0211AB	Type I occipital condyle fracture, right side, 7thB
S0211AD	Type I occipital condyle fracture, right side, 7thD
S0211AG	Type I occipital condyle fracture, right side, 7thG
S0211AK	Type I occipital condyle fracture, right side, 7thK
S0211AS	Type I occipital condyle fracture, right side, sequela
S0211BA	Type I occipital condyle fracture, left side, init
S0211BB	Type I occipital condyle fracture, left side, 7thB
S0211BD	Type I occipital condyle fracture, left side, 7thD
S0211BG	Type I occipital condyle fracture, left side, 7thG
S0211BK	Type I occipital condyle fracture, left side, 7thK
S0211BS	Type I occipital condyle fracture, left side, sequela
S0211CA	Type II occipital condyle fracture, right side, init
S0211CB	Type II occipital condyle fracture, right side, 7thB

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ICD-10-CM Code	Description
S0211CD	Type II occipital condyle fracture, right side, 7thD
S0211CG	Type II occipital condyle fracture, right side, 7thG
S0211CK	Type II occipital condyle fracture, right side, 7thK
S0211CS	Type II occipital condyle fracture, right side, sequela
S0211DA	Type II occipital condyle fracture, left side, init
S0211DR	Type II occipital condyle fracture, left side, 7thB
S0211DD	Type II occipital condyle fracture, left side, 7thD
S0211DG	Type II occipital condyle fracture, left side, 7thG
S0211DK	Type II occipital condyle fracture, left side, 7thK
S0211DS	Type II occipital condyle fracture, left side, sequela
S0211EA	Type III occipital condyle fracture, right side, init
S0211EB	Type III occipital condyle fracture, right side, 7thB
S0211ED	Type III occipital condyle fracture, right side, 7thD
S0211EG	Type III occipital condyle fracture, right side, 7thG
S0211EK	Type III occipital condyle fracture, right side, 7thK
S0211ES	Type III occipital condyle fracture, right side, sequela
S0211E3	Type III occipital condyle fracture, left side, init
S0211FB	Type III occipital condyle fracture, left side, 7thB
S0211FD	Type III occipital condyle fracture, left side, 7thD
S0211FG	Type III occipital condyle fracture, left side, 7thG
S0211FK	Type III occipital condyle fracture, left side, 7thK
S0211FS	Type III occipital condyle fracture, left side, sequela
S0211GA	Other fracture of occiput, right side, init
S0211GB	Other fracture of occiput, right side, 7thB
S0211GD	Other fracture of occiput, right side, 7thD
S0211GG	Other fracture of occiput, right side, 7thG
S0211GK	Other fracture of occiput, right side, 7thK
S0211GS	Other fracture of occiput, right side, sequela
S0211HA	Other fracture of occiput, left side, init
S0211HB	Other fracture of occiput, left side, 7thB
S0211HD	Other fracture of occiput, left side, 7thD
S0211HG	Other fracture of occiput, left side, 7thG
S0211HK	Other fracture of occiput, left side, 7thK
S0211HS	Other fracture of occiput, left side, sequela
S02121A	Fracture of orbital roof, right side, init
S02121B	Fracture of orbital roof, right side, 7thB



ICD-10-CM Code	Description
S02121D	Fracture of orbital roof, right side, 7thD
S02121G	Fracture of orbital roof, right side, 7thG
S02121K	Fracture of orbital roof, right side, 7thK
S02121S	Fracture of orbital roof, right side, sequela
S02122A	Fracture of orbital roof, left side, init
S02122B	Fracture of orbital roof, left side, 7thB
S02122D	Fracture of orbital roof, left side, 7thD
S02122G	Fracture of orbital roof, left side, 7thG
S02122K	Fracture of orbital roof, left side, 7thK
S02122S	Fracture of orbital roof, left side, sequela
S02129A	Fracture of orbital roof, unspecified side, init
S02129B	Fracture of orbital roof, unspecified side, 7thB
S02129D	Fracture of orbital roof, unspecified side, 7thD
S02129G	Fracture of orbital roof, unspecified side, 7thG
S02129K	Fracture of orbital roof, unspecified side, 7thK
S02129S	Fracture of orbital roof, unspecified side, sequela
S0219XA	Oth fracture of base of skull, init for clos fx
S0219XB	Oth fracture of base of skull, init encntr for open fracture
S0219XD	Oth fracture of base of skull, subs for fx w routn heal
S0219XG	Oth fracture of base of skull, subs for fx w delay heal
S0219XK	Oth fracture of base of skull, subs for fx w nonunion
S0219XS	Other fracture of base of skull, sequela
S0280XA	Fx oth skull and facial bones, unspecified side, init
S0280XB	Fx oth skull and facial bones, unspecified side, 7thB
S0280XD	Fx oth skull and facial bones, unspecified side, 7thD
S0280XG	Fx oth skull and facial bones, unspecified side, 7thG
S0280XK	Fx oth skull and facial bones, unspecified side, 7thK
S0280XS	Fx oth skull and facial bones, unspecified side, sequela
S0281XA	Fracture of oth skull and facial bones, right side, init
S0281XB	Fracture of oth skull and facial bones, right side, 7thB
S0281XD	Fracture of oth skull and facial bones, right side, 7thD
S0281XG	Fracture of oth skull and facial bones, right side, 7thG
S0281XK	Fracture of oth skull and facial bones, right side, 7thK
S0281XS	Fracture of oth skull and facial bones, right side, sequela
S0282XA	Fracture of oth skull and facial bones, left side, init
S0282XB	Fracture of oth skull and facial bones, left side, 7thB



ICD-10-CM Code	Description
S0282XD	Fracture of oth skull and facial bones, left side, 7thD
S0282XG	Fracture of oth skull and facial bones, left side, 7thG
S0282XK	Fracture of oth skull and facial bones, left side, 7thK
S0282XS	Fracture of oth skull and facial bones, left side, sequela
S060X0A	Concussion without loss of consciousness, initial encounter
S060X0D	Concussion without loss of consciousness, subs encntr
S060X0S	Concussion without loss of consciousness, sequela
S060X1A	Concussion w LOC of 30 minutes or less, init
S060X1D	Concussion w LOC of 30 minutes or less, subs
S060X1S	Concussion w LOC of 30 minutes or less, sequela
S060X2A	Concussion w loss of consciousness of 31-59 min, init
S060X2D	Concussion w loss of consciousness of 31-59 min, subs
S060X2S	Concussion w loss of consciousness of 31-59 min, sequela
S060X3A	Concussion w loss of consciousness of 1-5 hrs 59 min, init
S060X3D	Concussion w loss of consciousness of 1-5 hrs 59 min, subs
S060X3S	Concussion w LOC of 1-5 hrs 59 min, sequela
S060X4A	Concussion w LOC of 6 hours to 24 hours, init
S060X4D	Concussion w LOC of 6 hours to 24 hours, subs
S060X4S	Concussion w LOC of 6 hours to 24 hours, sequela
S060X5A	Concussion w LOC >24 hr w ret consc lev, init
S060X5D	Concussion w LOC >24 hr w ret consc lev, subs
S060X5S	Concussion w LOC >24 hr w ret consc lev, sequela
S060X6A	Concussion w LOC >24 hr w/o ret consc w surv, init
S060X6D	Concussion w LOC >24 hr w/o ret consc w surv, subs
S060X6S	Concussion w LOC >24 hr w/o ret consc w surv, sequela
S060X9A	Concussion w loss of consciousness of unsp duration, init
S060X9D	Concussion w loss of consciousness of unsp duration, subs
S060X9S	Concussion w loss of consciousness of unsp duration,
	sequela
S060XAA	Concussion with LOC status unknown, initial encounter
S060XAD	Concussion with LOC status unknown, subsequent
	encounter
S060XAS	Concussion with LOC status unknown, sequela
S061X0A	Traumatic cerebral edema w/o loss of consciousness, init
S061X0D	Traumatic cerebral edema w/o loss of consciousness, subs



