



September 17, 2024

Mady Hue, CMS
Co-Chair, ICD-10 Coordination and Maintenance Committee
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Via email: <a href="mailto:nchsicd10cm@cdc.gov">nchsicd10cm@cdc.gov</a>

Ms. Hue,

On behalf of the American College of Chest Physicians (CHEST) and American Thoracic Society (ATS), we offer comments on coding proposals to be considered at the ICD-10 Coordination and Maintenance Committee meeting for October 1, 2025 implementation. Jointly, CHEST and ATS represent over 20,000 Pulmonary, Critical Care, and Sleep Medicine clinicians serving patients across the US and around the globe. It is with our shared clinical expertise in these specialties that we provide the following comments:

ATS and CHEST support the requested modifications to pulmonary heart disease (I27) reflecting Fontan physiology, including the instructions to separately code chylothorax (J94.0) and plastic (obstructive) bronchitis (J44.89) when present, as manifestations of the new code I27.841 Fontan-associated lymphatic dysfunction.

In addition, ATS and CHEST support the request from the Agency for Healthcare Research and Quality (AHRQ) for diagnosis codes to describe patients with open surgical wounds requiring delayed closure. Our members frequently provide perioperative/surgical critical care to such patients (e.g. with a postoperatively open abdomen). We support the addition of both:

- T81.3 Disruption of wound, not elsewhere classified; and
- Z98.88 Postprocedural open deep wound without disruption.

Please let us know if you have any questions or need additional information.

Sincerely,

Amy Ahasic, MD,





CHEST Co-Chair
Joint ATS/CHEST Clinical Practice Committee

Omar Hussain, DO ATS Co-Chair

Joint ATS/CHEST Clinical Practice Committee