



H·CUP
HEALTHCARE COST AND UTILIZATION PROJECT

USER GUIDE:

**PROCEDURE CLASSES REFINED FOR ICD-10-PCS,
v2021.2**

Issued March 2021

Agency for Healthcare Research and Quality
Healthcare Cost and Utilization Project (HCUP)

Phone: (866) 290-HCUP (4287)

Email: hcup@ahrq.gov

Website: www.hcup-us.ahrq.gov

TABLE OF CONTENTS

Introduction	1
Description of the Procedure Classes Refined for ICD-10-PCS	3
Identification of Minor Versus Major Procedures.....	3
Identification of Therapeutic versus Diagnostic Procedures.....	3
Using the Procedure CLasses Refined for ICD-10-PCS with the Clinical Classifications Software Refined (CCSR) for ICD-10-PCS	3
Counting Operating Room Procedures Using the CCSR for ICD-10-PCS and Procedure Classes Refined for ICD-10-PCS.....	3
Counting Minor Procedures Using the CCSR for ICD-10-PCS and Procedure Classes Refined for ICD-10-PCS	4
Using the Downloadable Procedure Classes Refined for ICD-10-PCS Files	4
System Requirements	4
Downloadable Files	5
Running the SAS Program to Add Procedure Classes to Data	6
Data Element Required for Input Dataset	8
Representation of ICD-10-PCS Procedure Codes	8
Procedure Class Data Elements in the Output File	9
Appendix A: Background on the Development of the Procedure Classes Refined for ICD-10-PCS	10

ACKNOWLEDGEMENTS

This work was funded by the Agency for Healthcare Research and Quality (AHRQ) under contract HHS-2018-00001-C. AHRQ gratefully acknowledges the contributions of American Health Information Management Association (AHIMA)-certified ICD-10-CM/PCS trainers at the Ohio State University and the technical team at IBM Watson Health. The Healthcare Cost and Utilization Project (HCUP) is a family of healthcare databases and related software tools and products developed through a Federal-State-Industry partnership and sponsored by AHRQ. HCUP would not be possible without the contributions of the following data collection Partners from across the United States:

Alaska Department of Health and Social Services

Alaska State Hospital and Nursing Home Association

Arizona Department of Health Services

Arkansas Department of Health

California Office of Statewide Health Planning and Development

Colorado Hospital Association

Connecticut Hospital Association

Delaware Division of Public Health

District of Columbia Hospital Association

Florida Agency for Health Care Administration

Georgia Hospital Association

Hawaii Laulima Data Alliance

Illinois Department of Public Health

Indiana Hospital Association

Iowa Hospital Association

Kansas Hospital Association

Kentucky Cabinet for Health and Family Services

Louisiana Department of Health

Maine Health Data Organization

Maryland Health Services Cost Review Commission

Massachusetts Center for Health Information and Analysis

Michigan Health & Hospital Association

Minnesota Hospital Association (provides data for Minnesota and North Dakota)

Mississippi State Department of Health

Missouri Hospital Industry Data Institute

Montana Hospital Association

Nebraska Hospital Association

Nevada Department of Health and Human Services

New Hampshire Department of Health & Human Services

New Jersey Department of Health

New Mexico Department of Health

New York State Department of Health

North Carolina Department of Health and Human Services

North Dakota (data provided by the Minnesota Hospital Association)

Ohio Hospital Association

Oklahoma State Department of Health

Oregon Association of Hospitals and Health Systems

Oregon Office of Health Analytics

Pennsylvania Health Care Cost Containment Council

Rhode Island Department of Health

South Carolina Revenue and Fiscal Affairs Office

South Dakota Association of Healthcare Organizations

Tennessee Hospital Association

Texas Department of State Health Services

Utah Department of Health

Vermont Association of Hospitals and Health Systems

Virginia Health Information

Washington State Department of Health

West Virginia Department of Health and Human Resources, West Virginia Health Care Authority

Wisconsin Department of Health Services

Wyoming Hospital Association

WHAT'S NEW IN v2021.2 OF THE PROCEDURE CLASSES REFINED FOR ICD-10-PCS?

