

## Consideration of Rehabilitation Services

### Coding Specifications

Codes required to document patient has ischemic stroke or intracranial hemorrhage and a visit occurred:

A line item ICD-9-CM diagnosis code for ischemic stroke or intracranial hemorrhage and a CPT E/M service code are required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

### Ischemic stroke or intracranial hemorrhage line item ICD-9-CM diagnosis codes

- 431 (intercerebral hemorrhage),
- 433.01, 433.11, 433.21, 433.31, 433.81, 433.91 (occlusion and stenosis of cerebral arteries),
- 434.01, 434.11, 434.91 (occlusion of cerebral arteries)

AND

### CPT E/M service codes

- 99238, 99239 (hospital discharge),
- 99251, 99252, 99253, 99254, 99255 (inpatient consult)

Quality codes for this measure:

### CPT II Code descriptors

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

- **CPT II 4079F:** Documentation that rehabilitation services were considered
- **CPT II 4079F-8P:** Rehabilitation services were not considered, reason not otherwise specified

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PQRI 2009 Measure 36, Effective Date 01/01/2009

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