ICD-10-CM Code	Description
S061X0S	Traumatic cerebral edema w/o loss of consciousness,
3001/103	sequela
S061X1A	Traumatic cerebral edema w LOC of 30 minutes or less, init
S061X1D	Traumatic cerebral edema w LOC of 30 minutes or less, subs
S061X1S	Traum cerebral edema w LOC of 30 minutes or less, sequela
S061X2A	Traumatic cerebral edema w LOC of 31-59 min, init
S061X2D	Traumatic cerebral edema w LOC of 31-59 min, subs
S061X2S	Traumatic cerebral edema w LOC of 31-59 min, sequela
S061X3A	Traumatic cerebral edema w LOC of 1-5 hrs 59 min, init
S061X3D	Traumatic cerebral edema w LOC of 1-5 hrs 59 min, subs
S061X3S	Traumatic cerebral edema w LOC of 1-5 hrs 59 min, sequela
S061X4A	Traumatic cerebral edema w LOC of 6 hours to 24 hours, init
S061X4D	Traumatic cerebral edema w LOC of 6 hours to 24 hours, subs
S061X4S	Traumatic cerebral edema w LOC of 6-24 hrs, sequela
S061X5A	Traumatic cerebral edema w LOC >24 hr w ret consc lev, init
S061X5D	Traumatic cerebral edema w LOC >24 hr w ret consc lev, subs
S061X5S	Traum cerebral edema w LOC >24 hr w ret consc lev,
S061X6A	sequela Traum cerebral edema w LOC >24 hr w/o ret consc w surv,
	init
S061X6D	Traum cerebral edema w LOC >24 hr w/o ret consc w surv, subs
S061X6S	Traum cereb edema w LOC >24 hr w/o ret consc w surv, sequela
S061X9A	Traumatic cerebral edema w LOC of unsp duration, init
S061X9D	Traumatic cerebral edema w LOC of unsp duration, subs
S061X9S	Traumatic cerebral edema w LOC of unsp duration, sequela
S061XAA	Traumatic cerebral edema with LOC status unknown, init
S061XAD	Traumatic cerebral edema with LOC status unknown, subs
S061XAS	Traumatic cerebral edema with LOC status unknown,
	sequela
S062X0A	Diffuse TBI w/o loss of consciousness, init
S062X0D	Diffuse TBI w/o loss of consciousness, subs
S062X0S	Diffuse TBI w/o loss of consciousness, sequela



ICD-10-CM Code	Description
S062X1A	Diffuse TBI w LOC of 30 minutes or less, init
S062X1D	Diffuse TBI w LOC of 30 minutes or less, subs
S062X1S	Diffuse TBI w LOC of 30 minutes or less, sequela
S062X2A	Diffuse TBI w loss of consciousness of 31-59 min, init
S062X2D	Diffuse TBI w loss of consciousness of 31-59 min, subs
S062X2S	Diffuse TBI w loss of consciousness of 31-59 min, sequela
S062X3A	Diffuse TBI w loss of consciousness of 1-5 hrs 59 min, init
S062X3D	Diffuse TBI w loss of consciousness of 1-5 hrs 59 min, subs
S062X3S	Diffuse TBI w LOC of 1-5 hrs 59 min, sequela
S062X4A	Diffuse TBI w LOC of 6 hours to 24 hours, init
S062X4D	Diffuse TBI w LOC of 6 hours to 24 hours, subs
S062X4S	Diffuse TBI w LOC of 6 hours to 24 hours, sequela
S062X5A	Diffuse TBI w LOC >24 hr w return to conscious levels, init
S062X5D	Diffuse TBI w LOC >24 hr w return to conscious levels, subs
S062X5S	Diffuse TBI w LOC >24 hr w return to consc levels, sequela
S062X6A	Diffuse TBI w LOC >24 hr w/o ret consc w surv, init
S062X6D	Diffuse TBI w LOC >24 hr w/o ret consc w surv, subs
S062X6S	Diffuse TBI w LOC >24 hr w/o ret consc w surv, sequela
S062X9A	Diffuse TBI w loss of consciousness of unsp duration, init
S062X9D	Diffuse TBI w loss of consciousness of unsp duration, subs
S062X9S	Diffuse TBI w LOC of unsp duration, sequela
S062XAA	Diffuse TBI with LOC status unknown, initial encounter
S062XAD	Diffuse TBI with LOC status unknown, subsequent encounter
S062XAS	Diffuse TBI with LOC status unknown, sequela
S06300A	Unsp focal TBI w/o loss of consciousness, init
S06300D	Unsp focal TBI w/o loss of consciousness, subs
S06300S	Unsp focal TBI w/o loss of consciousness, sequela
S06301A	Unsp focal TBI w LOC of 30 minutes or less, init
S06301D	Unsp focal TBI w LOC of 30 minutes or less, subs
S06301S	Unsp focal TBI w LOC of 30 minutes or less, sequela
S06302A	Unsp focal TBI w loss of consciousness of 31-59 min, init
S06302D	Unsp focal TBI w loss of consciousness of 31-59 min, subs
S06302S	Unsp focal TBI w loss of consciousness of 31-59 min, sequela
S06303A	Unsp focal TBI w LOC of 1-5 hrs 59 min, init
S06303D	Unsp focal TBI w LOC of 1-5 hrs 59 min, subs
S06303S	Unsp focal TBI w LOC of 1-5 hrs 59 min, sequela



