



Impact of ICD-10 Transition for the Brain Injury (BI) Waiver

What is ICD-10?

- International Classification of Diseases (ICD) is the standard for establishing all diagnoses. Medicaid, like all health care providers, is required by the federal government to transition from using the 9th edition to the new 10th edition of the ICD codes by October 2015.

How will the transition to ICD-10 affect people on the waiver?

- A person on the BI waiver will see little to no change from this transition. At their next annual review, the BI waiver participant will still need a qualifying diagnosis on the Professional Medical Information Page (PMIP). The new ICD-10 codes will be used to establish targeting criteria under broader sets of diagnoses. For example:
 - ICD-10 Code, S06.6x4A = Traumatic subarachnoid hemorrhage with loss of consciousness of 6 hours to 24 hours, initial encounter.
 - This code is under the Subarachnoid and/or intracerebral hemorrhage diagnoses in the list below, therefore meeting waiver targeting criteria.

For persons who would like to access the waiver, you must meet one of the broad diagnoses as part of the targeting criteria. Those diagnoses are listed below for the BI waiver:

- Nonpsychotic mental disorders due to brain damage; or
- Anoxic brain damage; or
- Compression of the brain; or
- Toxic encephalopathy; or
- Subarachnoid and/or intracerebral hemorrhage; or
- Occlusion and stenosis of pre-cerebral arteries; or
- Acute, but ill-defined cerebrovascular disease; or
- Other and ill-defined cerebrovascular disease; or
- Late effects of cerebrovascular disease; or
- Fracture of the skull or face; or

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- Concussion resulting in an ongoing need for assistance with activities of daily living; or
- Cerebral laceration and contusion; or
- Subarachnoid, subdural, and extradural hemorrhage, following injury; or
- Other unspecified intracranial hemorrhage following injury; or
- Intracranial injury; or
- Late effects of musculoskeletal and connective tissue injuries; or
- Late effects of injuries to the nervous system; or
- Unspecified injuries to the head resulting in ongoing need for assistance with activities of daily living.

We encourage everyone to work with their Single Entry Point (SEP) and doctor to ensure that a person's diagnoses meets targeting criteria. If you have any questions about your eligibility, visit www.colorado.gov/hcpf/single-entry-point-agencies to find contact information for a Single Entry Point agency in your region.

To read the complete rule 8.515.3, visit the Department Program Rules website www.colorado.gov/hcpf/department-program-rules-and-regulations.

If you have any questions or concerns regarding this letter, please contact Cassandra Keller at 303-866-5181 or Cassandra.Keller@state.co.us.

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