- After empirical testing and clinical review, the Procedure Classes Refined for ICD-10-PCS has been transitioned out of beta status starting with v2021.2.
- Added 12 codes related to COVID-19 therapeutics, which became effective August 1, 2020, as well as 21 codes related to administration of COVID-19 vaccines and monoclonal antibody treatments, which became effective January 1, 2021.
- Aligned the identification of major surgeries with the definition of operating room procedures in the Agency for Healthcare Research and Quality (AHRQ) Quality Indicator (QI) software for codes valid from October 2015 through September 2021.¹
 - With the fiscal year (FY) 2021 update to the AHRQ QI software, over 3,000 procedure codes changed procedure class assignment (a list of specific code changes is included in the v2021.2 Change Log, separate document).

¹The AHRQ QI software v2021 is not yet publicly available but is expected to be available in the Spring or Summer of 2021. Information will be available on the [AHRQ Quality Indicator website](#).

INTRODUCTION

This report provides technical documentation for the Healthcare Cost and Utilization Project (HCUP) Procedure Classes Refined for International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS). Starting on October 1, 2015, procedures for hospital inpatient stays in the United States are reported using the ICD-10-PCS coding system. ICD-10-PCS consists of more than 80,000 procedure codes.

The Procedure Classes Refined for ICD-10-PCS facilitates health services research by allowing the researcher to readily determine (1) whether a procedure is diagnostic or therapeutic and (2) whether a procedure is expected to be performed in an operating room. The Procedure Classes Refined for ICD-10-PCS assign all ICD-10-PCS procedure codes to one of four categories:

- Minor Diagnostic—Nonoperating room procedures that are diagnostic (e.g., B244ZZZ, Ultrasonography of Right Heart)
- Minor Therapeutic—Nonoperating room procedures that are therapeutic (e.g., 02HQ33Z, Insertion of Infusion Device into Right Pulmonary Artery, Percutaneous Approach)
- Major Diagnostic—Procedures that are considered operating room procedures that are performed for diagnostic reasons (e.g., 02BV0ZX, Excision of Superior Vena Cava, Open Approach, Diagnostic)
- Major Therapeutic—Procedures that are considered operating room procedures that are performed for therapeutic reasons (e.g., 0210093, Bypass Coronary Artery, One Site from Coronary Artery with Autologous Venous Tissue, Open Approach).

Prior to the availability of ICD-10-PCS-coded data, the ICD-10-PCS codes were categorized into the procedure classes using the General Equivalence Mappings (GEMS) for ICD-9-CM procedures and released as a beta version. Once ICD-10-PCS-coded data became available, the beta version of the Procedure Classes was evaluated using the [HCUP National Inpatient Sample \(NIS\)](#). In addition, there was interest in aligning the identification of major surgeries with the definition of operating room procedures in the [AHRQ Quality Indicators](#).™ These findings led to the development of the Procedure Classes Refined for ICD-10-PCS, which replaces the beta versions of the Procedure Classes for ICD-10-PCS. Background on the development of the Procedure Classes Refined for ICD-10-PCS is provided in [Appendix A](#).

This User Guide describes the Procedure Classes Refined for ICD-10-PCS and the downloadable software and documentation. The Procedure Classes Refined for ICD-10-PCS is updated annually to coincide with fiscal year (FY) updates to the ICD-10-PCS coding system and retains procedure codes valid from the start of ICD-10-PCS in October 2015. For this reason, it is advisable to always use the most recent version of the tool (it is not recommended to use the beta versions of the tool).

The following is a summary of key features and changes between released versions:

- v2021.2 (released March 2021)
 - Transitioned the software out of beta status after empirical testing and clinical review.
 - Added 12 codes related to COVID-19 therapeutics, which became effective August 1, 2020, as well as 21 codes related to administration of COVID-19 vaccines and monoclonal antibody treatments, which became effective January 1, 2021.
 - Aligned the identification of major surgeries with the definition of operating room procedures in the AHRQ QI software for codes valid from October 2015 through September 2021.
 - Includes ICD-10-PCS procedure codes valid for FY 2016 through FY 2021 (from October 2015 through September 2021).
- v2021.1 (beta version; released October 2020)
 - Updated with FY 2021 coding, but did not do a more extensive refinement
 - Aligned the identification of major surgeries with the definition of operating room procedures in the AHRQ QI software v2020 for codes valid from October 2015 through September 2020.²
 - Similar information on FY 2021 codes (October 2020 - September 2021) was unavailable from the QI software, so identification of major surgeries was based on the list of operating room procedures used for the Medicare Severity-Diagnosis Related Groups (MS-DRGs) v38.³
 - Includes ICD-10-PCS procedure codes valid for FY 2016 through FY 2021 (from October 2015 through September 2021).