ICD-10-CM Code	Description
S06304A	Unsp focal TBI w LOC of 6 hours to 24 hours, init
S06304D	Unsp focal TBI w LOC of 6 hours to 24 hours, subs
S06304S	Unsp focal TBI w LOC of 6 hours to 24 hours, sequela
S06305A	Unsp focal TBI w LOC >24 hr w ret consc lev, init
S06305D	Unsp focal TBI w LOC >24 hr w ret consc lev, subs
S06305S	Unsp focal TBI w LOC >24 hr w ret consc lev, sequela
S06306A	Unsp focal TBI w LOC >24 hr w/o ret consc w surv, init
S06306D	Unsp focal TBI w LOC >24 hr w/o ret consc w surv, subs
S06306S	Unsp focal TBI w LOC >24 hr w/o ret consc w surv, sequela
S06309A	Unsp focal TBI w LOC of unsp duration, init
S06309D	Unsp focal TBI w LOC of unsp duration, subs
S06309S	Unsp focal TBI w LOC of unsp duration, sequela
S0630AA	Unspecified focal TBI with LOC status unknown, init
S0630AD	Unspecified focal TBI with LOC status unknown, subs
S0630AS	Unspecified focal TBI with LOC status unknown, sequela
S06310A	Contus/lac right cerebrum w/o loss of consciousness, init
S06310D	Contus/lac right cerebrum w/o loss of consciousness, subs
S06310S	Contus/lac right cerebrum w/o loss of consciousness,
COC244 A	sequela
S06311A	Contus/lac right cerebrum w LOC of 30 minutes or less, init
S06311D	Contus/lac right cerebrum w LOC of 30 minutes or less, subs
S06311S	Contus/lac r cereb w LOC of 30 minutes or less, sequela
S06312A	Contus/lac right cerebrum w LOC of 31-59 min, init
S06312D	Contus/lac right cerebrum w LOC of 31-59 min, subs
S06312S	Contus/lac right cerebrum w LOC of 31-59 min, sequela
S06313A	Contus/lac right cerebrum w LOC of 1-5 hrs 59 min, init
S06313D	Contus/lac right cerebrum w LOC of 1-5 hrs 59 min, subs
S06313S	Contus/lac right cerebrum w LOC of 1-5 hrs 59 min, sequela
S06314A	Contus/lac right cerebrum w LOC of 6 hours to 24 hours, init
S06314D	Contus/lac right cerebrum w LOC of 6 hours to 24 hours, subs
S06314S	Contus/lac right cerebrum w LOC of 6-24 hrs, sequela
S06315A	Contus/lac right cerebrum w LOC >24 hr w ret consc lev, init
S06315D	Contus/lac right cerebrum w LOC >24 hr w ret consc lev, subs
S06315S	Contus/lac r cereb w LOC >24 hr w ret consc lev, sequela



ICD-10-CM Code	Description
S06316A	Contus/lac r cereb w LOC >24 hr w/o ret consc w surv, init
S06316D	Contus/lac r cereb w LOC >24 hr w/o ret consc w surv, subs
S06316S	Contus/lac r cereb w LOC >24 hr w/o ret consc w surv, sqla
S06319A	Contus/lac right cerebrum w LOC of unsp duration, init
S06319D	Contus/lac right cerebrum w LOC of unsp duration, subs
S06319S	Contus/lac right cerebrum w LOC of unsp duration, sequela
S0631AA	Contus/lac right cerebrum with LOC status unknown, init
S0631AD	Contus/lac right cerebrum with LOC status unknown, subs
S0631AS	Contus/lac right cerebrum with LOC status unknown,
	sequela
S06320A	Contus/lac left cerebrum w/o loss of consciousness, init
S06320D	Contus/lac left cerebrum w/o loss of consciousness, subs
S06320S	Contus/lac left cerebrum w/o loss of consciousness, sequela
S06321A	Contus/lac left cerebrum w LOC of 30 minutes or less, init
S06321D	Contus/lac left cerebrum w LOC of 30 minutes or less, subs
S06321S	Contus/lac I cereb w LOC of 30 minutes or less, sequela
S06322A	Contus/lac left cerebrum w LOC of 31-59 min, init
S06322D	Contus/lac left cerebrum w LOC of 31-59 min, subs
S06322S	Contus/lac left cerebrum w LOC of 31-59 min, sequela
S06323A	Contus/lac left cerebrum w LOC of 1-5 hrs 59 min, init
S06323D	Contus/lac left cerebrum w LOC of 1-5 hrs 59 min, subs
S06323S	Contus/lac left cerebrum w LOC of 1-5 hrs 59 min, sequela
S06324A	Contus/lac left cerebrum w LOC of 6 hours to 24 hours, init
S06324D	Contus/lac left cerebrum w LOC of 6 hours to 24 hours, subs
S06324S	Contus/lac left cerebrum w LOC of 6-24 hrs, sequela
S06325A	Contus/lac left cerebrum w LOC >24 hr w ret consc lev, init
S06325D	Contus/lac left cerebrum w LOC >24 hr w ret consc lev, subs
S06325S	Contus/lac I cereb w LOC >24 hr w ret consc lev, sequela
S06326A	Contus/lac I cereb w LOC >24 hr w/o ret consc w surv, init
S06326D	Contus/lac I cereb w LOC >24 hr w/o ret consc w surv, subs
S06326S	Contus/lac I cereb w LOC >24 hr w/o ret consc w surv, sqla
S06329A	Contus/lac left cerebrum w LOC of unsp duration, init
S06329D	Contus/lac left cerebrum w LOC of unsp duration, subs
S06329S	Contus/lac left cerebrum w LOC of unsp duration, sequela
S0632AA	Contus/lac left cerebrum with LOC status unknown, init
S0632AD	Contus/lac left cerebrum with LOC status unknown, subs



ICD-10-CM Code	Description
S0632AS	Contus/lac left cerebrum with LOC status unknown, sequela
S06330A	Contus/lac cereb, w/o loss of consciousness, init
S06330D	Contus/lac cereb, w/o loss of consciousness, subs
S06330S	Contus/lac cereb, w/o loss of consciousness, sequela
S06331A	Contus/lac cereb, w LOC of 30 minutes or less, init
S06331D	Contus/lac cereb, w LOC of 30 minutes or less, subs
S06331S	Contus/lac cereb, w LOC of 30 minutes or less, sequela
S06332A	Contus/lac cereb, w loss of consciousness of 31-59 min, init
S06332D	Contus/lac cereb, w loss of consciousness of 31-59 min, subs
S06332S	Contus/lac cereb, w LOC of 31-59 min, sequela
S06333A	Contus/lac cereb, w LOC of 1-5 hrs 59 min, init
S06333D	Contus/lac cereb, w LOC of 1-5 hrs 59 min, subs
S06333S	Contus/lac cereb, w LOC of 1-5 hrs 59 min, sequela
S06334A	Contus/lac cereb, w LOC of 6 hours to 24 hours, init
S06334D	Contus/lac cereb, w LOC of 6 hours to 24 hours, subs
S06334S	Contus/lac cereb, w LOC of 6 hours to 24 hours, sequela
S06335A	Contus/lac cereb, w LOC >24 hr w ret consc lev, init
S06335D	Contus/lac cereb, w LOC >24 hr w ret consc lev, subs
S06335S	Contus/lac cereb, w LOC >24 hr w ret consc lev, sequela
S06336A	Contus/lac cereb, w LOC >24 hr w/o ret consc w surv, init
S06336D	Contus/lac cereb, w LOC >24 hr w/o ret consc w surv, subs
S06336S	Contus/lac cereb, w LOC >24 hr w/o ret consc w surv,
	sequela
S06339A	Contus/lac cereb, w LOC of unsp duration, init
S06339D	Contus/lac cereb, w LOC of unsp duration, subs
S06339S	Contus/lac cereb, w LOC of unsp duration, sequela
S0633AA	Contus/lac cereb, with LOC status unknown, initial
	encounter
S0633AD	Contus/lac cereb, with LOC status unknown, subs
S0633AS	Contus/lac cereb, with LOC status unknown, sequela
S06340A	Traum hemor right cerebrum w/o loss of consciousness, init
S06340D	Traum hemor right cerebrum w/o loss of consciousness,
	subs
S06340S	Traum hemor right cerebrum w/o LOC, sequela
S06341A	Traum hemor right cerebrum w LOC of 30 minutes or less,
	init



