

Aspirin at Arrival for Acute Myocardial Infarction (AMI)

Coding Specifications

Codes required to document patient has an emergency department discharge diagnosis of AMI and an emergency department visit occurred:

An ICD-9-CM diagnosis code for AMI and a CPT code and a place of service indicator for emergency department are required to identify patients to be included in this measure.

All measure specific coding should be reported on the claim(s) representing the eligible encounter.

AMI ICD-9-CM diagnosis codes

- 410.00, 410.01, 410.10, 410.11, 410.20, 410.21, 410.30, 410.31, 410.40, 410.41, 410.50, 410.51, 410.60, 410.61, 410.70, 410.71, 410.80, 410.81, 410.90, 410.91 (Acute myocardial infarction)

AND

CPT codes

- 99281, 99282, 99283, 99284, 99285
- 99291

AND

- Place of Service Indicator: 23 (emergency department)

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- **CPT II 4084F:** Aspirin received within 24 hours before emergency department arrival or during emergency department stay
- **CPT II 4084F-1P:** Documentation of medical reason(s) for not receiving or taking aspirin within 24 hours before emergency department arrival or during emergency department stay (eg, not indicated, contraindicated, other medical reason)
- **CPT II 4084F-2P:** Documentation of patient reason(s) for not receiving or taking aspirin within 24 hours before emergency department arrival or during emergency department stay (eg, patient declined, economic, social, religious, other patient reason)
- **CPT II 4084F-8P:** Aspirin was not received within 24 hours before emergency department arrival or during emergency department stay, reason not otherwise specified

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