Files containing the mapping of ICD-10-PCS codes to their corresponding procedure class can be downloaded from the [HCUP User Support \(HCUP-US\)](#) website.⁴

² Information on the list of operating room procedure codes in the AHRQ QI software v2020 is available in Appendix A of the Patient Safety Indicator (PSI) module at https://www.qualityindicators.ahrq.gov/Downloads/Modules/PSI/V2020/TechSpecs/PSI_Appendix_A.pdf. Accessed 10/25/20.

³ Information on the MS-DRG identification of operating room procedures is available in Appendix E of the MS-DRG Definitions Manual for v38 at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/MS-DRG-Classifications-and-Software>. Accessed 10/25/20.

⁴ The HCUP User Support website can be found at www.hcup-us.ahrq.gov/.

DESCRIPTION OF THE PROCEDURE CLASSES REFINED FOR ICD-10-PCS

Identification of Minor Versus Major Procedures

The Procedures Classes Refined for ICD-10-PCS, v2021.2 includes all ICD-10-PCS codes valid from October 1, 2015 through September 30, 2021. The identification of a major surgery is tied to the expectation that the procedure would be performed in an operating room. Procedure codes are identified as major based on the ICD-10-PCS list of operating room procedures included in the [AHRQ QI software](#). The clinical review panel for the AHRQ QI software begins with the latest fiscal year version of the MS-DRGs and does further clinical review to identify major surgeries. There is slight variation between the MS-DRG identification of major surgeries (for v2021.2, 67.8 percent of ICD-10-PCS codes are identified as major operating room procedures in both schemas, 3.7 percent of ICD-10-PCS codes are identified as major only in QI software, 1.6 percent of ICD-10-PCS codes are identified as major only in the MS-DRG grouper, and 26.9 percent of ICD-10-PCS codes are not identified as major operating room procedures in both schemas). Any procedure not identified as major is assigned to be a minor procedure.

Identification of Therapeutic versus Diagnostic Procedures

The identification of diagnostic and therapeutic procedures was determined in part by the taxonomy of the ICD-10-PCS code and, if not identifiable by the taxonomy, was reviewed by ICD-10-PCS clinical coding experts. For example, the following codes are always diagnostic:

- Medical/surgical codes (with a first character of 0) and a seventh character of X
- Administration codes (with a first character of 3) and a seventh character of X.

The taxonomy does not include a clear identification of therapeutic codes.

USING THE PROCEDURE CLASSES REFINED FOR ICD-10-PCS WITH THE CLINICAL CLASSIFICATIONS SOFTWARE REFINED (CCSR) FOR ICD-10-PCS

The Procedure Classes identify individual procedure codes as minor or major, diagnostic or therapeutic procedures. A different HCUP tool, the [Clinical Classifications Software Refined \(CCSR\) for ICD-10-PCS](#) aggregates individual ICD-10-PCS procedure codes into over 320 clinical categories. The CCSR categories capture high-volume procedures and low-volume, but high-impact, procedures (e.g., transplant). The individual ICD-10-PCS codes within each CCSR category are clinically similar but may vary in their procedure class. Used in tandem, these two HCUP tools can facilitate research on inpatient procedures.

Counting Operating Room Procedures Using the CCSR for ICD-10-PCS and Procedure Classes Refined for ICD-10-PCS

Procedures Classes Refined for ICD-10-PCS can be used to identify the surgical ICD-10-PCS codes performed in the operating room (i.e., major diagnostic and therapeutic procedures, values 3 and 4 of the Procedure Classes Refined) and the CCSR for ICD-10-PCS can be used to classify the individual procedure codes into clinical categories. Consider the following example:

- The CCSR for the Incision and Drainage of Musculoskeletal Tissue and Joints (CCSR MST004) includes over 1,900 ICD-10-PCS codes.
 - One-third of the codes are designated as minor therapeutic.
 - Two-thirds of the codes are designated as major therapeutic.
- Using the [HCUP National Inpatient Sample \(NIS\)](#) for 2018, the CCSR MST004 for Incision and Drainage of Musculoskeletal Tissue and Joints would identify about 110,000 inpatient stays in the U.S. for which this type of procedure was a principal or secondary procedure.
- If the analysis was limited to operating room procedures using the Procedure Classes Refined (values 3 and 4), then it would identify about 57,000 inpatient stays in the U.S. in CCSR MST004.