ICD-10-CM Code S06341D	Description Traum hemor right cerebrum w LOC of 30 minutes or less,
3003410	Tradiff field right cerebrati w Loc of 30 minutes of less,
	subs
S06341S	Traum hemor r cereb w LOC of 30 minutes or less, sequela
S06342A	Traum hemor right cerebrum w LOC of 31-59 min, init
S06342D	Traum hemor right cerebrum w LOC of 31-59 min, subs
S06342S	Traum hemor right cerebrum w LOC of 31-59 min, sequela
S06343A	Traum hemor right cerebrum w LOC of 1-5 hrs 59 minutes, init
S06343D	Traum hemor right cerebrum w LOC of 1-5 hrs 59 minutes, subs
S06343S	Traum hemor r cereb w LOC of 1-5 hrs 59 minutes, sequela
S06344A	Traum hemor right cerebrum w LOC of 6-24 hrs, init
S06344D	Traum hemor right cerebrum w LOC of 6-24 hrs, subs
S06344S	Traum hemor right cerebrum w LOC of 6-24 hrs, sequela
S06345A	Traum hemor r cereb w LOC >24 hr w ret consc lev, init
S06345D	Traum hemor r cereb w LOC >24 hr w ret consc lev, subs
S06345S	Traum hemor r cereb w LOC >24 hr w ret consc lev, sequela
S06346A	Traum hemor r cereb w LOC >24 hr w/o ret consc w surv, init
S06346D	Traum hemor r cereb w LOC >24 hr w/o ret consc w surv, subs
S06346S	Traum hemor r cereb w LOC >24 hr w/o ret consc w surv, sqla
S06349A	Traum hemor right cerebrum w LOC of unsp duration, init
S06349D	Traum hemor right cerebrum w LOC of unsp duration, subs
S06349S	Traum hemor right cerebrum w LOC of unsp duration, sequela
S0634AA	Traum hemor right cerebrum with LOC status unknown, init
S0634AD	Traum hemor right cerebrum with LOC status unknown, subs
S0634AS	Traum hemor right cerebrum with LOC status unknown, sequela
S06350A	Traum hemor left cerebrum w/o loss of consciousness, init
S06350D	Traum hemor left cerebrum w/o loss of consciousness, subs
S06350S	Traum hemor left cerebrum w/o loss of consciousness, sequela
S06351A	Traum hemor left cerebrum w LOC of 30 minutes or less, init



ICD-10-CM Code	Description
S06351D	Traum hemor left cerebrum w LOC of 30 minutes or less,
	subs
S06351S	Traum hemor I cereb w LOC of 30 minutes or less, sequela
S06352A	Traum hemor left cerebrum w LOC of 31-59 min, init
S06352D	Traum hemor left cerebrum w LOC of 31-59 min, subs
S06352S	Traum hemor left cerebrum w LOC of 31-59 min, sequela
S06353A	Traum hemor left cerebrum w LOC of 1-5 hrs 59 minutes, init
S06353D	Traum hemor left cerebrum w LOC of 1-5 hrs 59 minutes, subs
S06353S	Traum hemor I cereb w LOC of 1-5 hrs 59 minutes, sequela
S06354A	Traum hemor left cerebrum w LOC of 6 hours to 24 hours, init
S06354D	Traum hemor left cerebrum w LOC of 6 hours to 24 hours, subs
S06354S	Traum hemor left cerebrum w LOC of 6-24 hrs, sequela
S06355A	Traum hemor left cerebrum w LOC >24 hr w ret consc lev, init
S06355D	Traum hemor left cerebrum w LOC >24 hr w ret consc lev, subs
S06355S	Traum hemor I cereb w LOC >24 hr w ret consc lev, sequela
S06356A	Traum hemor I cereb w LOC >24 hr w/o ret consc w surv, init
S06356D	Traum hemor I cereb w LOC >24 hr w/o ret consc w surv, subs
S06356S	Traum hemor I cereb w LOC >24 hr w/o ret consc w surv, sqla
S06359A	Traum hemor left cerebrum w LOC of unsp duration, init
S06359D	Traum hemor left cerebrum w LOC of unsp duration, subs
S06359S	Traum hemor left cerebrum w LOC of unsp duration, sequela
S0635AA	Traum hemor left cerebrum with LOC status unknown, init
S0635AD	Traum hemor left cerebrum with LOC status unknown, subs
S0635AS	Traum hemor left cerebrum with LOC status unknown, sequela
S06360A	Traum hemor cereb, w/o loss of consciousness, init
S06360D	Traum hemor cereb, w/o loss of consciousness, subs
S06360S	Traum hemor cereb, w/o loss of consciousness, sequela



ICD-10-CM Code	Description
S06361A	Traum hemor cereb, w LOC of 30 minutes or less, init
S06361D	Traum hemor cereb, w LOC of 30 minutes or less, subs
S06361S	Traum hemor cereb, w LOC of 30 minutes or less, sequela
S06362A	Traum hemor cereb, w LOC of 31-59 min, init
S06362D	Traum hemor cereb, w LOC of 31-59 min, subs
S06362S	Traum hemor cereb, w LOC of 31-59 min, sequela
S06363A	Traum hemor cereb, w LOC of 1-5 hrs 59 minutes, init
S06363D	Traum hemor cereb, w LOC of 1-5 hrs 59 minutes, subs
S06363S	Traum hemor cereb, w LOC of 1-5 hrs 59 minutes, sequela
S06364A	Traum hemor cereb, w LOC of 6 hours to 24 hours, init
S06364D	Traum hemor cereb, w LOC of 6 hours to 24 hours, subs
S06364S	Traum hemor cereb, w LOC of 6 hours to 24 hours, sequela
S06365A	Traum hemor cereb, w LOC >24 hr w ret consc lev, init
S06365D	Traum hemor cereb, w LOC >24 hr w ret consc lev, subs
S06365S	Traum hemor cereb, w LOC >24 hr w ret consc lev, sequela
S06366A	Traum hemor cereb, w LOC >24 hr w/o ret consc w surv, init
S06366D	Traum hemor cereb, w LOC >24 hr w/o ret consc w surv,
	subs
S06366S	Traum hemor cereb, w LOC >24 hr w/o ret consc w surv,
	sqla
S06369A	Traum hemor cereb, w LOC of unsp duration, init
S06369D	Traum hemor cereb, w LOC of unsp duration, subs
S06369S	Traum hemor cereb, w LOC of unsp duration, sequela
S0636AA	Traum hemor cereb, with LOC status unknown, init
S0636AD	Traum hemor cereb, with LOC status unknown, subs
S0636AS	Traum hemor cereb, with LOC status unknown, sequela
S06370A	Contus/lac/hem crblm w/o loss of consciousness, init
S06370D	Contus/lac/hem crblm w/o loss of consciousness, subs
S06370S	Contus/lac/hem crblm w/o loss of consciousness, sequela
S06371A	Contus/lac/hem crblm w LOC of 30 minutes or less, init
S06371D	Contus/lac/hem crblm w LOC of 30 minutes or less, subs
S06371S	Contus/lac/hem crblm w LOC of 30 minutes or less, sequela
S06372A	Contus/lac/hem crblm w LOC of 31-59 min, init
S06372D	Contus/lac/hem crblm w LOC of 31-59 min, subs
S06372S	Contus/lac/hem crblm w LOC of 31-59 min, sequela
S06373A	Contus/lac/hem crblm w LOC of 1-5 hrs 59 min, init