Counting Minor Procedures Using the CCSR for ICD-10-PCS and Procedure Classes Refined for ICD-10-PCS

Some CCSR for ICD-10-PCS categories include only minor procedures (values 1 and 2 of the Procedure Classes Refined). Examples include computerized tomography (CCSR IMG006-IMG007), plain radiology (CCSR IMG009), cardiac stress tests (CCSR MAM004), cardiac monitoring (CCSR MAM008), electrocardiogram (CCSR MAM007).

When examining utilization of minor procedures (and not just those listed above), it should be noted that these types of procedures are often underreported on hospital administrative discharge records for a few reasons:

- Billing for the procedure may have been done by the physician, not the hospital.
- The minor procedure is not expected to affect reimbursement for the inpatient stay and therefore is not coded on the discharge record.
- There may be limited room for reporting procedure codes on the hospital discharge record. Some HCUP Partners include no more than six procedures on the files provided to HCUP.

USING THE DOWNLOADABLE PROCEDURE CLASSES REFINED FOR ICD-10-PCS FILES

System Requirements

Using the Procedure Classes Refined for ICD-10-PCS tool requires a program to decompress or “unzip” files.⁵ Approximately 9.0 megabytes of disk space available on one’s hard drive also will be needed to accommodate all the Procedure Classes Refined for ICD-10-PCS files. Additional space is necessary for saving the Procedure Classes Refined for ICD-10-PCS output files.

⁵ Third-party zip utilities are available from the following reputable vendors on their official websites: ZIP Reader (Windows) (free download offered by PKWARE, Inc.), SecureZIP® for Mac or Windows (free evaluation and licensed/fee software offered by PKWARE, Inc.), WinZip (Windows) (evaluation and fee versions offered by the Corel Corporation), Stuffit Expander® (Mac) (free evaluation and licensed/fee software offered by Smith Micro Software Inc.).

Downloadable Files

The Procedure Classes Refined for ICD-10-PCS zip file contains the following:

1. One translation table in comma separated values (CSV) file format that assigns procedure classes for data sets that contain ICD-10-PCS codes. The procedure classes have the following values:
 - Minor diagnostic (value 1)
 - Minor therapeutic (value 2)
 - Major diagnostic (value 3)
 - Major therapeutic (value 4)
2. SAS program to apply the tool to the user's data
3. Procedure Classes Refined for ICD-10-PCS User Guide (PDF)
4. Change log detailing changes between v2021.2 and v2021.1.

Table 1 includes detail on the names and purposes of each file contained in the Procedure Classes Refined for ICD-10-PCS zip file.

Table 1. Contents of the Procedure Classes Refined for ICD-10-PCS Zip File

File Name	Purpose
PClass_ICD10PCS_vyyyy-r.csv where yyyy represents the fiscal year and r represents a release number within the fiscal year ^a	The CSV mapping file lists all ICD-10-PCS procedure codes along with a description for each code, the procedure class assignment (value 1, 2, 3, or 4), and the description of the procedure class (e.g., major therapeutic). This file can be converted to Excel, where a filter can be applied to examine individual ICD-10-PCS codes and procedure class value.
PClass_ICD10PCS_Mapping_Program_vyyyy-r.sas where yyyy represents fiscal year and r represents a release number within fiscal year ^a	SAS mapping program applies the Procedure Classes Refined for ICD-10-PCS to the user's data.
PC-ICD10PCS-User-Guide-vyyyy-r.pdf where yyyy represents fiscal year and r represents a release number within fiscal year ^a	This document (i.e., User Guide for the Procedure Classes Refined for ICD-10-PCS in PDF format).
PC_ICD10PCSChgLg_vyyyy-vyyyy-r.xlsx	A log (Microsoft® Excel) comparing two versions of the Procedure Classes Refined for ICD-10-PCS tool including a list of changes and assignment of ICD-10-PCS codes to a procedure class value.

Abbreviations: CSV, comma separated values

^a For example, the first mapping file release to include codes valid through fiscal year 2021 is named PClass_ICD10PCS_v2021-1.csv.

Running the SAS Program to Add Procedure Classes to Data

To download, modify, and run the software to apply the Procedure Classes Refined for ICD-10-PCS to an input dataset, follow these steps:

1. Users should download and extract the contents of the zip file containing the Procedure Classes Refined for ICD-10-PCS tool to a saved location on their computer. Files included in the zip file are described in Table 1 and referenced below.
2. Users must set up the SAS program (PClass_ICD10PCS_Mapping_Program_vyyyy-r.sas) to run on their data. They must specify or modify where appropriate:
 - a. Change the paths in the SAS program to point to the computer location(s) of
 - i. The CSV mapping file (PClass_ICD10PCS_vyyyy-r.csv)
 - ii. The input dataset
 - iii. The output dataset
 - b. Set the macro variables in the SAS program to match the data element names and file structure of the input dataset (Table 2).

Table 2. Modifiable Macro Variables and Directory Paths

Description of Macro Variables and Directory Paths	SAS Program Syntax
File Location	
Specify the location of the CSV mapping file	FILENAME INRAW1
Specify the location of the input dataset	LIBNAME IN1
Specify the location of the output dataset	LIBNAME OUT1
File Names	
Specify the file name of the input dataset	%LET CORE=YOUR_SAS_FILE
Specify the file name of the output dataset	%LET OUT1=OUTPUT_SAS_FILE
Input Data Characteristics	
Specify the prefix used to name the ICD-10-PCS procedure data element array in the input dataset. In this example the procedure data elements would be named I10_PR1, I10_PR2, etc., similar to the naming of ICD-10-PCS data elements in HCUP databases.	%LET PRPREFIX=I10_PR;

Description of Macro Variables and Directory Paths	SAS Program Syntax
Specify the maximum number of procedure codes on any record in the input file. In this example the maximum number of procedure codes on any record is 15. The value of NUMPR must be numeric and greater than or equal to 1; otherwise, the program will not read in any procedure codes for procedure class assignment.	%LET NUMPR=15;
Specify the number of observations to use from the input dataset. Use MAX to use all observations; use a smaller value for testing the program.	%LET OBS = MAX

Abbreviation: CSV, comma-separate values

Data Element Required for Input Dataset

The input dataset **must** contain an array of ICD-10-PCS procedure codes without decimals. These data elements are required for the assignment of the Procedure Classes Refined for ICD-10-PCS (Table 3).

Table 3. Required Input Data Element

Data Element Name in Program	Purpose	How to Modify the Data Element Name Used in the Program	Data Element Name in HCUP Databases
PR1-PRn where n is the dimension of the procedure array	Array of ICD-10-PCS procedures used to assign procedure classes	Specify prefix for PR array using macro statement %LET PRPREFIX=	I10_PR1-I10PRn in all HCUP databases starting in data year 2016

Representation of ICD-10-PCS Procedure Codes

ICD-10-PCS are represented by 7 alphanumeric codes and do not contain any explicit decimals. In the CSV mapping file, the ICD-10-PCS procedure codes are enclosed in quotation marks and do not contain decimals. In addition, the SAS program that assigns the Procedures Classes, ICD-10-PCS codes are expected to be alphanumeric character strings of length 7 without explicit decimals. Table 4 provides examples for how the ICD-10-PCS codes are represented in the CSV mapping file and expected by the SAS program.

Table 4. Example of Representation of ICD-10-PCS Procedure Codes in the Procedure Classes Refined for ICD-10-PCS

Procedure	ICD-10-PCS Procedure Code	Alphanumeric Code (With Quotation Marks) in the CSV File
Delivery of products of conception, external approach	10E0XZZ	'10E0XZZ'
Insertion of infusion device into superior vena cava, percutaneous approach	02HV33Z	'02HV33Z'
Respiratory ventilation, 24-96 consecutive hours	5A1945Z	'5A1945Z'

Abbreviations: CSV, comma separated values; ICD-10-PCS, International Classification of Diseases, Tenth Revision, Procedure Coding System

Procedure Class Data Elements in the Output File

The SAS program assumes the input file includes one or more ICD-10-PCS procedure codes in an array. The output file includes all data elements from the input file, in addition to an array of procedure class data elements (**PCLASSn**) with a one-to-one correspondence to the array of ICD-10-PCS codes. For example, PCLASS1 includes the procedure class for the ICD-10-PCS code in the first position of the ICD-10-PCS procedure code array. The length of the array of procedure class data elements (PCLASS1-PCLASSn) is the same length as the input array of procedure codes. The values of the data elements PCLASSn indicate whether the corresponding ICD-10-PCS code is one of the following:

- Minor diagnostic (value 1)
- Minor therapeutic (value 2)
- Major diagnostic (value 3)
- Major therapeutic (value 4).