ICD-10-CM Code	Description
S06373D	Contus/lac/hem crblm w LOC of 1-5 hrs 59 min, subs
S06373S	Contus/lac/hem crblm w LOC of 1-5 hrs 59 min, sequela
S06374A	Contus/lac/hem crblm w LOC of 6 hours to 24 hours, init
S06374D	Contus/lac/hem crblm w LOC of 6 hours to 24 hours, subs
S06374S	Contus/lac/hem crblm w LOC of 6 hours to 24 hours,
	sequela
S06375A	Contus/lac/hem crblm w LOC >24 hr w ret consc lev, init
S06375D	Contus/lac/hem crblm w LOC >24 hr w ret consc lev, subs
S06375S	Contus/lac/hem crblm w LOC >24 hr w ret consc lev, sequela
S06376A	Contus/lac/hem crblm w LOC >24 hr w/o ret consc w surv, init
S06376D	Contus/lac/hem crblm w LOC >24 hr w/o ret consc w surv, subs
S06376S	Contus/lac/hem crblm w LOC >24 hr w/o ret consc w surv, sqla
S06379A	Contus/lac/hem crblm w LOC of unsp duration, init
S06379D	Contus/lac/hem crblm w LOC of unsp duration, subs
S06379S	Contus/lac/hem crblm w LOC of unsp duration, sequela
S0637AA	Contus/lac/hem crblm with LOC status unknown, init
S0637AD	Contus/lac/hem crblm with LOC status unknown, subs
S0637AS	Contus/lac/hem crblm with LOC status unknown, sequela
S06380A	Contus/lac/hem brainstem w/o loss of consciousness, init
S06380D	Contus/lac/hem brainstem w/o loss of consciousness, subs
S06380S	Contus/lac/hem brainstem w/o loss of consciousness, sequela
S06381A	Contus/lac/hem brainstem w LOC of 30 minutes or less, init
S06381D	Contus/lac/hem brainstem w LOC of 30 minutes or less, subs
S06381S	Contus/lac/hem brnst w LOC of 30 minutes or less, sequela
S06382A	Contus/lac/hem brainstem w LOC of 31-59 min, init
S06382D	Contus/lac/hem brainstem w LOC of 31-59 min, subs
S06382S	Contus/lac/hem brainstem w LOC of 31-59 min, sequela
S06383A	Contus/lac/hem brainstem w LOC of 1-5 hrs 59 min, init
S06383D	Contus/lac/hem brainstem w LOC of 1-5 hrs 59 min, subs
S06383S	Contus/lac/hem brainstem w LOC of 1-5 hrs 59 min, sequela
S06384A	Contus/lac/hem brainstem w LOC of 6 hours to 24 hours, init



ICD 10 CM Code	Description
ICD-10-CM Code	Description
S06384D	Contus/lac/hem brainstem w LOC of 6 hours to 24 hours,
	subs
S06384S	Contus/lac/hem brainstem w LOC of 6-24 hrs, sequela
S06385A	Contus/lac/hem brainstem w LOC >24 hr w ret consc lev, init
S06385D	Contus/lac/hem brainstem w LOC >24 hr w ret consc lev,
	subs
S06385S	Contus/lac/hem brnst w LOC >24 hr w ret consc lev, sequela
S06386A	Contus/lac/hem brnst w LOC >24 hr w/o ret consc w surv,
	init
S06386D	Contus/lac/hem brnst w LOC >24 hr w/o ret consc w surv,
	subs
S06386S	Contus/lac/hem brnst w LOC >24 hr w/o ret consc w surv,
	sqla
S06389A	Contus/lac/hem brainstem w LOC of unsp duration, init
S06389D	Contus/lac/hem brainstem w LOC of unsp duration, subs
S06389S	Contus/lac/hem brainstem w LOC of unsp duration, sequela
S0638AA	Contus/lac/hem brainstem with LOC status unknown, init
S0638AD	Contus/lac/hem brainstem with LOC status unknown, subs
S0638AS	Contus/lac/hem brainstem with LOC status unknown,
	sequela
S064X0A	Epidural hemorrhage w/o loss of consciousness, init encntr
S064X0D	Epidural hemorrhage w/o loss of consciousness, subs encntr
S064X0S	Epidural hemorrhage without loss of consciousness, sequela
S064X1A	Epidural hemorrhage w LOC of 30 minutes or less, init
S064X1D	Epidural hemorrhage w LOC of 30 minutes or less, subs
S064X1S	Epidural hemorrhage w LOC of 30 minutes or less, sequela
S064X2A	Epidural hemorrhage w LOC of 31-59 min, init
S064X2D	Epidural hemorrhage w LOC of 31-59 min, subs
S064X2S	Epidural hemorrhage w LOC of 31-59 min, sequela
S064X3A	Epidural hemorrhage w LOC of 1-5 hrs 59 min, init
S064X3D	Epidural hemorrhage w LOC of 1-5 hrs 59 min, subs
S064X3S	Epidural hemorrhage w LOC of 1-5 hrs 59 min, sequela
S064X4A	Epidural hemorrhage w LOC of 6 hours to 24 hours, init
S064X4D	Epidural hemorrhage w LOC of 6 hours to 24 hours, subs
S064X4S	Epidural hemorrhage w LOC of 6 hours to 24 hours, sequela
S064X5A	Epidural hemorrhage w LOC >24 hr w ret consc lev, init
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ICD-10-CM Code	Description
S064X5D	Epidural hemorrhage w LOC >24 hr w ret consc lev, subs
S064X5S	Epidural hemorrhage w LOC >24 hr w ret consc lev, sequela
S064X6A	Epidural hemorrhage w LOC >24 hr w/o ret consc w surv, init
S064X6D	Epidural hemorrhage w LOC >24 hr w/o ret consc w surv,
	subs
S064X6S	Epidural hemor w LOC >24 hr w/o ret consc w surv, sequela
S064X9A	Epidural hemorrhage w LOC of unsp duration, init
S064X9D	Epidural hemorrhage w LOC of unsp duration, subs
S064X9S	Epidural hemorrhage w LOC of unsp duration, sequela
S064XAA	Epidural hemorrhage with LOC status unknown, init
S064XAD	Epidural hemorrhage with LOC status unknown, subs
S064XAS	Epidural hemorrhage with LOC status unknown, sequela
S065X0A	Traum subdr hem w/o loss of consciousness, init
S065X0D	Traum subdr hem w/o loss of consciousness, subs
S065X0S	Traum subdr hem w/o loss of consciousness, sequela
S065X1A	Traum subdr hem w LOC of 30 minutes or less, init
S065X1D	Traum subdr hem w LOC of 30 minutes or less, subs
S065X1S	Traum subdr hem w LOC of 30 minutes or less, sequela
S065X2A	Traum subdr hem w loss of consciousness of 31-59 min, init
S065X2D	Traum subdr hem w loss of consciousness of 31-59 min,
	subs
S065X2S	Traum subdr hem w LOC of 31-59 min, sequela
S065X3A	Traum subdr hem w LOC of 1-5 hrs 59 min, init
S065X3D	Traum subdr hem w LOC of 1-5 hrs 59 min, subs
S065X3S	Traum subdr hem w LOC of 1-5 hrs 59 min, sequela
S065X4A	Traum subdr hem w LOC of 6 hours to 24 hours, init
S065X4D	Traum subdr hem w LOC of 6 hours to 24 hours, subs
S065X4S	Traum subdr hem w LOC of 6 hours to 24 hours, sequela
S065X5A	Traum subdr hem w LOC >24 hr w ret consc lev, init
S065X5D	Traum subdr hem w LOC >24 hr w ret consc lev, subs
S065X5S	Traum subdr hem w LOC >24 hr w ret consc lev, sequela
S065X6A	Traum subdr hem w LOC >24 hr w/o ret consc w surv, init
S065X6D	Traum subdr hem w LOC >24 hr w/o ret consc w surv, subs
S065X6S	Traum subdr hem w LOC >24 hr w/o ret consc w surv,
	sequela
S065X9A	Traum subdr hem w LOC of unsp duration, init