In v2021.2, codes that are not valid ICD-10-PCS procedure codes from October 1, 2015 through September 30, 2021 are assigned a SAS missing value (.) for the procedure class.

An additional data element, **ORPROC**, indicates if any ICD-10-PCS code on the record is a major (i.e., operating room) procedure. It works by scanning the array of procedure class data elements (PCLASSn) created by the program. The ORPROC data element will have the value 1 if any procedure was in class 3 or 4, major diagnostic or therapeutic, respectively.

The data element **PCLASS_VERSION** indicates the version of the software that was used to assign the procedure classes.

APPENDIX A: BACKGROUND ON THE DEVELOPMENT OF THE PROCEDURE CLASSES REFINED FOR ICD-10-PCS

The [Procedure Classes for ICD-9-CM](#) was used as the starting point for the Procedure Classes Refined for ICD-10-PCS. In preparation for the October 2015 implementation of ICD-10-CM/PCS, the Healthcare Cost and Utilization Project (HCUP) tools were converted to the new coding system. The initial mapping was completed in 2014 (prior to ICD-10-PCS-coded data being available) by linking the procedure class designation of ICD-9-CM codes to ICD-10-PCS codes via the General Equivalence Mappings (GEMs) available from the Centers for Medicare & Medicaid Services (CMS) website.⁶ The determination of major procedures was based on the Medicare Severity Diagnosis Related Group (MS-DRG) identification of operating room procedures that is documented each year in Appendix E of the [MS-DRG Definitions Manual](#). Appendix E identifies operating room procedures that impact the MS-DRG assignment during the grouping process. If the ICD-10-PCS was listed in Appendix E for the fiscal year, it was considered a major procedure; all other PCS codes were assigned as minor procedures in the tool. The resultant first iteration of the ICD-10-PCS classification was considered a beta version.

Beta version v2016.1 through v2020.1 continued to use the MS-DRG designation of an operating room procedure. In v2021.1, AHRQ decided to align the definition of a major procedure with the AHRQ Quality Indicators (QI) software. The AHRQ QI software uses the identification of any possible operating room procedure for the denominator or population at risk of some of the quality indicators (e.g., select Patient Safety Indicators (PSIs) and Pediatric Quality Indicators (PDI)). In contrast, the MS-DRG software uses the identification of select operating room procedures for the purpose of assigning discharges into a surgical versus medical MS-DRG category. The underlying premise of the QI software was better aligned with the purpose of the Procedure Classes. With the v2021.2 release of the Procedure Classes Refined for ICD-10-PCS, the definition of operating room procedures now aligns with the AHRQ QI software for all codes valid October 2015 through September 2021.

In January–February 2021, the 2018 National Inpatient Sample was used to evaluate v2021.2 of the Procedure Classes Refined for ICD-10-PCS so that the tool could be transitioned out of beta status. To evaluate the reliability of the procedure class identification, a clinical panel reviewed lists of common procedures within procedure class and across age groups (pediatrics, adults, and older adults aged 65 years and older) and sex generated using the 2018 NIS. Procedures were identified by the Clinical Classifications Software Refined (CCSR) for ICD-10-PCS. In addition, the clinical panel reviewed the grouping of codes across procedure classes within a CCSR category. For example, all procedure codes in the CCSR category for Diagnostic Audiology (CCSR ENT004) are minor diagnostic. In contrast, the CCSR for Pacemaker and Defibrillator Procedures (CCSR CAR026) is a mixture of minor and major therapeutic procedures depending on the invasiveness of the procedure.

⁶ Information on the GEMS is available at <http://www.cms.gov/Medicare/Coding/ICD10/2014-ICD-10-CM-and-GEMs.html>. Accessed 10/25/2020.