ICD-10-CM Code	Description
S065X9D	Traum subdr hem w LOC of unsp duration, subs
S065X9S	Traum subdr hem w LOC of unsp duration, sequela
S065XAA	Traum subdr hem with LOC status unknown, initial
	encounter
S065XAD	Traum subdr hem with LOC status unknown, subs
S065XAS	Traum subdr hem with LOC status unknown, sequela
S066X0A	Traum subrac hem w/o loss of consciousness, init
S066X0D	Traum subrac hem w/o loss of consciousness, subs
S066X0S	Traum subrac hem w/o loss of consciousness, sequela
S066X1A	Traum subrac hem w LOC of 30 minutes or less, init
S066X1D	Traum subrac hem w LOC of 30 minutes or less, subs
S066X1S	Traum subrac hem w LOC of 30 minutes or less, sequela
S066X2A	Traum subrac hem w loss of consciousness of 31-59 min, init
S066X2D	Traum subrac hem w loss of consciousness of 31-59 min,
	subs
S066X2S	Traum subrac hem w LOC of 31-59 min, sequela
S066X3A	Traum subrac hem w LOC of 1-5 hrs 59 min, init
S066X3D	Traum subrac hem w LOC of 1-5 hrs 59 min, subs
S066X3S	Traum subrac hem w LOC of 1-5 hrs 59 min, sequela
S066X4A	Traum subrac hem w LOC of 6 hours to 24 hours, init
S066X4D	Traum subrac hem w LOC of 6 hours to 24 hours, subs
S066X4S	Traum subrac hem w LOC of 6 hours to 24 hours, sequela
S066X5A	Traum subrac hem w LOC >24 hr w ret consc lev, init
S066X5D	Traum subrac hem w LOC >24 hr w ret consc lev, subs
S066X5S	Traum subrac hem w LOC >24 hr w ret consc lev, sequela
S066X6A	Traum subrac hem w LOC >24 hr w/o ret consc w surv, init
S066X6D	Traum subrac hem w LOC >24 hr w/o ret consc w surv, subs
S066X6S	Traum subrac hem w LOC >24 hr w/o ret consc w surv,
	sequela
S066X9A	Traum subrac hem w LOC of unsp duration, init
S066X9D	Traum subrac hem w LOC of unsp duration, subs
S066X9S	Traum subrac hem w LOC of unsp duration, sequela
S066XAA	Traum subrac hem with LOC status unknown, initial
	encounter
S066XAD	Traum subrac hem with LOC status unknown, subs
S066XAS	Traum subrac hem with LOC status unknown, sequela



ICD-10-CM Code	Description
S06810A	Injury of r int carotid, intcr w/o LOC, init
S06810D	Injury of r int carotid, intcr w/o LOC, subs
S06810S	Injury of r int carotid, intcr w/o LOC, sequela
S06811A	Inj r int carotid, intcr w LOC of 30 minutes or less, init
S06811D	Inj r int carotid, intcr w LOC of 30 minutes or less, subs
S06811S	Inj r int crtd, intcr w LOC of 30 minutes or less, sequela
S06812A	Injury of r int carotid, intcr w LOC of 31-59 min, init
S06812D	Injury of r int carotid, intcr w LOC of 31-59 min, subs
S06812S	Injury of r int carotid, intcr w LOC of 31-59 min, sequela
S06813A	Injury of r int carotid, intcr w LOC of 1-5 hrs 59 min, init
S06813D	Injury of r int carotid, intcr w LOC of 1-5 hrs 59 min, subs
S06813S	Inj r int carotid, intcr w LOC of 1-5 hrs 59 min, sequela
S06814A	Injury of r int carotid, intcr w LOC of 6-24 hrs, init
S06814D	Injury of r int carotid, intcr w LOC of 6-24 hrs, subs
S06814S	Injury of r int carotid, intcr w LOC of 6-24 hrs, sequela
S06815A	Inj r int carotid, intcr w LOC >24 hr w ret consc lev, init
S06815D	Inj r int carotid, intcr w LOC >24 hr w ret consc lev, subs
S06815S	Inj r int crtd, intcr w LOC >24 hr w ret consc lev, sequela
S06816A	Inj r int crtd,intcr w LOC >24 hr w/o ret consc w surv, init
S06816D	Inj r int crtd,intcr w LOC >24 hr w/o ret consc w surv, subs
S06816S	Inj r int crtd,intcr w LOC >24 hr w/o ret consc w surv, sqla
S06819A	Injury of r int carotid, intcr w LOC of unsp duration, init
S06819D	Injury of r int carotid, intcr w LOC of unsp duration, subs
S06819S	Inj r int carotid, intcr w LOC of unsp duration, sequela
S0681AA	Inj r int crtd, intcrn portion, NEC LOC status unknown, init
S0681AD	Inj r int crtd, intcrn portion, NEC LOC status unknown, subs
S0681AS	Inj r int crtd, intcrn portion, NEC LOC status unknown, sqla
S06820A	Injury of I int carotid, intcr w/o LOC, init
S06820D	Injury of I int carotid, intcr w/o LOC, subs
S06820S	Injury of I int carotid, intcr w/o LOC, sequela
S06821A	Inj l int carotid, intcr w LOC of 30 minutes or less, init
S06821D	Inj l int carotid, intcr w LOC of 30 minutes or less, subs
S06821S	Inj l int crtd, intcr w LOC of 30 minutes or less, sequela
S06822A	Injury of I int carotid, intcr w LOC of 31-59 min, init
S06822D	Injury of I int carotid, intcr w LOC of 31-59 min, subs
S06822S	Injury of I int carotid, intcr w LOC of 31-59 min, sequela



ICD-10-CM Code	Description
S06823A	Injury of I int carotid, inter w LOC of 1-5 hrs 59 min, init
S06823D	Injury of I int carotid, inter w LOC of 1-5 hrs 59 min, subs
S06823S	Inj I int carotid, intcr w LOC of 1-5 hrs 59 min, sequela
S06824A	Injury of I int carotid, inter w LOC of 6-24 hrs, init
S06824D	Injury of I int carotid, inter w LOC of 6-24 hrs, subs
S06824S	Injury of I int carotid, inter w LOC of 6-24 hrs, sequela
S06825A	Inj I int carotid, inter w LOC >24 hr w ret consc lev, init
S06825D	Inj I int carotid, intcr w LOC >24 hr w ret consc lev, subs
S06825S	Inj l int crtd, intcr w LOC >24 hr w ret consc lev, sequela
S06826A	Inj l int crtd,intcr w LOC >24 hr w/o ret consc w surv, init
S06826D	Inj I int crtd,intcr w LOC >24 hr w/o ret consc w surv, subs
S06826S	Inj l int crtd,intcr w LOC >24 hr w/o ret consc w surv, sqla
S06829A	Injury of I int carotid, inter w LOC of unsp duration, init
S06829D	Injury of I int carotid, inter w LOC of unsp duration, subs
S06829S	Inj I int carotid, inter w LOC of unsp duration, sequela
S0682AA	Inj l int crtd, intcrn portion, NEC LOC status unknown, init
S0682AD	Inj l int crtd, intern portion, NEC LOC status unknown, subs
S0682AS	Inj l int crtd, intcrn portion, NEC LOC status unknown, sqla
S06890A	Intcran inj w/o loss of consciousness, init encntr
S06890D	Intcran inj w/o loss of consciousness, subs encntr
S06890S	Oth intracranial injury w/o loss of consciousness, sequela
S06891A	Intcran inj w LOC of 30 minutes or less, init
S06891D	Intcran inj w LOC of 30 minutes or less, subs
S06891S	Intcran inj w LOC of 30 minutes or less, sequela
S06892A	Intcran inj w loss of consciousness of 31-59 min, init
S06892D	Intcran inj w loss of consciousness of 31-59 min, subs
S06892S	Intcran inj w loss of consciousness of 31-59 min, sequela
S06893A	Intcran inj w loss of consciousness of 1-5 hrs 59 min, init
S06893D	Intcran inj w loss of consciousness of 1-5 hrs 59 min, subs
S06893S	Intcran inj w LOC of 1-5 hrs 59 min, sequela
S06894A	Intcran inj w LOC of 6 hours to 24 hours, init
S06894D	Intcran inj w LOC of 6 hours to 24 hours, subs
S06894S	Intcran inj w LOC of 6 hours to 24 hours, sequela
S06895A	Intcran inj w LOC >24 hr w ret consc lev, init
S06895D	Intcran inj w LOC >24 hr w ret consc lev, subs
S06895S	Intcran inj w LOC >24 hr w ret consc lev, sequela



ICD-10-CM Code	Description
S06896A	Intcran inj w LOC >24 hr w/o ret consc w surv, init
S06896D	Intcran inj w LOC >24 hr w/o ret consc w surv, subs
S06896S	Intcran inj w LOC >24 hr w/o ret consc w surv, sequela
S06899A	Intcran inj w loss of consciousness of unsp duration, init
S06899D	Interan inj w loss of consciousness of unsp duration, subs
S06899S	Intcran inj w LOC of unsp duration, sequela
S0689AA	Intcran inj with LOC status unknown, initial encounter
S0689AD	Intcran inj with LOC status unknown, subsequent encounter
S0689AS	Intcran inj with LOC status unknown, sequela
S068A0A	Primary blast injury of brain, NEC without LOC, init
S068A0D	Primary blast injury of brain, NEC without LOC, subs
S068A0S	Primary blast injury of brain, NEC without LOC, sequela
S068A1A	Primary blast inj brain, NEC LOC of 30 minutes or less, init
S068A1D	Primary blast inj brain, NEC LOC of 30 minutes or less, subs
S068A1S	Primary blast inj brain, NEC LOC of 30 min or less, sequela
S068A2A	Primary blast injury of brain, NEC LOC of 31-59 min, init
S068A2D	Primary blast injury of brain, NEC LOC of 31-59 min, subs
S068A2S	Primary blast injury of brain, NEC LOC of 31-59 min, sequela
S068A3A	Primary blast inj brain, NEC LOC of 1-5 hrs 59 min, init
S068A3D	Primary blast inj brain, NEC LOC of 1-5 hrs 59 min, subs
S068A3S	Primary blast inj brain, NEC LOC of 1-5 hrs 59 min, sequela
S068A4A	Primary blast injury of brain, NEC LOC of 6-24 hrs, init
S068A4D	Primary blast injury of brain, NEC LOC of 6-24 hrs, subs
S068A4S	Primary blast injury of brain, NEC LOC of 6-24 hrs, sequela
S068A5A	Prim blst inj brain, NEC LOC >24 hr with ret consc lev, init
S068A5D	Prim blst inj brain, NEC LOC >24 hr with ret consc lev, subs
S068A5S	Prim blst inj brain, NEC LOC >24 hr with ret consc lev, sqla
S068A6A	Prim blst inj brn, NEC LOC >24 hr w/o ret consc w surv, init
S068A6D	Prim blst inj brn, NEC LOC >24 hr w/o ret consc w surv, subs
S068A6S	Prim blst inj brn, NEC LOC >24 hr w/o ret consc w surv, sqla
S068A9A	Primary blast inj brain, NEC LOC of unsp duration, init
S068A9D	Primary blast inj brain, NEC LOC of unsp duration, subs
S068A9S	Primary blast inj brain, NEC LOC of unsp duration, sequela
S068AAA	Primary blast injury of brain, NEC LOC status unknown, init
S068AAD	Primary blast injury of brain, NEC LOC status unknown, subs
S068AAS	Primary blast inj brain, NEC LOC status unknown, sequela



ICD-10-CM Code	Description
S069X0A	Unsp intracranial injury w/o loss of consciousness, init
S069X0D	Unsp intracranial injury w/o loss of consciousness, subs
S069X0S	Unsp intracranial injury w/o loss of consciousness, sequela
S069X1A	Unsp intracranial injury w LOC of 30 minutes or less, init
S069X1D	Unsp intracranial injury w LOC of 30 minutes or less, subs
S069X1S	Unsp intcrn injury w LOC of 30 minutes or less, sequela
S069X2A	Unsp intracranial injury w LOC of 31-59 min, init
S069X2D	Unsp intracranial injury w LOC of 31-59 min, subs
S069X2S	Unsp intracranial injury w LOC of 31-59 min, sequela
S069X3A	Unsp intracranial injury w LOC of 1-5 hrs 59 min, init
S069X3D	Unsp intracranial injury w LOC of 1-5 hrs 59 min, subs
S069X3S	Unsp intracranial injury w LOC of 1-5 hrs 59 min, sequela
S069X4A	Unsp intracranial injury w LOC of 6 hours to 24 hours, init
S069X4D	Unsp intracranial injury w LOC of 6 hours to 24 hours, subs
S069X4S	Unsp intracranial injury w LOC of 6-24 hrs, sequela
S069X5A	Unsp intracranial injury w LOC >24 hr w ret consc lev, init
S069X5D	Unsp intracranial injury w LOC >24 hr w ret consc lev, subs
S069X5S	Unsp intcrn injury w LOC >24 hr w ret consc lev, sequela
S069X6A	Unsp intcrn injury w LOC >24 hr w/o ret consc w surv, init
S069X6D	Unsp intcrn injury w LOC >24 hr w/o ret consc w surv, subs
S069X6S	Unsp intcrn injury w LOC >24 hr w/o ret consc w surv, sqla
S069X9A	Unsp intracranial injury w LOC of unsp duration, init
S069X9D	Unsp intracranial injury w LOC of unsp duration, subs
S069X9S	Unsp intracranial injury w LOC of unsp duration, sequela
S069XAA	Unspecified intern injury with LOC status unknown, init
S069XAD	Unspecified intern injury with LOC status unknown, subs
S069XAS	Unspecified intern injury with LOC status unknown, sequela
S06A0XA	Traumatic brain compression without herniation, init
S06A0XD	Traumatic brain compression without herniation, subs
S06A0XS	Traumatic brain compression without herniation, sequela
S06A1XA	Traumatic brain compression with herniation, init
S06A1XD	Traumatic brain compression with herniation, subs
S06A1XS	Traumatic brain compression with herniation, sequela
S070XXA	Crushing injury of face, initial encounter
S070XXD	Crushing injury of face, subsequent encounter
S070XXS	Crushing injury of face, sequela



ICD-10-CM Code	Description	
S071XXA	Crushing injury of skull, initial encounter	
S071XXD	Crushing injury of skull, subsequent encounter	
S071XXS	Crushing injury of skull, sequela	
S078XXA	Crushing injury of other parts of head, initial encounter	
S078XXD	Crushing injury of other parts of head, subsequent	
	encounter	
S078XXS	Crushing injury of other parts of head, sequela	
S079XXA	Crushing injury of head, part unspecified, initial encounter	
S079XXD	Crushing injury of head, part unspecified, subs encntr	
S079XXS	Crushing injury of head, part unspecified, sequela	
S080XXA	Avulsion of scalp, initial encounter	
S080XXD	Avulsion of scalp, subsequent encounter	
S080XXS	Avulsion of scalp, sequela	
R41.840	Attention and concentration deficit	
R41.841	Cognitive communication deficit	
R41.842	Visuospatial deficit	
R41.843	Psychomotor deficit	
R41.844	Frontal lobe and executive function deficit	
R41.89	Other signs and symptoms involving cognitive functions and awareness	
G44.301	Posttraumatic headache, unspecified, intractable	



ICD-10-CM Code	Description	
<u>G44309</u>	Posttraumatic headache, unspecified, not intractable	
G44.321	Chronic posttraumatic headache, unspecified, intractable	
G44.329	Chronic posttraumatic headache, unspecified, not intractable	
R42.	Dizziness	
R43.0	Loss of smell (anosmia)	
R43.8	Other disturbance of smell and taste	
R47.82	Fluency disorder conditions classified elsewhere	
R47.81	Slurred speech	
R56.1	Posttraumatic seizures	

Reviews, Revisions, and Approvals	Date	Approval Date
New Policy	6/16/2025	7/11/2025



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Important Reminder

This clinical policy has been developed by appropriately experienced and licensed health care professionals based on a review and consideration of currently available generally accepted standards of medical practice; peer-reviewed medical literature; government agency/program approval status; evidence-based guidelines and positions of leading national health professional organizations; views of physicians practicing in relevant clinical areas affected by this clinical policy; and other available clinical information. The Health Plan makes no representations and accepts no liability with respect to the content of any external information used or relied upon in developing this clinical policy. This clinical policy is consistent with standards of medical



practice current at the time that this clinical policy was approved. "Health Plan" means a health plan that has adopted this clinical policy and that is operated or administered, in whole or in part, by Centene Management Company, LLC, or any of such health plan's affiliates, as applicable.

The purpose of this clinical policy is to provide a guide to medical necessity, which is a component of the guidelines used to assist in making coverage decisions and administering benefits. It does not constitute a contract or guarantee regarding payment or results. Coverage decisions and the administration of benefits are subject to all terms, conditions, exclusions and limitations of the coverage documents (e.g., evidence of coverage, certificate of coverage, policy, contract of insurance, etc.), as well as to state and federal requirements and applicable Health Plan-level administrative policies and procedures.

This clinical policy is effective as of the date determined by the Health Plan. The date of posting may not be the effective date of this clinical policy. This clinical policy may be subject to applicable legal and regulatory requirements relating to provider notification. If there is a discrepancy between the effective date of this clinical policy and any applicable legal or regulatory requirement, the requirements of law and regulation shall govern. The Health Plan retains the right to change, amend or withdraw this clinical policy, and additional clinical policies may be developed and adopted as needed, at any time.

This clinical policy does not constitute medical advice, medical treatment or medical care. It is not intended to dictate to providers how to practice medicine. Providers are expected to exercise professional medical judgment in providing the most appropriate care, and are solely responsible for the medical advice and treatment of members. This clinical policy is not intended to recommend treatment for members. Members should consult with their treating physician in connection with diagnosis and treatment decisions.

Providers referred to in this clinical policy are independent contractors who exercise independent judgment and over whom the Health Plan has no control or right of control. Providers are not agents or employees of the Health Plan.

This clinical policy is the property of the Health Plan. Unauthorized copying, use, and distribution of this clinical policy or any information contained herein are strictly prohibited. Providers, members and their representatives are bound to the terms and conditions expressed herein through the terms of their contracts. Where no such contract exists, providers, members and their representatives agree to be bound by such terms and conditions by providing services to members and/or submitting claims for payment for such services.



Note: For Medicaid members, when state Medicaid coverage provisions conflict with the coverage provisions in this clinical policy, state Medicaid coverage provisions take precedence. Please refer to the state Medicaid manual for any coverage provisions pertaining to this clinical policy.

Note: For Medicare members, to ensure consistency with the Medicare National Coverage Determinations (NCD) and Local Coverage Determinations (LCD), all applicable NCDs, LCDs, and Medicare Coverage Articles should be reviewed <u>prior to</u> applying the criteria set forth in this clinical policy. Refer to the CMS website at http://www.cms.gov for additional information.

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